

### Office of the Chairman, Election Commission of Indian Medical Association, Karnataka State Branch

IMA House, 3rd Floor, Near IMA Circle, A.V.Road, Bangalore-560018 Email : election.imaksb@gmail.com

Chairman Members

Dr. D.SomasekharaiahDr. K.G.SomasekharDr. Vikas VMob: 9845040656Mob: 9844024597Mob: 8277125998E- drdssiah@gmail.comE- cepodemxp@gmail.comE- vikas.drv@gmail.com

Ref: EC/IMAKSB/01/2020 Date: 06<sup>th</sup> July 2020

#### **ELECTION NOTIFICATION**

To:

#### **The Honorary Secretaries**

Local Branches of IMA in Karnataka

Dear Doctors,

Sub:

- (1) Nominations to the Post of President-Elect and Four Vice-Presidents of IMA Karnataka State Branch for the year 2020-21 (one Post reserved for Women).
- (2) Nominations to the Post of President-Elect and Four Vice-Presidents of IMA Karnataka State Branch for the year 2021-22 (one Post reserved for Women)

In accordance with Bye-Law No. **18A III b** of Memorandum, Rules & Bye-Law of the Indian Medical Association, Karnataka State Branch, the Chairman Election Commission invites Branches to nominate one Member of the Association for the Office of President-Elect and four Members of the Association for the office of four Vice-Presidents to the IMA State Branch for the year 2020-21(One Post reserved for women) **and** one Member of the Association for the Office of President-Elect and four Members of the Association for the office of four Vice-Presidents to the IMA State Branch for the year 2021-22 (One Post reserved for women)

Nomination with full name and address must reach the office of the Election Commission on or before **25th July 2020 by 5.00.P.M.** Nomination received after the last date will not be considered. Eligibility for the Election of President-Elect and four Vice-Presidents as per **Rule 18 B I and II** is reproduced below for ready reference.

"The nomination may please be forwarded to the Chairman, Election Commission by **Registered Post/ Courier** and should reach the Election Commission on or before **25th July 2020**, **5.00 P.M.** and the envelope shall be addressed to The Chairman, Election Commission of Indian Medical Association, Karnataka State Branch, 3rd Floor, IMA House, Near IMA Circle, Alur Venkata Rao Road, Bangalore 560 018, superscribed as "Nominations for the elections of the IMA-KSB for the year 2020-21/2021-22".

Thanking you Yours sincerely,

Sd/-

#### DR. D.SOMASEKHARAIAH

Chairman, Election Commission

- Note: (1) Elections are conducted once in two years. Above posts are for 1 year term. Please carefully read and fill the nominations. Please strictly adhere to the bye-laws of the IMA-KSB.
  - (2) Nomination form may be photocopied from the IMA Focus June 2020 issue page No.25 & 26.
  - (3) Eligibility Criteria for President-Elect and Vice-Presidents [Bye-Law No.18 B I and II]

#### PRESIDENT-ELECT:

- (a) Should be a Life Member of IMA-KSB in the preceding 10 years and should be a Member of the IMA-KPPS and IMA-KSSS (if eligible).
- (b) Should have been a President or Vice-President of any Local Branch or Should have been an Office bearer of the State Branch

#### **VICE-PRESIDENTS:**

- (a) Should be a Life Member of IMA-KSB in the preceding 10 years and should be a Member of the IMA-KPPS and IMA-KSSS (if eligible).
- (b) Should have been a Office Bearer of any Local Branch or Should have been an Office bearer of the State Branch

#### **IMPORTANT DATES**

1.	Last date for receiving Nominations with Acceptance,	25th July 2020 -5.P.M.
2.	Last date for withdrawal	31st July 2020 -5.P.M
3.	Date of posting of Ballots to the voters	18th Aug. 2020 -5.P.M
4.	Date for claiming duplicate Ballot	After 1st Sept. 2020 -5.P.M
5.	Last date to receive the voted Ballots by election commission	15th Sept. 2020 -5.P.M.

