

AUSTRALIAN SALARIED MEDICAL OFFICERS' FEDERATION

NEW SOUTH WALES BRANCH CASUAL VACANCY

ELECTION NOTICE

Workplace Relations Act 1996

Nominations are called for:

Branch Councillors (10)

- **Nominations**, which must be in writing and comply with the registered rules of the organisation, may be made at any time from 22 June 2009. They must reach the Returning Officer at her office or postal address not later than **10:00 am on 13 July 2009**. Nominations cannot be withdrawn after this time.
- **Nomination forms** are available from the Returning Officer or from the Federation.
- **Ballot**: If a ballot is necessary, voting material will be posted on 27 July 2009 to eligible members at the address shown in the Organisation's records. Members should notify the Organisation of any change of address.

The ballot will close at **10:00 am on 17 August 2009**.

HOW TO LODGE NOMINATIONS

By Post: P.O. Box 496 Haymarket NSW 1239

By Fax: 02 9212 7336

By Hand: Australian Electoral Commission, Level 4, Roden Cutler House,
24-28 Campbell Street, Haymarket NSW 2000

Changed Address? Advise the Union now.

Note: A copy of the AEC's election report can be obtained from the organisation or from me after the completion of the election.

Noopur Madan
Returning Officer
Tel: 02 9375 6321



**AUSTRALIAN SALARIED MEDICAL OFFICERS' FEDERATION
NEW SOUTH WALES BRANCH CASUAL VACANCY**

NOMINATION FORM

NOTE:

1. Nominations open on 22 June 2009 and must reach the Returning Officer at her office or postal address not later than 10:00 am on 13 July 2009.
2. Prospective candidates should verify their financial status and any other qualifications required by the Organisation's rules prior to lodging nominations.

**NOMINEE'S
CONSENT:**

*(Print your name
as you wish it to
appear on the
ballot paper)*

I, _____
being a financial member of the Australian Salaried Medical
Officers' Federation, New South Wales Branch hereby nominate
for the office of:

OFFICE: **Branch Councillor**

POSTAL: _____
Postcode: _____

CONTACT
DETAILS: Work: _____ Home: _____
Mobile: _____ Email: _____

SIGNATURE and
DATE: Signed: _____ Date: / /

NOTE:

- As a nominee you will be sent an acknowledgment by return mail.
- It is your responsibility to ensure that your nomination is received by the Returning Officer, Noopur Madan BEFORE nominations close.

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By Hand: Level 4, Roden Cutler House, 24 Campbell Street, Sydney, NSW 2000