

New York State PUBLIC EMPLOYEES FEDERATION, AFL-CIO P.O.Box 12414 • Albany, NY 12212-2414

For Committee Use Only

2002

## 2024 SLATE NOMINATING PETITION

| SLATE NAME   | MEMBERS UNITED      |  |  |  |  |
|--|---------------------|--|--|--|--|
| We the undersigned, hereby nominate the following persons for the offices designated |                     |  |  |  |  |
| For PRESIDENT  | SHARON DESILVA      |  |  |  |  |
| For SECRETARY-TREASURER  | CHRISTINE WERNS     |  |  |  |  |
| For VICE PRESIDENT   | DONNA KARCZ         |  |  |  |  |
| For VICE PRESIDENT   | ANGELINA RODRIGUEZ  |  |  |  |  |
| For VICE PRESIDENT   | GUSTAVO SANTOS      |  |  |  |  |
| For TRUSTEE  | MICHAEL H. CZERNIAK |  |  |  |  |
| For TRUSTEE  | BETH KARALAK        |  |  |  |  |
| For TRUSTEE  | HENRY MATALA        |  |  |  |  |
| For REGION 2 COORDINATOR   | NO CANDIDATE        |  |  |  |  |
|  |                     |  |  |  |  |

No changes can be made to the above or the entire petition will be invalid.

\*The Petition ID number consists of up to the first four letters of your first name and up to the first four letters of your last name EXACTLY AS THEY APPEAR ON YOUR PAYCHECK and the first five numbers of your home zip code.

|     | SIGNATURE | PRINT FIRST AND LAST NAME | AME PETITION ID NUMBER |  |  |  |   |  |  |   |  |  |  |
|-----|-----------|---------------------------|------------------------|--|--|--|---|--|--|---|--|--|--|
| 1.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 2.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 3.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 4.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 5.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 6.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 7.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 8.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 9.  |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 10. |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 11. |           |                           |                        |  |  |  | - |  |  | - |  |  |  |
| 12. |           |                           |                        |  |  |  | _ |  |  | - |  |  |  |

I certify that, 1) I am a regular member of PEF; 2) I personally circulated this petition; and 3) to the best of my knowledge, all of the above are PEF members eligible to sign petitions for the above office. Please print name, Petition ID number, date and sign clearly. Failure to fill in all fields will deem petition invalid. Handwritten signature only, digital signature not accepted.

| Print Name:         | Signature: |
|---------------------|------------|
| Petition ID Number: | Date:      |

FORM MUST BE RECEIVED BY THE PEF ELECTIONS COMMITTEE VIA MAIL OR EMAIL TO 2024ELECTIONS@PEF.ORG, NO LATER THAN 5:00 PM ON APRIL 24, 2024. 🟻 🖽