USE TAPE – DO NOT STAPLE

A.C. CODE CODE

AG CODE 0237
UNITED STATES DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
FRUIT AND VEGETABLE PROGRAM
MARKETING ORDER AND AGREEMENT DIVISION
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

U.S. DEPARTMENT OF AGRICULTURE	INSTRUCTIONS: Complete the Ballot and Certification. Fold on the
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,
OFFICIAL PRODUCER BALLOT	your Ballot must be signed and postmarked by,
CRANBERRY MARKETING ORDER NO. 929	20
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 Marketing Order No. 929.	NO, I do not favor continuance of 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).	
from	in
(barrels) (approx. acre	age) (State)
Name	Address
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).	
Name of corporation, estate, or producer	

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