FORM APPROVED OMB NO. 0581-0268

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| **United States Department of Agriculture****Agricultural Marketing Service****OFFICIAL REFERENDUM BALLOT****Christmas Tree Promotion, Research and Information Order****Complete Sections II, and III of this ballot. Mail or email your completed ballot. To be counted, completed ballots must be postmarked by Month X, 20XX. Ballots delivered via express mail or e0mail must show proof of delivery no later than xx:xx xx Eastern X Time on Month X, 20XX.** NOTE: Only one vote will be counted for each eligible producer and importer. Incomplete ballots may be INVALID and may not be counted in the referendum. |  I. CERTIFICATIONI am a Christmas tree producer or importer, and I domestically produced (cut and sold) or imported more than 500 Christmas trees that were subject to assessment during the period Month XX, 20XX to Month XX, 20XX.**USDA may request documentation to verify that you domestically produced or imported more than 500 trees during the representative period.** |
| II. VOTEInstructions: Mark one box only.**Do you favor [implementing/amending/continuing] the Christmas Tree 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 production or importation of Christmas trees, I also **CERTIFY** that I have the authority to cast this ballot. |
| **Signature:** |  | **Date:** |  |
| **Print Name:** |  | **Email:** |  |
| **Company Name:** |  | **Phone:** |  |
| **IV. MAILING****You may return you ballot in the enclosed, postage-paid envelope OR scan and e-mail your ballot to CTReferendum@usda.gov** |

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 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 0581-0268. 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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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.

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