

WALLA WALLA SWEET ONION BALLOT
UNITED STATES DEPARTMENT OF AGRICULTURE
Agricultural Marketing Service
Fruit and Vegetable Programs
Northwest Marketing Field Office
805 SW BROADWAY, SUITE 930
PORTLAND, OR 97205

TO WALLA WALLA SWEET ONION PRODUCERS:

Marketing Order No. 956, regulating the handling of sweet onions grown in the Walla Walla Valley of Southeast Washington and Northeast Oregon, requires the Secretary of Agriculture to conduct a referendum every six-years to ascertain whether producers favor continuance. As a consequence, an order directing that a referendum be held was published in the Federal Register on _____, 20__.

A Producer Referendum Ballot is on the reverse side of this page. Also enclosed are:

- 1) Voting Instructions and Rules Governing Producer Eligibility to Vote;
- 2) News Release issued on the Referendum; and
- 3) Copy of the Referendum Order dated _____, 20__.

The voting period for the referendum is _____, 20__ through _____, 20__. Please vote promptly because **Ballots postmarked later than _____, 20__ cannot be opened or counted.** Each Ballot will be held in strict confidence.

Referendum Agent
Phone: (503) 326-2724

PRODUCER REFERENDUM BALLOT
Marketing Order No. 956: Walla Walla Sweet Onions

Please read the enclosed VOTING INSTRUCTIONS AND RULES GOVERNING PRODUCER ELIGIBILITY TO VOTE before completing this Ballot. This referendum is being held to determine producer support for marketing order no. 956, regulating the handling of sweet onions grown in the Walla Walla Valley of Southeast Washington and Northeast Oregon (Order). The Secretary of Agriculture (Secretary) will consider termination of this Order if less than two-thirds of those voting and less than two-thirds of the volume represented in the referendum favor continuance.

- A. Do you favor continuance of Marketing Order No. 956, regulating the handling of sweet onions grown in the Walla Walla Valley of Southeast Washington and Northeast Oregon?
 YES NO

PRODUCER ELIGIBILITY STATEMENT

- B. I hereby certify that I am currently a producer of sweet onions within the production area and that during the representative period _____, 20__, through _____, 20__, I produced for the fresh market: _____ hundredweight on _____ acres in _____ County(ies).

C.

Name of Packing House(s) that handled your Sweet Onions	Hundredweight	Affiliation (co-op or independent)

- D. Producer's Name _____ Phone Number _____
 Name of Business _____
 Mailing Address _____

- E. If this Ballot is cast by an officer or employee of a partnership, LLC, corporation, association or other business unit, my signature below further certifies that I am duly authorized to vote on behalf of the producing entity name on this ballot and that I will submit evidence of such authority at the request of an Agent of the Secretary.
 Partnership LL Corporation Association Other _____

 Signature¹ Title

If a Partnership or Joint Venture, list name(s).

- F. **I hereby certify that the information I provided on this Ballot is accurate and correct to the best of my knowledge.**

 Signature¹ Title

¹Your signature certifies that you have the authority to take such action and will submit supplementary evidence of such authority at the request of an agent of the Secretary. The information provided in this Ballot is required to determine the voter eligibility and vote of sweet onion producers. Falsification of information on this government document may result in a fine, imprisonment, or both. (18 U.S.C. 1001)

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 0581-0178. The time required to complete this information collection is estimated to average 20 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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PORTLAND, OR 97205

◆ FOLD HERE, TAPE AT THE TOP, AND MAIL PROMPTLY ◆

**WALLA WALLA
SWEET ONION
BALLOT**

VOTING INSTRUCTIONS AND RULES GOVERNING PRODUCER ELIGIBILITY TO VOTE

- I. **VOTING PERIOD:** _____, 20__ through _____, 20__
- II. **REPRESENTATIVE PERIOD:** _____, 20__ through _____, 20__
- III. **PRODUCTION AREA:** Designated areas in Umatilla County, Oregon, and Walla Walla County, Washington.
- IV. **PERSONS ELIGIBLE TO VOTE:** Any person who is currently a fresh sweet onion producer in the production area and produced such sweet onions during the representative period _____, 20__ through _____, 20__, is entitled to cast one Ballot. **Each separate business unit, partnership, LLC, family enterprise, corporation, association, estate, or firm is entitled to one vote.**

“Producer” means any individual, partnership, LLC, corporation, association, institution, estate, or other business unit who:

- Owns and farms land resulting in ownership of the sweet onions produced thereon;
- Rents and farms land resulting in ownership of all or a portion of the sweet onions produced thereon; or
- Owns land from which, as rental for such land, ownership is obtained of a portion of the sweet onions produced thereon. (A lien holder, cash landlord, or person having only a financial interest in the sweet onion crop is not eligible to vote.)

V. HOW TO VOTE:

- A. Indicate your vote by placing an “X” in the appropriate box.
- B. Certify your sweet onion production by listing the volume in hundredweight that you produced, the number of acres in production, and the county or counties in which such sweet onions were produced during the representative period _____, 20__ through _____, 20__. If you are renting on a share-crop basis, show only that part of the crop represented by your share.
- C. List the names of packing houses that handled your sweet onions, the hundredweight, and affiliation (co-op or independent).
- D. Print or type your name, phone number, business name, and address.
- E. Proxy voting is not authorized. If the Ballot is cast by an officer or employee of a partnership, LLC, corporation, association or other business unit, check the box to indicate your business designation, and sign to indicate authority to vote. If a partnership or joint venture, list names of partners.
- F. Sign below the certification. Incomplete or unsigned Ballots cannot be counted. Fold your Ballot so the Referendum Agent’s address is displayed, seal with tape and mail to Referendum Agent, USDA-AMS-FV-NWMFO, 805 SW BROADWAY, SUITE 930, PORTLAND, OR 97205. For further information, please call (503) 326-2724.

Ballots must be postmarked by _____, 20__ to be valid.