# Report form 2023

Date:…………………………………………….Workplace:…………………………………………………………..

Name of delegate running meeting:……………………………………………………………………………

Number of members in workplace:…………………….……………………………………………………….

Number of members attending meeting:……………….……………………………………………………

Names of newly elected delegate(s):…………………………………………………………………………..

Feedback on the election strategy:

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Comments from the meeting:

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 (Please ensure that delegate nomination forms are completed and sent in with this report.)

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| **Meeting organiser: please attach attendance record and delegate nomination forms and send to** delegate@psa.org.nz **or post to: PSA, Organising Administrator, PO Box 3817 Wellington, 6140.** |