## ADMINISTRATIVE COMMITTEE FOR PISTACHIOS FEDERAL MARKETING ORDER 983 OFFICIAL BALLOT MATERIAL

P «First\_Name» «Last\_Name» «Producer\_Name» I «Street1» «City», «State» «Zip»

RODUCER BALLOT NSTRUCTIONS

**DISTRICT BALLOT**: The reverse

side of this document is the ballot

for the district in which you produce pistachios (contact the Committee office if your production area is in a different district).

The ballot has the list of candidates running for a position in this district. Vote for the candidate(s) of your choice, and/or write in the candidate(s) name(s) of your choice in the spaces provided, up to the maximum number of votes allowed as indicated on the ballot.

The candidate(s) receiving the highest number of votes shall be the member nominee(s), and the next highest votes shall be the alternate member nominee(s). In case of a tie vote, the nominee(s) shall be selected by a drawing.

**VOTER ELIGIBILITY**: The Administrative Committee for Pistachios has producer members and member alternates that represent four districts. Only producers (individuals, partnerships, LLCs, corporations, trust, association, or any other business unit), including duly authorized officers or employees of producers, shall participate in the election of producer members and alternate producer members of the Committee.

**VOTING RESTRICTIONS**: No producer shall participate in the election of Committee members in more than one district. If a producer commercially produces pistachios during the current production year in more than one district, the producer must vote in the same district in which he or she participated in the nomination process previously conducted. If the producer did not participate in the nominations process, he or she may choose which district in which to vote.

**VOTING PERIOD**: \_\_\_\_\_,20\_\_\_ through \_\_\_\_\_,20\_\_\_

**BALLOT CERTIFICATION**: Print your name and title (if applicable) and certify your eligibility to vote by signing and dating the ballot. Ballots without a signature will not be counted.

Ballots must be signed and received by \_\_\_\_\_,20\_\_\_ (postmarked, faxed, or delivered) to be counted.

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 0581-0215. 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.

# Administrative Committee for Pistachios District \_\_ Ballot

**VOTING DEADLINE** 

District \_ consists of \_

You must be a producer of pistachios in District \_\_\_\_\_ to vote on this ballot. If

producer grows pistachios in more than one district, choose one district in which to vote. Ballots will not be counted if producer votes in multiple districts.

<u>District</u> has \_ producer member and \_ alternate producer member positions to be filled for a two-year term that begins \_\_\_\_,20\_\_\_ You may vote for \_\_\_\_\_ (insert number of member positions) candidate(s): ballot will not be counted if checked names exceed this number. Check (✓) the candidate(s) of your choice and/or submit write-in candidates<sup>†</sup>.

Candidate One	Candidate Two
Candidate Three	Candidate Four
Candidate Five	Candidate Six
Write-In Candidate	Write-In Candidate
*Contact Info (phone, email) *Contact information needed for write-in candidates	*Contact Info (phone, email)

†Candidate statements available at www.acpistachios.org

## **CERTIFICATION OF VOTER ELIGIBILITY (only ballots certified with a signature will be counted)**

I certify I or my employer currently produce(s) pistachios for market in **<u>District</u>**, and that I have voted in only one district in this election process. If I am casting a ballot on behalf of my employer, I certify that I have authority to do so.

Producer Name	Producer Tax ID	
Print Your Name	Signature	Date
Title (if voting on behalf of a corporation, estate or t	_ rust)	
Mail, email, or fax your ballot by	, <b>20</b> (ballots not received or po	ostmarked by this date will not be counted):
ADMINISTRATIVE COMMITTEE FO 4938 East Yale Avenue, Suite 102, Fresno Tel (559) 255-6480; Fax (559) 255-6485		

### If you need more information, contact the ACP office (559-255-6480) or visit the ACP website www.acpistachios.org.

The following statements are made in accordance with the Privacy Act of 1974 (U.S.C. 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the information to be supplied on this form is the Agricultural Marketing Agreement Act of 1937, Secs. 1-19, 48 Stat. 31, as amended, (7 U.S.C. 601-674). Furnishing the requested information is necessary for the administration of the marketing order program. Submission of the Tax Identification Number (TIN) is mandatory and will be used to validate ballots and determine affiliation or entity identity. Please note that ballots will not become invalid if a TIN is not disclosed. The making of any false statements or representations in any matter within the jurisdiction of any agency of the United States, knowing it to be false, is a violation of title 18, section 1001 of the United States Code, which provides for fine or imprisonment, or both.

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Email: admin@acpistachios.org