**PHONE** 

American Pecan Council P.O. Box 100398 Fort Worth, TX 76185

## GROWER NOMINATION FORM PROPOSED CANDIDATE TO BE INCLUDED ON THE AMERICAN PECAN COUNCIL GROWER NOMINATION BALLOT

Each region shall be represented by three grower seats on the Council. Two seats shall be allocated to growers whose acreage is equal to or exceeds 176 pecan acres and one grower seat allocated to a grower whose acreage is less than 176 pecan acres. Proposed candidates will be listed on the nomination ballot sent to growers.

Eastern Region consists of: Alabama, Florida, Georgia, North Carolina, South Carolina Central Region consists of: Arkansas, Kansas, Louisiana, Mississippi, Missouri, Oklahoma, Texas Western Region consists of: Arizona, California, New Mexico

NAME OF GROWER NOMINEE (as should appear on the ballot) EMAIL

If a grower is engaged in producing pecans in more than one region, such grower shall nominate in the region in which they grow the largest volume of their production.

The undersigned are eligible to submit nominations pursuant to section 986.46 of Marketing Order No. 986 (Order), and hereby petition the American Pecan Council (Council) to include on the nominating ballot the name of:

ADDRESS			
CITY	STATE	ZIP CODE	
	te for the position of G forth in the Order.	rower Member to represent	theRegion for the 2024-2028 term of
Grower non	ninee farms pecan acrea	ge □ equal to or exceeding	176 acres or □ less than 176 acres (check one).
G	ROWER'S NAME (print clearly)	SIGNATUI	RE* ADDRESS/PHONE/EMAIL
	(nomi	nator)	
	(supp	porter)	
	(supp	porter)	

THIS PETITION MUST BE RECEIVED NO LATER THAN <u>APRIL 1, 2024</u>, IN ORDER TO BE VALID.

average of at least 50,000 pounds of inshell pecans and I am a grower in the region of which I am nominating

or supporting a nomination.

Please mail the completed form to:

American Pecan Council P.O. Box 100398 Fort Worth, TX 76185

or email to forms@americanpecan.com

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 0581-0291. The time required to complete this information collection is estimated to average 20 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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