

UNITED STATES DEPARTMENT OF
 AGRICULTURE
 AGRICULTURAL MARKETING SERVICE
**REFERENDUM ON THE
 SORGHUM
 PROMOTION AND RESEARCH
 ORDER BALLOT**

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 0581-0093. The time required to complete this information collection is estimated to average 6 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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NOTE: INSTRUCTIONS TO VOTERS (Please read carefully)

1. Producers - If voting as an individual, you must vote in the county Farm Service Agency (FSA) Office in the county in which you reside, or the county FSA Office serving the county in which you reside.
2. Producers - If voting on behalf of an entity (partnership, corporation, estate, etc.) you must vote in the county FSA office in which it is located, or the county FSA office serving the county in which it is located.
3. Importers - . send ballots to Craig Shackelford, Marketing Programs Branch, Livestock and Seed Program, AMS, USDA, Room 2628-S, STOP 0251, 1400 Independence Avenue, SW., Washington, DC 20250-0251; Telephone: (202) 720-1115; Fax: (202) 720-1125; craig.shackelford@ams.usda.gov.
4. Mark the "Ballot" below and sign the Certification Statement.
5. Staple supporting documentation (sales receipt, remittance form, or Customs 7501 form) fold in half and deposit into the "Ballot Box

Do you support continuation of the Sorghum Promotion and Research Order?

YES	NO

Certification and Signature

I HEREBY CERTIFY that I am a person (any individual, group of individuals, partnership, corporation, association, cooperative or any other legal entity) or authorized representative and have engaged in the production and sale of sorghum or importation of sorghum during the representative period and that the supporting documentation I am providing is true and correct.

Print Name

Signature

Date