

**United States Department of Agriculture
Agricultural Marketing Service**

**OFFICIAL REFERENDUM BALLOT
Peanut Promotion, Research, and
Information Order**

To be counted, completed ballots must be received by the U.S. Department of Agriculture on Month __, 20 __, by x:xx p.m., Eastern Daylight Saving Time.

NOTE: Only one vote will be counted for each eligible producer. Incomplete ballots will be INVALID and will not be counted in the referendum.

I. CERTIFICATION

1. I paid assessments under the National Peanut Board Check-off during the period from Month xx, 20xx to Month xx, 20xx.

YES

NO

II. VOTE

Instructions: Mark one box only.

Do you favor the continuance of the National Peanut Board Check-off implemented under the Peanut Promotion, Research, and Information Order?

YES

NO

III. MAILING

Return ballot in the enclosed postage-paid envelope.

If postage-paid envelope is not available, mail your ballot(s) to:

U.S. Department of Agriculture, AMS
PEANUT REFERENDUM
P.O. Box xxxxxx
Washington, D.C xxxxx-xxxx

FALSIFICATION OF INFORMATION OR MISREPRESENTATION OF IDENTITY ON THIS GOVERNMENT DOCUMENT MAY RESULT IN A FINE OF NOT MORE THAN \$10,000, OR IMPRISONMENT FOR NOT MORE THAN FIVE YEARS, OR BOTH. (18 U.S.C. 1001)

According to the Paperwork Reduction Act of 1995, an agency may or 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 the information collection is 0581-0093. 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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ALL BALLOTS MUST BE SIGNED BELOW IN ORDER TO BE COUNTED.

I **CERTIFY** that I am the person authorized to cast this ballot and that the information contained on this ballot is true, complete, and correct to the best of my knowledge and belief, and is made in good faith. If this ballot is being cast on behalf of any group of individuals, partnership, corporation, or other business entity engaged in the production of peanuts, I also **CERTIFY** that I have the authority to cast this ballot.

SIGNATURE

DATE

COMPANY NAME

() - _____
BUSINESS TELEPHONE NUMBER

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[This will be on the envelop sent to peanut producers to sign as part of the ballot]

VS-1155 (09-02)
United States Department of Agriculture
Marketing and Regulatory Programs
Agricultural Marketing Service
P.O. Box 3700, Room 3834, South Bldg.
1400 Independence Avenue, SW
Washington, DC 20250-0244

Official Business

BALLOT

FV-1155 BALLOT