

ALMOND BOARD OF CALIFORNIA BALLOT FOR INDEPENDENT HANDLER MEMBERS

Mail to the Almond Board of California, 1150 9th Street, Suite 1500, Modesto, California, 95354 to be received no later than _____, 20__.

I hereby vote for the following nominees as member and alternate member of the Almond Board of California, to represent independent handlers for the term beginning August 1, 20__.

Select one member and one alternate for each position.

FOR MEMBER - POSITION XX

(Three-year term)

- ☐ _____
☐ _____

FOR ALTERNATE - POSITION XX

(Three-year term)

- ☐ _____
☐ _____

FOR MEMBER - POSITION XX

(One-year term)

- ☐ _____
☐ _____

FOR ALTERNATE - POSITION XX

(One-year term)

- ☐ _____
☐ _____

I hereby certify that we handled, for our own account, _____ pounds of almonds (kernel weight basis) for the period August 1, 20__ through December 31, 20__, line 11 of the Redetermination Report.

HANDLER

SIGNATURE

TITLE

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 OMB 0581-0178. The time required to complete this information collection is estimated to average 5 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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