UNITED STATES DEPARTMENT OF AGRICULTURE

AGRICULTURAL MARKETING SERVICE

SPECIALTY CROPS PROGRAM

**GROWER BALLOT TO NOMINATE MEMBERS AND ALTERNATE MEMBERS**

**FOR DISTRICT I OR DISTRICT II** *(circle applicable District)*

I hereby cast my Ballot for the following nominees to serve as member and alternate member to represent Growers from **District I** or **District II** on the Avocado Administrative Committee (Committee), Marketing Order No. 915, during the term of office that begins April 1, 20\_\_\_\_ and ends March 31, 20\_\_\_\_. Mark the Ballot for **no more** **than** eight (8) of the nominees listed below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Nominee Name** |  |  | **Nominee Name** |
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**PERSONS VOTING BY MAIL MUST SIGN THIS BALLOT FOR IT TO BE VALID.**

I certify that I am District I or District II *(circle applicable District)* Grower registered with the Avocado Administrative Committee in Homestead, Florida.

Name:

Signature:

Ballots must be received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ to be valid.

Ballots received after that date will not be counted.

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