

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

OFFICIAL REFERENDUM BALLOT

**U.S. Honey Producer Research, Promotion, and
Consumer Information Order**

**To be counted, completed ballots must be received by the
U.S. Department of Agriculture on Month xx, 20xx, by
xx:xx p.m. Eastern 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 am currently a honey **PRODUCER** during the period Month xx, 20xx to Month xx, 20xx.

2. I produced _____ pounds of honey between Month xx, 20xx to Month xx, 20xx.

Preprinted totals for producer include honey reported by Month xx, 20xx. If corrections need to be made, please cross out and **legibly** write in the correct information. **Submit documentation to support these changes along with your ballot to USDA.**

II. VOTE

Instructions: Mark one box only.

**Do you favor implementing the U.S. Honey Producer Research,
Promotion, And Consumer Information Order?**

YES

NO

III. SIGNATURE

ALL BALLOTS MUST BE SIGNED AND DATED 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 honey, I also **CERTIFY** that I have the authority to cast this ballot.

X _____
SIGNATURE

DATE

COMPANY NAME

BUSINESS TELEPHONE NUMBER

IV. MAILING

Return ballot in the enclosed, postage-paid envelope.

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)

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