#### NOTE:

- [1] Contestants who fail to send Rs.5000/- by D.D. for the post of President-Elect, Rs. 2000/- by D.D. for the post of Vice-President and letter of acceptance willingness certificate before 5.00 P.M of 25th July 2020 will automatically be considered as having withdrawn from the contest.
- [2] D.D.Shall be drawn in favor of "IMA-KSB Election Fund" payable at Bangalore.
- [3] The Honorary Secretary of the Local Branch shall certify the Eligibility of the candidate for the post of President-Elect and Vice-Presidents and that certificate shall be in a Branch Letter Head and shall enclose the same with the nomination Form.
- [4] If no nominations received for any of the posts, the State Council will take future action in this regard.
- [5] Nomination application forms will be strictly scrutinized. Incomplete nomination will be rejected.
- [6] No hand delivery.
- [7] Applicants/contestants should strictly mention the year for which they are contesting. Wrong entries lead to rejection of applications/nominations form.



### NOMINATION FORM

To: Date: The Chairman, Election Commission Indian Medical Association, Karnataka State Branch, 3 <sup>rd</sup> Floor, IMA House, Near IMA Circle, Alur Venkata Rao Road, Bangalore - 560 018. E-mail: election.imaksb@gmail.com	_
Sir, Sub: Nominations for the Post of (a) President-Elect and (b) four Vice-Presidents the Indian Medical Association, Karnataka State Branch for the year 2020-2	
The General Body /Executive Committee of the IMA  Branch held on has resolved propose the name of Dr.  for the Post of President-Elect / Vice-President for the year 2020-21.	l to
Name: Signature of the Hon. Secretary of the Local Bran	ch
WILLINGNESS CERTIFICATE BY THE CANDIDATE	
I am willing to contest and accept the nomination proposed by IMA Local Branch a enclose the D.D. for Rs/- for President-Elect/Rs/- for Vice-President the year 2020-21 bearing No of	for
Name and address of the Candidate Dr	
	 Г D
Date: Signature of the Candidate:	ıte



### NOMINATION FORM

To: The Chairman, Election C Indian Medical Association Karnataka State Branch, S Near IMA Circle, Alur Vo E-mail: election.imaksb(	on, 3 <sup>rd</sup> Floor, IMA House, enkata Rao Road, Bangalore - 560 018.
	he Post of (a) President-Elect and (b) four Vice-Presidents of Association, Karnataka State Branch for the year 2021-22.
The General Body /Exec	utive Committee of the IMA
Branch held on	has resolved to
propose the name of Dr	for the rice-President for the year 2021-22.
Post of President-Elect / V	ice-President for the year 2021-22.
Name: Seal:	Signature of the <b>Hon. Secretary of the Local Branch</b>
Scal.	from Secretary of the Local Branch
WILLING	NESS CERTIFICATE BY THE CANDIDATE
enclose the D.D. for Rs President for the year 202	nd accept the nomination proposed by IMA Local Branch and s/- for President-Elect / Rs/- for Vice-1-22 bearing No of
	Candidate
Resi:	, Hosp, Mob:
E-mail:	
Date:	Signature of the Candidate
	_



### Office of the Chairman, Election Commission of Indian Medical Association, Karnataka State Branch

IMA House, 3rd Floor, Near IMA Circle, A.V.Road, Bangalore-560018 E-mail: election.imaksb@gmail.com

Chairman

Dr. D.Somasekharaiah

Mob: 9845040656

E- drdssiah@gmail.com

Dr. K.G.Somasekhar

Mob: 9844024597 E- cepodemxp@gmail.com **Dr. Vikas V** Mob: 8277125998

E- vikas.drv@gmail.com

Ref: EC/IMAKSB/02/2020

Date: 06<sup>th</sup> July 2020

Members

#### **ELECTION NOTIFICATION**

To:

