## NOMINATION FOR APPOINTMENT TO THE U.S. HONEY PRODUCER RESEARCH, PROMOTION, AND CONSUMER INFORMATION ORDER (7 CFR PART 1245)

The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 552a) and the Paperwork Reduction Act of 1995. The authority for requesting this information to be supplied on this form is the Commodity Promotion, Research, and Information Act of 1996, Pub. L. 104-127, 110 Stat. 1032 (7 U.S.C. 7411-7425). Furnishing the requested information is necessary for the administration of this program. Submission of the Tax Identification Number is mandatory, and will be used to determine affiliation or entity

**1.** Please mark an "X" in the appropriate block for which you are submitting nominations. (Mark only one box. If you are submitting nominations for more than one region below, a separate form must be filled out for each region.)

[] Region 1	[] Region 2	[] Region 3	[] Region 4	[] Region 5	[] Region 6	[] Region
7						

2. Names and Addresses of Nominees.				
3. Name of Person or Organization s	ubmitting these nomina	tions		
Name of Organization/Person:			Tax ID/Bus.#	
Address:				
City:	State:	Zip:		
Phone No	Fax No			
E-Mail:				
Print Name and Title of Person Com	pleting this Nomination			
Signature			Date	

Return Original Forms to: U.S. Honey Producer Board Street, City, State, Zip Code According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0581-NEW. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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HPR-NOM (05-09)