## U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE FRUIT AND VEGETABLE PROGRAM

## PRODUCER REFERENDUM BALLOT MARKETING ORDER NO. 987

Riverside County, California. This Ballot will be held corvoting instructions <b>before completing this Ballot</b> . Your I than, 20, in order to be counted.	nfidential. Please read the enclosed rules of eligibility and Ballot envelope <b>MUST</b> be received by this office not later
I HEREBY CERTIFY that I am, or the producer's name I of Deglet Noor, Zahidi, Khadraw or Halawy dates, and the September 30, 20, produced the following quantity of	
pounds (Field run)	
NOTE: If you are farming on a share crop basis, report on	ly that part of the tonnage representing your share.
1. Name(s) of any partners	2. Partner(s) mailing address
3. Do you favor the proposed amendment? $\Box$ Y	es □ No
4. Producer's Signature (or name, if Item 6 is applicable)	5. Mailing Address (Street and No., RDF No., City, State, Zip Code)
·	a producing estate, the following must also be completed. re (Secretary) that I have authority to case this Ballot for
Signature:	
Title or Capacity:	
Mailing Address:	

Your signature certifies that you have the authority to take such action and will submit supplementary evidence of such authority at the request of the Agent of the Secretary. The information in this Ballot is required to determine the voter eligibility and vote of date producers. Falsification of information on this government document may result in a fine or imprisonment, or both (18 U.S.C. 1001).

## Final Decision – Dates

The undersigned hereby authorizes the Deputy Administrator, or the Acting Deputy Administrator, Fruit and Vegetable Programs, Agricultural Marketing Service, U.S. Department of Agriculture, to correct any typographical efforts which may have been made in this marketing agreement.

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Agreement Act, for the purpose and subject to the limitations therein contained, and not otherwise, have hereto set their respective signatures and seals.	
Firm Name	By: Signature <sup>1</sup>
Mailing address	Title
	Date of Execution
Corporate Seal: if none, so state	

<sup>1</sup> If one of the parties to the marketing agreement is a corporation, my signature constitutes certification that I have the power granted to me by the Board of Directors to bind this corporation to the marketing agreement.

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 0581-0178. 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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