FORM APPROVED OMB NO. 0581-NEW

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| **United States Department of Agriculture**  **Agricultural Marketing Service**  **OFFICIAL REFERENDUM BALLOT**  **Pecan Promotion, Research, and**  **Information Order**  **To be counted, completed ballots must be received by the**  **U.S. Department of Agriculture on Month xx, 20xx, by**  **xx:xx p.m.**  NOTE: Only one vote will be counted for each eligible  producer and importer. Incomplete ballots will be  INVALID and will not be counted in the referendum. | I. CERTIFICATION I am currently a pecan **PRODUCER 🞏 or IMPORTER 🞏** (Check one), during the period Month xx, 20xx to Month xx, 20xx. |
| II. VOTE Instructions: Mark one box only.  **Do you favor continuance of [amendment to] the Pecan Promotion, Research, and Information Order?**  **YES** 🞏  **NO** 🞏 |
| **III. SIGNATURE**  **ALL BALLOTS MUST BE SIGNED AND DATED BELOW IN ORDER TO BE COUNTED.**  I **CERTIFY** that I am the person authorized to cast this ballot and 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 producing or importation of processed raspberries, I also **CERTIFY** that I have the authority to cast this ballot.  **X** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  SIGNATURE DATE  \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  COMPANY NAME BUSINESS TELEPHONE NUMBER |
| **IV. MAILING**  **Return ballot in the enclosed, postage-paid envelope.** |

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

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-NEW. 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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