The Members of IMA Karnataka State Branch

#### Dear Doctor,

- Sub: (1) Nominations to the Post of Hon. State Secretary, Hon. Joint Secretary, Hon. Treasurer, Internal Auditor, Chairman-Subject Committee, Chairman-Finance Committee, Chairman Rules and Bye-Laws Committee, Chairman-IMA-AMS, Honorary Secretary-IMA-AMS, Director-IMA-CGP and Honorary Secretary-IMA-CGP and Governing Council Members for CGP-One Regular and One Alternate, of IMA-CGP, Karnataka State Branch for the year 2020-22.
  - (2) Nominations to the Post of Public Relations Officer, Editor-KMJ, Hon. Secretary-KMJ, Editor-IMA Focus, Hon. Secretary-IMA Focus, Regular Central Working Committee Members-26 posts and Alternate Central Working Committee Members-26 Posts, Six State Working Committee members for the year 2020-21.
  - (3) Nominations to the Post of Public Relations Officer, Editor-KMJ, Hon. Secretary -KMJ, Editor-IMA Focus, Hon. Secretary-IMA Focus, Regular Central Working Committee Members-26 posts and Alternate Central Working Committee Members-26 Posts, Six State Working Committee members for the year 2021-22.
  - (4) Nominations to the IMA KSB Building Sub-Committee for the Post of Chairman one post, Vice-Chairman one post, Secretary one post and members Nine posts: Two from each of 4 Revenue Divisions of Karnataka State and One from Bengaluru City, of IMA Karnataka State Branch Building Committee for the year 2020-22.
  - (5) Nominations to the IMA KSB Club Sub-Committee for the Post of Chairman one post, Vice-Chairman one post, Secretary one post and members Nine posts: Two from each of 4 Revenue Divisions of Karnataka State and One from Bengaluru City, of IMA Karnataka State Branch Club for the year 2020-22.

The Nomination for the above posts shall be duly proposed and seconded by Life members of IMA Karnataka State Branch with consent of the candidate.

"The nomination may please be forwarded to the Chairman, Election Commission by **Registered Post/Courier** and should reach the Election Commission on or before **25th July 2020, 5 P.M.** and the envelope shall be addressed to The Chairman, Election Commission of Indian Medical Association, Karnataka State Branch, 3<sup>rd</sup> Floor, IMA House, Near IMA Circle, Alur Venkata Rao Road, Bangalore 560 018, superscribed as "Nominations for the elections of the IMA-KSB for the

year, 2020-22 (Sub: 1, 4 and 5)/2020-21 (Sub: 2)/2021-22 (Sub: 3), whichever is applicable.

Thanking you,

Yours sincerely,

sd/-

#### Dr. D.SOMASEKHARAIAH

Chairman, Election Commission

- Note: (1) Election are conducted once in two years. Some of the above posts are for one year term and some are for two years term. Carefully read and fill up the nominations forms. Please adhere to Bye-Laws of IMA-KSB.
  - (2) Nomination form may be photocopied from the IMA Focus June 2020 issue page No. 29 to 33.

#### **Eligibility Criteria for other Posts:**

Hon. State Secretary, Hon. Joint Secretary, Hon. Treasurer, Public Relations Officer, Internal Auditor, Editor-KMJ, Hon. Secretary-KMJ, Editor-IMA Focus, Hon. Secretary-IMA Focus, Regular Central Working Committee Members, Alternate Central Working Committee Members, Six State Working Committee members, Chairman- Subject Committee, Chairman- Finance Committee, Chairman- Bye-Laws Committee. Chairman- IMA-AMS, Hon. Secretary-IMA-AMS, Director-IMA-CGP, Hon. Secretary-IMA-CGP, Governing Council Members for CGP-One Regular and One Alternate, Chairman, Vice-Chairman, Secretary and 9 members of IMA-KSB Building Sub-Committee, Chairman, Vice-Chairman, Secretary and 9 members of IMA-KSB Club-Sub-Committee.

- 1. Should be Life Member of IMA in preceding 5 years
- 2. Should be a member of IMA-KPPS and IMA-KSSS (if eligible).
- 3. Should have been an Office bearer of any Local Branch (or) Should have been an office-bearer of State Branch (or) should have been Member of the State Council and should have attended minimum of 50% of the Meetings of the previous 2 years.
- 4. Please note: Only members of the IMA-KSB Club are eligible to contest for all posts of IMA-KSB Club Sub-Committee.

