



## STEWARD NOMINATION AND ELECTION NOTICE

PEF Division # **241**

Division Name: **CREEDMORE PSYCHIATRIC CENTER**

PETITION  
FORM ON  
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The nominations and regular election process for **PEF DIVISION # 241** will be held under the standard operating procedures of the New York State Public Employees Federation. There are presently eight (8) position(s) available:

Constituency                      (# of available positions):

STEWARD AT LARGE                      (8)

*The term of office is three (3) years, commencing September 1st, 2025.*

To be nominated, one must be a PEF member and obtain the signatures of at least three (3) members in the appropriate constituency. If you are presently **not** a PEF member, you may obtain a PEF Membership Application from the Election Committee. **A PEF member may sign only one (1)-nominating petition for their Steward constituency. A nominee may not sign their own petition.**

**FAXED PETITIONS CANNOT BE ACCEPTED.**

The Election Committee members are as follows: Kristie Furman, Director of Divisions. Divisions Department 518-785-1900 ext. 337 or 800-342-4306 ext. 337.

Petitions must be received in hand in the Divisions Elections Department at PEF Headquarters, by **5:00pm** on:

**JULY 17TH, 2025.**

Petitions may not be returned to regional offices. Forms are to be returned to:

Public Employees Federation  
Divisions Elections Department      or      EMAILED TO: [DIVISIONS@PEF.ORG](mailto:DIVISIONS@PEF.ORG)  
PO Box 12414  
Albany, NY 12212

Please note that if you are mailing your petition by overnight mail, it **MUST** be addressed as follows:  
**Public Employees Federation, C/O Divisions Department, 1168-70 Troy-Schenectady Road, Latham, NY 12110.**  
**This address is only to be used for overnight mail.**

Elections will be held only in those constituencies, which have more nominees than open positions. Elections shall be conducted by mail by the Divisions Elections Department. A double envelope system shall be used.

Ballots will be mailed by July 24th, 2025 to be returned by August 14th, 2025.

For questions regarding this election process please contact the PEF Divisions Department 518-785-1900 ext. 337 or 800-342-4306 ext. 337.



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PEF Division # **241**

Division Name: CREEDMOOR PSYCHIATRIC CENTER

**FILL OUT ALL  
SECTIONS  
COMPLETELY**

Your Petition ID is the first four letters of your first name and the first four letters of your last name as printed on your paycheck; and your home zip code.

**Nominee  
Section  
R071725**

**Nominee Petition ID**

\_\_\_\_ | \_\_\_\_ | \_\_\_\_

Name (Print): \_\_\_\_\_

Home Address: \_\_\_\_\_

City, \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Ph# \_\_\_\_\_ Work Ph# \_\_\_\_\_ Cell Ph# \_\_\_\_\_

Email (personal, not work) \_\_\_\_\_

**IMPORTANT NOTICE to the members signing this petition:** You must print, your "Petition ID": along, with your printed name and signature to complete this petition for your signature to be valid. The Petition ID# consists of "the first four letters of your first name and the first four letters of your last name EXACTLY AS PRINTED ON YOUR PAYCHECK and the five numbers of your home zip code. FOR EXAMPLE – JOSEPH SMITH = J O S E | S M I T | 9 9 8 8 7

Members signing petitions can only sign a petition once per office. Candidates are not allowed to sign their own petition. Candidates must sign at the bottom of the petition form to accept nomination. Only PEF members may sign petitions.

**Original Signatures  
Only**

**We the undersigned PEF members endorse the above named nominee**

	PRINT FULL NAME	SIGNATURE	FIRST FOUR FIRST NAME	FIRST FOUR LAST NAME	HOME ZIP CODE
	EXAMPLE JOSEPH SMITH	JOSEPH SMITH	J O S E	S M I T	99952
1			_____	_____	
2			_____	_____	
3			_____	_____	
4			_____	_____	
5			_____	_____	
6			_____	_____	
7			_____	_____	
8			_____	_____	
9			_____	_____	
10			_____	_____	

**Nominee  
Sign here**

I \_\_\_\_\_ accept the nomination for the position of \_\_\_\_\_  
for which I have been nominated.

**Incomplete Petitions will be invalidated.**