

**California Walnut Board**  
**110 Woodmere Rd., Suite 250**  
**Folsom, CA 95630**  
**Tel: (916) 932-7070; Fax: (916) 932-7071**

**VOTING DEADLINE**  
 \_\_\_\_\_, 20\_\_\_\_

**BALLOT**  
**ELECTION OF DISTRICT \_\_\_\_ HANDLER MEMBERS AND ALTERNATES**

**VOTING INSTRUCTIONS**

In accordance with the provisions of Section 984.37 of Marketing Order No. 984, as amended, I hereby vote for the following members and alternates as representatives of District \_\_\_\_ handlers of walnuts of the California Walnut Board for the two-year term beginning September 1, 20\_\_\_\_.

Walnut handlers may vote for two members and two alternates. Mark an "X" opposite your choice if you wish to vote for the candidates listed. Write-in lines are provided if you wish to nominate qualified walnut handlers who are not shown on the ballot. Please type or print clearly the handler's name and address in the space provided. Vote for only two names in each column.

*Your ballot will be invalidated if you vote for more than two persons for each position.*

**DISTRICT \_\_\_\_ HANDLER NOMINEES**

<b>Member</b>	<b>Vote</b>	<b>Alternate Member</b>	<b>Vote</b>
<b>Write In:</b>		<b>Write In:</b>	
<b>Write In:</b>		<b>Write In:</b>	

**CERTIFICATION OF ELIGIBILITY**

I hereby certify that I am currently a qualified handler of walnuts and operated as such a handler during the 20\_\_\_\_ marketing year.

\_\_\_\_\_  
 Legal Name of Voting Entity

\_\_\_\_\_  
 Address City State Zip

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Print Name

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 0581-0178. 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.

**(Exp. 4/30/2027) Destroy previous editions.**

**BACKGROUND INFORMATION**

*In the event one handler does not handle 35% or more of the crop:*

- § 984.35(a)(1) Two handler members from District 1; and
- § 984.35(a)(2) Two handler members from District 2.

*In the event one handler handles 35% or more of the crop:*

- § 984.35(b)(3) Two handler members to represent handlers that do not handle 35% or more of the crop.

*Districts:*

District 1: Consists of the counties in the State that lie north of a line drawn on the southern boundaries of San Mateo, Alameda, San Joaquin, Calaveras and Alpine counties.

District 2: Consists of all other counties in the State south of the boundary line set forth in the definition of District 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, 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, audiotope, 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](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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.