

Notice for The Election of Executive Committee of GWA, Delhi

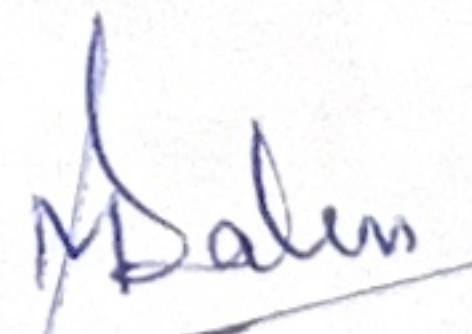
1. The election for the Executive Committee of Gada Welfare Association, Delhi (GWA), for 6th 3-year term commencing from the date the office assumed, will be conducted as per the schedule outlined in the table on Sl. No. 2.

2. Election will be held for the following office bearers of the Association:

| S. No. | Post | No. of Posts | Eligibility |
|--------|-------------------|--------------|---------------------------|
| 1. | President | One | Open for All Life Members |
| 2. | Vice President | Two | Open for All Life Members |
| 3. | General Secretary | One | Open for All Life Members |
| 4. | Joint Secretary | Two | Open for All Life Members |
| 5. | Treasurer | One | Open for All Life Members |
| 6. | Executive Members | Ten | Open for All Life Members |

3. Schedule for Election:

| S. No. | Process | Date & Time |
|--------|---|---------------------------------------|
| 1. | Notification of Election Process | 15/09/2025 |
| 2. | Filing of nomination papers to Returning Officer or his authorized representative | 28/09/2025 Time: 2 P.M. to 5 P.M. |
| 3. | Scrutiny, acceptance of nomination papers & finalization of list of Contestants | 28/09/2025 Time: 5 P.M. to 8 P.M. |
| 4. | Last date for withdrawal of nominations | 05/10/2025 Time: 2 P.M. to 5 P.M. |
| 5. | Display of final list of Contestants and intimation to the Contestants for election | 05/10/2025 Time: 6 P.M. |
| 6. | Voting, if necessary | 12/10/2025 Time: 10 A.M. to 3 P.M. |
| 7. | Counting of votes and declaration of results | 12/10/2025 Time: 4 P.M. Onwards |
| 8. | Display of list of Elected Members | 12/10/2025 |


Returning Officer
GWA Delhi

15/9/25

Nomination Form

To,

The Returning Officer
Gada Welfare Association, Delhi

Sir,

I am filling my nomination form for the post of....., of Executive Committee
of the GWA, Delhi. My particulars are as under:

1. Name of the Member :
2. Member Ship No :
3. Tel. No. :
4. Email ID :
5. Address :

Signature of the Contestant

(A) Details of Proposer

6. Name of the Proposer:
7. Membership No. :

I affirm that I know the above contestant very well and propose his name for the post
of of the Executive Committee of GWA, Delhi,

Signature of the Proposer

(B)Details of Secunder

8. Name of the Secunder:
9. Membership No. :
10. Tel. No. :
11. Email ID :
12. Address :

Signature of the Secunder

Details of Nomination Fee (Non-Refundable)

Receipt No..... Amt. Rs..... in(Cash/Cheque)

Date:

Declaration

I.....hereby declare that all the details given above are true and correct to the best
of my knowledge. I have read all the rules and regulations of the Association and shall abide to follow the same. I
shall endeavor to work the best interest of the Association.

Signature of the Contestant

Verification

This is to certify that all signatures have been done in my presence. The nomination of
Mr.....for the post of.....has been received at
(time).....on (date).....

Returning Officer
GWA Delhi