CALIFORNIA DATE ADMINISTRATIVE COMMITTEE

P.O. Box 1736 Indio, CA 92202-1736

Tel: (760) 347-4510 Fax: (760) 347-6374

PRODUCER-HANDLER BALLOT NO. ____

_			
Administrative Committee (Cemployees of a handler, of December 2015)	Committee). They are sele eglet Noor, Halawy, Khad icers, or employees exerci	er alternates serve on the Californicted from: (1) handlers or directorawy or Zahidi dates; or (2) produsing a supervisory or managerial 20	rs, officers, or acers who are
	ne alternate. Your vote w	er to vote in nominations for this vill be weighted by the quantity of bugh April 30, 20	
Committee. Make your sele certain they qualify and are	ction from this list, or wa willing to serve on the C interested in serving on	eir names and are willing to serve rite in persons of your own choi Committee if selected and appoint the Committee. Do not list the ralidated.	ce, but make nted. You may
Candidates:			
I vote for the following:	MEMBER: ALTERNATE:		
Deglet Noor, Halawy, Khadr	awy, or Zahidi dates and a e Committee, and further,	and the Committee that I am a prom qualified to vote for producer-lthat if this Ballot is cast on an ab	nandler
Signature:		Date:	
Name of Firm:			
	Ballots may be mailed or faxe	Committee no later than p.m., Jed to the Committee at the address abenue, Indio, CA.	
information unless it displays a valid OME required to complete this information colle	control number. The valid OMB conction is estimated to average 5 minutes	or sponsor and a person is not required to responterol number for this information collection is 058 s per response, including the time for reviewing is and reviewing the collection of information.	1-0178. The time
	1		

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

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. USDA is an equal opportunity provider, employer, and lender.

(Exp. x/xxxx) Destroy previous editions.