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AG CODE 0237

UNITED STATES DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE FRUIT AND VEGETABLE PROGRAMS MARKETING ORDER ADMINISTRATION BRANCH 1400 INDEPENDENCE AVE., S.W. ROOM 1406 - SOUTH BUILDING WASHINGTON, DC 20250-0237

Official Business Penalty for Private Use \$300

No Postage Stamp Necessary Postage Has Been Prepaid By:

Referendum Agent Southeast Marketing Field Office 799 Overlook Drive, Suite A Winter Haven, FL 33884

BALLOT

INSTRUCTIONS: Complete the Ballot and Certification. Fold on the U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE dotted line with the address displayed, and return. Information you enter on this Ballot will be kept strictly confidential. In order to be counted, your Ballot must be signed and postmarked by OFFICIAL PRODUCER BALLOT CRANBERRY MARKETING ORDER NO. 929 Please read all questions and answer those that apply to you. This Referendum is for the purpose of determining whether growers favor continuance of Marketing Order No. 929. Do you favor continuance of Marketing Order No. 929 regulating the handling of cranberries grown in the States of Massachusetts, Rhode Island, Connecticut, New Jersey, Wisconsin, Michigan, Minnesota, Oregon, Washington, and Long Island in the State of New York? YES, I favor continuance of NO, I do not favor continuance of Marketing Order No. 929. Marketing Order No. 929. CERTIFICATION STATEMENT I hereby certify that I am a producer and produced cranberries within the defined production area during the 20_ crop year (September 1, 20____ through August 31, 20____). (If you did not harvest cranberries from your acreage during 20____ because of crop failure or non-bearing acreage, write "NONE" in the space provided for number of barrels below). (State) (barrels) (approx. acreage) Address Name Signature Date **NOTE:** If you are renting on a share crop basis, you should report only that part of the crop represented by your share. If you marketed any of the above cranberries through a cooperative marketing association, please list the cooperative's name. NOTE: If the vote is cast on behalf of a corporate, estate, or producer, my signature certifies that I have the authority to take such action. (IN SUCH CASE, SHOW NAME OF SUCH CORPORATION, ESTATE, OR PRODUCER AND YOUR TITLE BELOW).

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Title

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Name of corporation, estate, or producer

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