U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE SPECIALTY CROPS PROGRAM

PRODUCER REFERENDUM BALLOT

Marketing Order No. 959: Onions Grown in South Texas

BA	LLO	TS POSTMARKED AFTER, 20, WILL NOT BE COUNTED IN THE REFERENDUM.					
PA	RT I	. REFERENDUM INSTRUCTIONS:					
A.		MPLETE PARTS II, III, AND IV. Incomplete or unsigned Ballots cannot be counted. Ballots must be tmarked by, 20					
B.	ELIGIBLE VOTERS: Any person who produced onions for fresh market during the period, 20, through, 20, and who is now a producer, is eligible to vote. Additional Ballots may be obtained by contacting the Southeast Marketing Field Office or your County Extension Service Office.						
1.	A producer (or grower) is defined as: (a) anyone who produces onions for fresh market in the counties of Val Verde, Kinney, Uvalde, Medina, Wilson, Karnes, Goliad, Victoria, Calhoun, Maverick, Zavala, Frio, Atascosa, Dimmit, La Salle, McMullen, Live Oak, Bee, Refugio, Webb, Duval, Jim Wells, San Patricio, Nueces, Zapata, Jim Hogg, Brooks, Kleberg, Kenedy, Starr, DeWitt, Aransas, Hidalgo, Willacy and Cameron;						
	(b) a renter or tenant of acreage producing onions for fresh market; or						
	(c) a landlord who received from a renter or tenant such onions as rent for the land on which such onions were grown. A cash landlord, lienholder, or person having only a financial interest in the crop is not an eligible voter.						
2.	A business unit, partnership, family enterprise, corporation, association, estate, or firm may vote; however, easuch entity is entitled to one vote.						
3.	Proxy voting is not authorized.						
C.	VOTING INSTRUCTIONS: Provide the voter information requested in Part II. In Part III, mark the block for or against continuing the order. Certify your answer by signing the appropriate section of Part IV. If you do not complete Parts II, III, and IV, your Ballot cannot be validated and your vote will not be counted.						
	US	ll Parts II, III, and IV in the official envelope. If you do not have an official envelope, send the Ballot to the DA's Southeast Marketing Field Office, 1124 First Street South, Winter Haven, FL 33880. Mark the elope "Onion Referendum."					
PA	RT I	I. VOTER INFORMATION:					
	A.	NAME (Please print)					
	В.	SPECIFIC LOCATION OF ONION ACREAGE REPRESENTED IN THIS BALLOT:					
		(Highway and Street Address, if applicable, and County, City, State, and Zip Code)					
	C.	DO YOU RESIDE ON THE PROPERTY ON WHICH THE ONIONS ARE PRODUCED? □YES □NC					

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.

D.	PHONE NUMBER:		FAX NUMBER:				
E.	IF NOT VOTING AS APPROPRIATE BOX BELLYOU REPRESENT.		•				
	□ PARTNERSHIP □	CORPORATION	☐ OTHER (Please spe	ecify)			
F.	F. HOW MANY 50-POUND EQUIVALENTS OF ONIONS DID YOU PRODUCE DURING THE PERIOD						
G.							
Н.	WHICH PACKINGHOUSE(S) HANDLED YOUR ONIONS DURING THIS PERIOD?						
PART	☐ YES ☐ NO IV. CERTIFICATION STA	TEMENT:					
DO YO	III. CONTINUING THE O	HE MARKETING OF	RDER FOR ONIONS GRO	OWN IN SOUT	ГН TEXAS?		
I a	gning as an individual: In the producer named in Part II of this Ballot, and I certify that I am not a cash landlord, lienholder, or on having only a financial interest in the crop, and that the information provided on this Ballot and any						
	attachment hereto is accurate and correct to the best of my knowledge.						
SIC	SIGNATURE OF PRODUCER OR AUTHORIZED PERSON						
	If signing as the representative of a producing entity other than an individual, indicate your title and sign below:						
	certify that I have authority to cast this Ballot and will submit evidence of such authority at the request of an gent of the Secretary of Agriculture.						
SIC	GNATURE		TITLE				

Falsification of information on this government document may result in a fine or imprisonment, or both (18 U.S.C. 1001).

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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. USDA is an equal opportunity provider, employer, and lender.