

**United States Department of Agriculture
Agricultural Marketing Service**

OFFICIAL REFERENDUM BALLOT

**Popcorn Promotion, Research, and
Consumer Information Order**

To be counted, completed ballots must be received by the U.S. Department of Agriculture on Month XX, 20XX, by x:xx p.m. Eastern Time.

NOTE: Only one vote will be counted for each eligible processor. Incomplete ballots may be INVALID and may not be counted in the referendum.

PLACE LABEL HERE

I. ELIGIBILITY

_____ During the period of January 1, 20XX, and December 31, 20XX, I processed _____ pounds of popcorn

II. VOTE

Instructions: Mark one box only.

Do you favor the continuance [Amendment (s)] Popcorn Promotion, Research, and Consumer Information program?

YES _____ NO _____

III. CERTIFICATION AND SIGNATURE

ALL BALLOTS MUST BE SIGNED BELOW IN ORDER TO BE COUNTED.

I **CERTIFY** 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 processing of popcorn, I also **CERTIFY** that I have the authority to cast this ballot and will submit evidence thereof if so requested by the Referendum Agent.

X _____
SIGNATURE DATE

COMPANY NAME () -
BUSINESS TELEPHONE NO.

IV. MAILING

Return ballot in the enclosed, postage-paid envelope.

If postage-paid envelope is not available, mail your ballot(s) to:

U.S. Department of Agriculture, AMS
POPCORN REFERENDUM
P.O. Box XXXXXXX
Washington, D.C xxxxx-xxxx

The making of any false statement or representation on this form, knowing it to be false, is a violation of Title 18, §1001 United States Code, which provides for the penalty of a fine of \$10,000, imprisonment of not more than 5 years, or both.

According to the Paperwork Reduction Act of 1995, an agency may or 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 the information collection is 0581-0093. The time required to complete this information collection is estimated to average 15 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.

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