

CALIFORNIA DATE ADMINISTRATIVE COMMITTEE  
P.O. Box 1736  
Indio, CA 92202-1736  
Tel: (760) 347-4510 Fax: (760) 347-6374

**PRODUCER-HANDLER BALLOT NO. \_\_\_\_\_**

Six producer-handler members and six producer-handler alternates serve on the California Date Administrative Committee (Committee). They are selected from: (1) handlers or directors, officers, or employees of a handler, of Deglet Noor, Halawy, Khadrawy or Zahidi dates; or (2) producers who are also handlers or directors, officers, or employees exercising a supervisory or managerial function of such handler. The two-year term of office begins August 1, 20\_\_.

You must qualify as a producer-handler yourself in order to vote in nominations for this group. **You may vote for one member and one alternate.** Your vote will be weighted by the quantity of marketable dates your firm has handled from October 1, 20\_\_ through April 30, 20\_\_.

Listed below are the candidates who have submitted their names and are willing to serve on the Committee. **Make your selection from this list, or write in persons of your own choice, but make certain they qualify and are willing to serve on the Committee if selected and appointed. You may nominate yourself if you are interested in serving on the Committee. Do not list the same person for more than one position or your Ballot will be invalidated.**

**Candidates:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I vote for the following: MEMBER: \_\_\_\_\_  
ALTERNATE: \_\_\_\_\_

I hereby certify to the U.S. Department of Agriculture and the Committee that I am a producer-handler of Deglet Noor, Halawy, Khadrawy, or Zahidi dates and am qualified to vote for producer-handler representatives to serve on the Committee, and further, that if this Ballot is cast on an absentee basis, that I personally completed this Ballot.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Firm: \_\_\_\_\_ Phone No.: \_\_\_\_\_

**NOTE:** Completed absentee Ballots must be received by the Committee no later than \_\_ p.m., June \_\_, 20\_\_ in order to be counted. Absentee Ballots may be mailed or faxed to the Committee at the address above, or delivered to the Committee at USDA Service Center, 82-901 Bliss Avenue, Indio, CA.

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.

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, 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.

**(Exp. 3/31/2024) Destroy previous editions.**