Hon. State Secretary and Hon. Treasurer should be from IMA Karnataka State branch Headquarters Bengaluru city branches only.

#### **IMPORTANT DATES**

Last date for receiving Nominations with Acceptance,
 Last date for withdrawal
 Date of posting of Ballots to the voters
 Date for claiming duplicate Ballot
 Last date to receive the voted Ballots by election commission
 Last date to receive the voted Ballots by election commission
 Last date to receive the voted Ballots by election commission

- **NOTE:** [1] Contestants who fail to send Rs.300/- by D.D. and letter of acceptance / willingness certificate before 5.00. P.M. of 25th July 2020 will automatically be considered as having withdrawn from the contest.
  - [2] D.D. Shall be drawn in favor of "IMA-KSB Election Fund" payable at Bengaluru.
  - [3] Nomination application forms will be strictly scrutinized. Incomplete nomination will be rejected.
  - [4] No hand delivery.
  - [5] Applicants/contestants should strictly mention the year for which they are contesting. Wrong entries lead to rejection of applications /nominations form.



To:		NOMINA	TION FORM	Date:
The Chairma			• .•	
		lian Medical Assoc Floor, IMA House		
				il: election.imaksb@gmail.com
	ircie, Aiur ven	Kata Kao Koau, De	nigaiuru - 16. E-ilia	ii . election.imakso@gman.com
	Treasurer, In Committee, C Honorary Sect - CGP. and Go	ternal Auditor, C Chairman-Rules a retary-IMA-AMS verning Council M	Chairman-Subject and Bye-Laws Co , Director-IMA-Co	ary, Hon. Joint Secretary, Hor Committee, Chairman-Financ Ommittee, Chairman-IMA-AMS GPand Honorary Secretary – IMA One Regular and One Alternate o
A) Proposed	by			
I Dr		Member of	FIMA	Branch propose the Name of
Dr		for the pos	st of	for the year 2020-22
Signature of	the Proposer		••••	
Name (in Blo	ock Letters) Dr.			
Address:				
B) Seconded	by			
•				
`	<i>'</i>			
C) I am willi	ng to contest f	or the post of		
Signature of	the Candidate:			
Name (in Blo	ock Letters) Dr.			
Address:				
Ph: No.(STD	O Code	[R]	[H]	Mob:
Fax:		Email:		
	WILLI	NGNESS CERTI	FICATE BY THE	CANDIDATE
I am willing				embers and enclose the D.D. for
_		•		Bank.
Address :				
Date:				Signature of the Candidate
Place:				



10:	NOMINATION FORM	Date:
The Chairman,		
Election Commission of Inc		
Karnataka State Branch, 3 <sup>rd</sup>		1 1 0 1
Near IMA Circle, Alur Veni	kata Rao Road, Bengaluru-18. E-mail: elec	tion.imaksb@gmail.com
Sir,		
KMJ, Editor- Committee M	to the Post of Public Relations Officer, E -IMA Focus, Hon. Secretary-IMA Focus embers - 26 posts and Alternate Central W State Working Committee members for the	s, Regular Central Working Vorking Committee Member
A) Proposed by		
I Dr	Member of IMA	Branch propose the
Name of Dr	for the post of	for the year 2020-21.
Signature of the Proposer		
Name (in Block Letters) Dr		
Address:		
B) Seconded by		
Signature		
Name (in Block Letters) Dr		
Address:		
C) I am willing to contest for	or the post of	
Signature of the Candidate:		
Name (in Block Letters)Dr.		
Address:		
Ph: No. (STD Code) [	[R] [H] N	Mob:
Fax: Email:		

#### WILLINGNESS CERTIFICATE BY THE CANDIDATE

I am willing to contest and accept the nomination proposed by Members and enclose the D.D. for

Rs/- bearing No	ot	Bank.
Name of the Candidate Dr	r	
Address:		
Date:		
Place:	Signature	of the Candidate



