

UNITED STATES DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
FRUIT AND VEGETABLE PROGRAMS

**INSTRUCTIONS FOR COMPLETING THE ATTACHED
NATIONAL LEAFY GREEN VEGETABLE BOARD NOMINATION FORM
BY GENERAL PUBLIC**

The National Leafy Green Vegetable Board (Board) administers the National Marketing Agreement Regulating Leafy Green Vegetables. Nominees must be from the production area and be willing to serve on the Board for a two-year term of office. Each of the members will have an alternate. The retailer, foodservice operator, and public members and their alternate members may not be engaged in the production or handling of leafy green vegetables. Additionally, the retailer and foodservice operator members and alternates shall be at the time of their selection and throughout their term of office, an owner, officer, or employee for the seat selected.

Please complete the attached form if you wish to nominate yourself and/or another eligible person for the following seats on the Board:

1. One retailer representative;
2. One foodservice operator representative; and
3. One public representative.

The completed Nomination Form must be postmarked, faxed, or hand-delivered to _____ no later than _____ p.m. on _____, 20____ to be valid. Multiple Nomination Forms may be submitted.

As Nomination Forms are received, nominees will be notified of their nomination, and asked to complete a National Leafy Green Vegetable Board Background Information form. All qualified nominees will be reported to the Secretary of Agriculture. A full copy of the Marketing Agreement may be found online at _____ or by calling _____.

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 10 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.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

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 BY GENERAL PUBLIC**

Nomination	<input type="checkbox"/> Retailer <input type="checkbox"/> Foodservice Operator <input type="checkbox"/> Public		
Full Name		Phone Number	
Company Name		Fax Number	
Email Address			
Mailing Address			
Nomination	<input type="checkbox"/> Retailer <input type="checkbox"/> Foodservice Operator <input type="checkbox"/> Public		
Full Name		Phone Number	
Company Name		Fax Number	
Email Address			
Mailing Address			
Nomination	<input type="checkbox"/> Retailer <input type="checkbox"/> Foodservice Operator <input type="checkbox"/> Public		
Full Name		Phone Number	
Company Name		Fax Number	
Email Address			
Mailing Address			

CERTIFICATION TO BE COMPLETED BY NOMINATOR:			
I certify that all information provided is accurate to the best of my knowledge.			
Signature		Date	
Full Name		Title	
Company Name		Phone No.	
Email Address		Fax No.	
Mailing Address			