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| **United States Department of Agriculture**  **Agricultural Marketing Service**  **OFFICIAL REFERENDUM BALLOT**  **Honey Packers and Importers Research, Promotion,**  **Consumer Education and**  **Industry Information Order**  **To be counted, completed ballots must be received by the U.S. Department of Agriculture by X:XX p.m. Eastern Time on XXX, 20XX.**  NOTE: Only one vote will be counted for each eligible  handler and importer. Incomplete ballots will be  INVALID and will not be counted in the referendum. | I. CERTIFICATION 1. I am currently a honey **FIRST HANDLER 🞏 and/or IMPORTER 🞏** (Check one), during the period XXX, 20XX, to XXX, 20XX.  2. I handled and/or imported pounds of honey or honey products between XXX, 20XX and XXX, 20XX.  Preprinted totals for handlers include honey handled and reported by XXX. Totals for importers include honey imports reported by U.S. Customs. If corrections need to be made, please cross out and **legibly** write in the correct information. **Submit documentation to support these changes along with your ballot to USDA.** |
| II. VOTE Instructions: Mark one box only.  **Do you favor continuance of [amendment to] the Honey Packers and Importers Research, Promotion, Consumer Education and Industry Information Order?**    **YES** 🞏  **NO** 🞏 |
| 1. **SIGNATURE**   **ALL BALLOTS MUST BE SIGNED AND DATED BELOW IN ORDER TO BE COUNTED.**  I **CERTIFY** that I am the person authorized to cast this ballot and that the information contained on this ballot is true, complete, and correct to the best of my knowledge and belief, and is made in good faith. If this ballot is being cast on behalf of any group of individuals, partnership, corporation, or other business entity engaged in the handling or importation of honey or honey products, I also **CERTIFY** that I have the authority to cast this ballot.  **X \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SIGNATURE DATE  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  COMPANY NAME BUSINESS TELEPHONE NUMBER |
| **Return ballot in the enclosed, postage-paid envelope.** |

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