To:	NOMINATION FORM	Date:
The Chairman,		
Election Commission Indian	· · · · · · · · · · · · · · · · · · ·	
Karnataka State Branch, 3 <sup>rd</sup> F		
Near IMA Circle, Alur Venka	ta Rao Road, Bengaluru-18. E-mail : 6	election.imaksb@gmail.com
KMJ, Editor-IN Committee Men	the Post of Public Relations Office MA Focus, Hon. Secretary-IMA Fo nbers - 26 posts and Alternate Centra ate Working Committee members fo	ocus, Regular Central Workin al Working Committee Member
A) Proposed by		
	Member of IMA for the post of	1 1
Signature of the Proposer		
Name (in Block Letters) Dr		
Address:		
B) Seconded by Signature		
Name (in Block Letters) Dr.		
Address:		
C) I am willing to contest for	the post of	
Signature of the Candidate:		
Name (in Block Letters) Dr		
Address:		
Ph: No.(STD Code) [R	][H]	Mob:
Fax: Email:		
WILLIN	CNESS CEDTIFICATE BY THE C	CANDIDATE

#### WILLINGNESS CERTIFICATE BY THE CANDIDATE

I am willi	ng to contest and accept the	nomination proposed by Members	and enclose the D.D.
for Rs	/- bearing No	of	Bank
Name of t	he Candidate Dr		
Address: .			
Date:			
Place:		Signature of	the Candidate



To:			NOMINA	ATION FORM	Date:	
The Ch		,	1' N. A. 1' 1 A	• 4•		
			lian Medical Asso Floor, IMA Hous			
			ata Rao Road, Ber			
		ction.imaksb@g		igaiuru - 10.		
L-IIIaII	. 010	ction.imakso@g	3111411.00111			
Sir,						
Sub:	(1)	post, Vice-Cha	airman one post,	Secretary one pos	nittee for the Post of Cha t and members Nine p ate and One from Beng	osts :- Two
		of IMA Karna	taka State Branc	h for the year 2020-	22.	
A) Prop	nosed	lbv				
			Membe	er of IMA	Branch propos	se the Name
					for the yea	
Signatu	are of	the Proposer		•••••	-	
Name	(in B	Block Letters) Dr	r			
Addres	ss:					
B) Seco	ondec	lby				
Signatu	are					
Name (	(in B	lock Letters) Dr				
Addres	ss:					
C) I am	n will	ing to contest f	or the post of			
Signatu	are of	f the Candidate:				
Name (	(in B	lock Letters) Dr				
Addres	ss:					
Ph: No	.(STI	D Code	[R]	[H]	Mob:	
		WILLI	NGNESS CERT	IFICATE BY THE	CANDIDATE	
I am w	illing	to contest and	accept the nomina	tion proposed by M	embers and enclose the	D.D. for
Addres	SS :					
Date: _					Signature of the Cand	lidate
Place.						



To:	NOMINATIO	N FORM	Date:
The Chairman,			
Election Commission of Indi		n,	
Karnataka State Branch, 3 <sup>rd</sup> F			
Near IMA Circle, Alur Venka	ta Rao Road, Bengaluri	u - 18. E-mail : el	lection.imaksb@gmail.com
Sir,			
Sub: (1) Nominations to post, Vice-Chair from each of 4	irman one post, Secre	etary one post Karnataka Stat	ee for the Post of Chairman one and members Nine posts: - Two te and One from Bengaluru City 120-22.
A) Proposed by			
I Dr	Member of IN	<b>ЛА</b>	Branch propose the Name
of Dr	for the post of	of	for the year 2020-22.
Signature of the Proposer			
,			
B) Seconded by			
Signature			
C) I am willing to contest fo	•		
Signature of the Candidate: .			
Address:			
Ph: No.(STD Code	[R]	[H]	Mob:
Fax:	Email:		
WILLIN	NGNESS CERTIFICA	ATE BY THE (	CANDIDATE
_	_		mbers and enclose the D.D. for
			Bank.
1 14G1C00	•••••	•••••	
Date:			Signature of the Candidate
Place:			_