UNITED STATES DEPARTMENT OF AGRICULTURE

AGRICULTURAL MARKETING SERVICE

FRUIT AND VEGETABLE PROGRAMS

**COOPERATIVE ASSOCIATION PRODUCER BALLOT**

**ON THE CONTINUANCE OF MARKETING ORDER NO. 905, REGULATING**

**ORANGES, GRAPEFRUIT, TANGERINES AND TANGELOS GROWN IN FLORIDA**

I hereby certify that I have been authorized1 by the

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name of Cooperative)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Address of Cooperative)*

to furnish the following information and to cast this Ballot on behalf of such cooperative association. There are \_\_\_\_\_\_\_\_ members of this cooperative who, during the period \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ through \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ produced for shipment to the fresh market the following number of boxes (1-3/5 bushel equivalents) of citrus grown in Florida:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Boxes of Oranges |  | Boxes of Tangerines |
|  | Boxes of Grapefruit |  | Boxes of Tangelos |

A list showing names of our producers and the volume shipped by each is attached.



A "YES" vote means you favor continuance of Marketing Order No. 905 regulating the handling of Oranges, Grapefruit, Tangerines, and Tangelos Grown in Florida.

A "NO" vote means you do not favor continuance of Marketing Order for No. 905 regulating the handling of Oranges, Grapefruit, Tangerines, and Tangelos Grown in Florida.

**Do you favor the continuance of Marketing Order No. 905, regulating the handling of Oranges, Grapefruit, Tangerines, and Tangelos Grown in Florida?**

**⁭ YES ⁭ NO**

|  |  |  |
| --- | --- | --- |
|  | By |  |
| Name of Cooperative |  | Signature of Authorized Agent |
|  |  |  |
|  |  |  |
|  |  | Title |
| Affix corporate seal;  if none, so state |  |  |
|  |  | Date |

1 Prepare certified copy of the Resolution authorizing the casting of this Ballot.

***NOTE*:** 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 0581-0189. The time required to complete this information collection is estimated to average 2 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.