# Report form 2024

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

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

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

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

Feedback on the Sector Report:

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Comments from the meeting:

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 (Please ensure that any delegate nomination forms are completed and sent in with this report. Delegate elections should be held only where there is a vacancy)

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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.** |