

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

**OFFICIAL PRODUCER AMENDATORY BALLOT**

Marketing Order No. \_\_\_\_\_:

**PART I - REFERENDUM INSTRUCTIONS**

**A. REFERENDUM PERIOD:** \_\_\_\_\_, 20\_\_ through \_\_\_\_\_, 20\_\_ is period during which producers may vote on the proposed amendments to the marketing order regulating the handling of \_\_\_\_\_. For amendments to the marketing order to pass, they must be supported by at least \_\_\_\_\_ of the growers voting **and/ or** at least \_\_\_\_\_ of the volume represented by those voting in the Referendum.

**B. ELIGIBILITY REQUIREMENTS:** Any person who produced \_\_\_\_\_ for market during the period of \_\_\_\_\_ through \_\_\_\_\_, and who is now a producer, is eligible to vote. Such persons may vote on the items (1) through (\_\_\_\_) using the attached ballot.

1. A producer is defined as: (a) any person who produces \_\_\_\_\_ in the designated production area; (b) a renter or tenant of acreage producing \_\_\_\_\_ for market; or (c) a landlord who received from a renter or tenant \_\_\_\_\_ as rent for the land on which such \_\_\_\_\_ 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. Each such entity is entitled to one vote.
3. If you believe you are eligible to submit more than one ballot, additional ballots may be obtained by contacting the \_\_\_\_\_ Marketing Field Office at (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
4. If ballot is cast by an officer or employee of a partnership, LLC, corporation, association or other business unit, check box to indicate your business designation, and sign to indicate authority to vote. If partnership or joint venture, list names of partners.
5. Proxy voting is not authorized

**C. INSTRUCTIONS FOR VOTING:**

1. Complete the voter information (Part II) and the voter certification of eligibility (Part IV)
2. Indicate your vote by placing an "X" in the appropriate box (Part III).
3. **Incomplete or unsigned ballots cannot be counted.**
4. Mail the completed ballot in the enclosed envelope and return to:

\_\_\_\_\_ Marketing Field Office  
USDA-AMS-SCP  
Address: \_\_\_\_\_  
City/ State: \_\_\_\_\_

For further information, please call (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_.  
Ballots must be revised 8 days after \_\_\_\_\_, 20\_\_\_\_\_.

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.

**OFFICIAL PRODUCER AMENDATORY BALLOT**

Marketing Order No. \_\_\_\_\_:

**PART II - VOTER INFORMATION**

A. Name: \_\_\_\_\_  
(Please print clearly)

B. What is the specific location of your \_\_\_\_\_ represented in this ballot?  
\_\_\_\_\_  
(Street Address, County(ies))

\_\_\_\_\_  
(City, State, and ZIP code)

C. If you are not voting as an individual producer, please check the appropriate box indicating your voting status and write the name and address of the business unit you represent.  
 Partnership  Corporation  Other (Specify) \_\_\_\_\_

Business Name:  
\_\_\_\_\_

Business Address:  
\_\_\_\_\_

If Partnership or Joint Venture, list name(s) \_\_\_\_\_

D. What is the volume (cartons, pounds, tons) produced during the period of \_\_\_\_\_ through \_\_\_\_\_? \_\_\_\_\_ volume.

E. Total number of acres of \_\_\_\_\_ represented by this ballot: \_\_\_\_\_ acres.

F. Which handler(s) handled your \_\_\_\_\_ during this period?  
\_\_\_\_\_  
(Name of handler(s))

\_\_\_\_\_  
(Street Address, County)

**Don't forget to mark your vote and sign your ballot  
Incomplete or unsigned ballots cannot be counted!**

**This ballot must be completed fully with attachments and returned  
by \_\_\_\_\_, 20\_\_ to be valid.**

**OFFICIAL PRODUCER AMENDATORY BALLOT**

Marketing Order No. \_\_\_\_\_:

**PART III - REFERENDUM ISSUES**

**“YES” VOTE MEANS YOU FAVOR THE CHANGE; “NO” VOTE MEANS YOU OPPOSE THE CHANGE.**

<b>MARKETING ORDER AMENDMENTS:</b>	<b>YES</b>	<b>NO</b>
1.		
2.		
3.		
4.		
5.		
6.		

**PART IV - VOTER CERTIFICATION OF ELIGIBILITY**

All information provided in this ballot will be subject to on-site verification by officials of the Office of Inspector General, U.S. Department of Agriculture.

The information on this ballot is required to determine the voter eligibility. Falsification of information on this government document may result in a fine of not more than \$10,000, or imprisonment for not more than five (5) years, or both (18 U.S.C. 1001).

A. If signing as an individual.

I am the grower named in Part II of this ballot, and I certify that I am not a cash landlord, lienholder, or person 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.

\_\_\_\_\_  
(Signature of Producer or Authorized Person)

\_\_\_\_\_  
Date

B. If signing as the representative of a producing entity other than an individual, designate your title and sign below.

If you are a partner casting the ballot for a partnership; an officer or employee casting the ballot for a cooperative association, corporation, school, institution, or similar business unit, or the administrator executor, or trustee casting the ballot for a producing estate, but signing this ballot you agree to provide evidence thereof at the request of an authorized agent of the Secretary.

I hereby certify that I am duly authorized to vote on behalf of the producing entity named in Part II of this ballot and that the information provided in this ballot and any attachment hereto is accurate and correct to the best of my knowledge.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title of Person Signing)

\_\_\_\_\_  
(Date)

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(2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.