

WASHINGTON APRICOT 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

Referendum Agent
USDA-AMS-F&V-NWMFO
805 SW BROADWAY, SUITE 930
PORTLAND, OR 97205

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

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TO APRICOT PRODUCERS:

The U.S. Department of Agriculture is conducting a referendum to determine whether apricot producers in Washington favor continuance of Federal Marketing Order No. 922. 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 _____.

The voting period for the referendum is _____, 20__ through _____, 20__. Please vote promptly because **Ballots postmarked later than _____, 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. 922: Apricots Grown in
 Designated Counties in Washington

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 the Federal Marketing Order regulating the handling of apricots grown in designated counties in Washington. The Secretary of Agriculture 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. 922, regulating the handling of apricots grown in designated counties in Washington?

YES

NO

PRODUCER ELIGIBILITY STATEMENT

B. I hereby certify that I am currently a producer of apricots within the production area and that during the representative period _____, 20__ through _____, 20__, I produced for the fresh market:

_____ tons on _____ acres in _____
 _____ County(ies).

C.

Name of Packing House(s) that Handled your Apricots	Tons	Affiliation (co-op or independent)

D. Producer's Name _____ Phone Number _____

Name of Business _____

Mailing Address _____

City _____ State _____ Zip _____

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 LLC Corporation Association Other

Signature*

Title

If 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.**

Signature*

Title

*Your 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 of Agriculture. The information provided in this Ballot is required to determine voter eligibility and vote of apricot producers. Falsification of information on this government document may result in a fine of not more than \$10,000 or imprisonment of not more than five (5) years, or both (18 U.S.C. § 1001).

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 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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VOTING INSTRUCTIONS AND RULES GOVERNING PRODUCER ELIGIBILITY TO VOTE

- I. VOTING PERIOD:** _____, 20__ through _____, 20__.
- II. REPRESENTATIVE PERIOD:** _____, 20__ through _____, 20__.
- III. PRODUCTION AREA:** Counties of Okanogan, Chelan, Kittitas, Yakima, and Klickitat in the State of Washington, and all of the counties in Washington lying east thereof.
- IV. PERSONS ELIGIBLE TO VOTE:** Any person who is currently a fresh market apricot producer in the production area and produced such apricots during the representative period _____ through _____ 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 apricots produced thereon;
- Rents and farms land resulting in ownership of all or a portion of the apricots produced thereon; or
- Owns land from which, as rental for such land, ownership is obtained of a portion of the apricots produced thereon. (A lien holder, cash landlord, or person having only a financial interest in the apricot 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 apricot production by listing the volume in tons that you produced, the number of acres in production, and the county or counties in which such apricots were produced during the representative period _____ through _____. If you are renting on a share-crop basis, you should show only that part of the crop represented by your share.
- C. List the names of packing houses that handled your apricots, the tonnage, 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 a Ballot is cast by an officer or employee of a partnership, LLC, corporation, association or other business unit, check the appropriate box to indicate your business designation, and sign to indicate authority to vote. If a partnership or joint venture, list names of the 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-F&V-NWMFO
805 SW BROADWAY, SUITE 930
PORTLAND, OR 97205

Ballots must be postmarked by _____, 20__. For additional information, please call (503) 326-2724.