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STEWARD NOMINATION AND ELECTION NOTICE

PEF Division # 363

Division Name: WORKER'S COMPENSATION BOARD

PETITION FORM ON PAGE 2

The nominations and <u>vacancy</u> election process for **PEF DIVISION # 363** will be held under the standard operating procedures of the New York State Public Employees Federation. There are presently six (6) position(s) available:

Constituency	(# of available positions)		
B: Schenectady	(4)		
M: Menands	(2)		

This current term ends on December 31st, 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.

Petitions must be received in hand in the Divisions Elections Department at PEF Headquarters, by **5:00pm** on: **APRIL 7TH, 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
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 April 14th, 2025 to be returned by May 5th, 2025.

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

PEF

Sign here

for which I have been nominated.

STEWARD NOMINATION AND ELECTION NOTICE

PEF Division # 363

Nominee Petition ID

Division Name: WORKER'S COMPENSATION BOARD

FILL OUT ALL SECTIONS COMPLETELY

Incomplete Petitions will be invalidated.

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 V040725

	Name (Print):				_	
	Home Address:					
	City,	State Z	Zip Code		_	
	Home Ph#	Work Ph#	Cell Ph#			
	Email (personal, not work)					
MPORTANT 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 etters of your first name and the first four letters of your last name EXACTLY AS PRINTED ON YOUR PAYCECK and the five numbers of your home zip code. FOR EXAMPLE — JOSEH SMITH = JOSE SMIT 99887 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	
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Nominee accept the nomination for the position of						