

**Form Approved
OMB No. 0581-0093**

To request a continuance referendum, please complete the attached form and return it to [Insert USDA Farm Service Agency Address]. For your signature to be counted during the sign-up period, your request must be received no later than [insert date]. No action is necessary if a continuance referendum is not desired.

I, _____ request that the U.S. Department of
(PRINT FULL NAME)

Agriculture conduct a continuance referendum regarding the 1991 amendments to the Cotton
Research and Promotion Order.

Print Name

Address

Signature

Date

Company Name

BURDEN AND NONDISCRIMINATION STATEMENTS

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.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: 1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; 2) fax: (202) 690-7442; or 3) email: program.intake@usda.gov.

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Notice XX-XXXX

State: _____

**In-Office Signup Sheet
County FSA Signup Sheet**

Page _____ **of** _____

Date	Print Name	Signature	Remarks
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USDA's Nondiscrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

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To request a continuance referendum, please complete the attached form and include a copy of at least one sales receipt and return these documents to the County FSA office where your farm is located. For your signature to be counted during the sign-up period your request must be received no later than XXXXXX. No action is necessary if a continuance referendum is **not** desired.

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(PRINT FULL NAME)

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Research and Promotion Order.

Print Name

Address

Signature

Date

Company Name

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To request a continuance referendum, please complete the attached form and include a copy of one U.S. Customs and Border Protection Form 7501 showing payment of a cotton assessment for calendar year XXXXXX and return these documents XXXXXX. For your signature to be counted during the sign-up period your request must be received not later than XXXXXXX.

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