

## OFFICER/STEWARD NOMINATION AND ELECTION NOTICE PEF Division # 368 Division Name: RIVERVIEW CORRECTIONAL FACILITY

The nominations and <u>vacancy</u> election process for **PEF DIVISION #368** will be held under the standard operating procedures of the New York State Public Employees Federation. There are presently one (1) position(s) available:

TREASURER

## This three (3) year term starts on April 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.

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

## MARCH 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 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. <u>This address is only to be used for overnight mail.</u>

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 March 24th, 2025 to be returned by April 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 #	NATION AND ELECTION NOTIO		Si	LL OUT ALL ECTIONS OMPLETELY
			tion ID is the first four letters of your first ur last name as printed on your paycheck	; and your home zip o	code.	Nominee Section v031725
	Name (Prir	nt):	· ·			
	Home Add	ress:				_
	City,		State	Zip Code		
	Home Ph#		Work Ph#	Cell Ph#		
	Email (per	sonal, 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 PAYCECK and the five   numbers of your home zip code. FOR EXAMPLE –   JOSEPH 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.   We the undersigned PEF members endorse the above named nominee						
	PRINT FULL NAME		Signature	FIRST FOUR	FIRST FOUR	
	_			FIRST NAME	LAST NAME	HOME ZIP CODE
	EXAMPLE	JOSEPH SMITH	JOSEPH SMITH	FIRST NAME		-
1	EXAMPLE	JOSEPH SMITH	JOSEPH SMITH			CODE
1		JOSEPH SMITH	JOSEPH SMITH			CODE
		JOSEPH SMITH	JOSEPH SMITH			CODE
2		JOSEPH SMITH	JOSEPH SMITH			CODE
2		JOSEPH SMITH	JOSEPH SMITH			CODE
2 3 4		JOSEPH SMITH	JOSEPH SMITH			CODE
2 3 4 5		JOSEPH SMITH	JOSEPH SMITH			CODE
2 3 4 5 6		JOSEPH SMITH	<i>JOSEPH SMITH</i>			CODE
2 3 4 5 6 7		JOSEPH SMITH	<i>JOSEPH SMITH</i>			CODE

Nominee Sign here

1\_

\_\_\_\_\_accept the nomination for the position of

Incomplete Petitions will be invalidated.