

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

CITRUS PRODUCER REFERENDUM BALLOT
MARKETING ORDER NO. 906

I. REFERENDUM PERIOD:

The Secretary of Agriculture (the "Secretary") has ordered that a referendum be conducted among the producers who, during the period of _____, 20__ through _____, 20__, were engaged, in the counties of Cameron, Hidalgo, and Willacy in the State of Texas, in the production of oranges and grapefruit for market, to determine whether such producers favor the continuation or termination of Marketing Order No. 906, regulating the handling of oranges and grapefruit grown in the Lower Rio Grande Valley in Texas (the "Order"), and the corresponding Marketing Agreement, as amended. The referendum period is _____, 20__ through _____, 20__. It is important that you, as a producer of oranges or grapefruit, vote in the referendum. Please indicate whether you favor continuation or termination of the Order on the enclosed Ballot.

II. INSTRUCTIONS FOR VOTING:

All Ballots must show:

1. The producer's full name and mailing address.
2. Your vote.
3. The producer's type of business during the 20__ - 20__ season.
4. The quantity of oranges and grapefruit produced for market during the 20__ - 20__ season.
5. Orange and grapefruit acreage in the representative period (_____, 20__ - _____, 20__) and the county(ies) where grown.
6. The name of the firm that handled your 20__ - 20__ crop of oranges and grapefruit. If production was handled by more than one handler, name all handlers.
7. The name in which the legal title of the grove(s) is recorded.
8. Your signature, title or capacity, and mailing address.

III. PERSONS ELIGIBLE TO VOTE:

Any person who :

1. is now engaged in Cameron, Hidalgo, or Willacy County, Texas in the production of oranges or grapefruit for market; and
2. was so engaged during the period _____, 20__ through _____, 20__.

INDIVIDUAL OWNER: An individual owner is any producer who has the sole interest in the oranges or grapefruit he/she produces. He/she may cast only one Ballot regardless of the number of groves he/she operates.

On Marketing Order No. 906, regulating the handling of oranges and grapefruit grown in the Lower Rio Grande Valley in Texas,

I (We) _____
(print full name of producer)

of _____,
(print full mailing address of producer, including zip code)

a producer of citrus in the counties of Cameron, Hidalgo, and Willacy in the State of Texas, do hereby vote as follows:

1. Do you favor continuance of Marketing Order No. 906, regulating the handling of oranges and grapefruit grown in the Lower Rio Grande Valley in Texas? (mark an "X" in the appropriate box)

**YES, I favor
continuance**

**NO, I do not
favor continuance**

2. I (We) produced citrus during the period from _____, 20__ through _____, 20__ as
(mark an "X" in the appropriate box): Individual Partnership Corporation Estate

3. My (our) production was: _____ tons of grapefruit on _____ acres, in
_____ County and _____ tons of oranges on _____ acres, in
_____ County.

NOTE: If you had a crop failure or your grove was nonproductive, so indicate. If you are operating on a share crop basis, report only that part of the production representing your share.

4. This production was marketed through the following handler(s). (If more room is needed, write the names of the handlers and their addresses on a separate sheet of paper and return with the Ballot.)

Name of packing house(s)

Address (include city, county, State, and zip code)

5. Print name in which legal title of the grove(s) is recorded, and the subdivision in which it is located:

CERTIFICATION STATEMENT

I certify that the information reported hereon is correct. (If this ballot is being cast on behalf of a corporation or estate, my signature below further certifies that I have authority to cast the ballot of such producer and that I will submit evidence of such authority at the request of an Agent of the Secretary.)

Signature of producer or authorized person

Title or capacity (sole owner, partner, president, executor, etc.)

Mailing Address _____
(include City, State, County, and Zip Code)

**INCOMPLETE BALLOTS, OR BALLOTS POSTMARKED LATER THAN
_____, 20__, CANNOT BE COUNTED.**

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 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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