



County Committee Elections

It's county committee election time, and this special issue of the Wallowa County FSA newsletter is your guide to the 2010 election.

Since this only happens once a year, here is an election refresher. For election purposes, counties are divided into **Local Administrative Areas**, or LAAs. Each LAA contributes one producer to serve a three-year term on the Farm Service Agency county committee.

Most counties are divided into three LAAs. In Wallowa County the following LAAs have been established:

LAA #	Townships
1	Flora, Troy
2	Joseph, Enterprise
3	Lostine, Wallowa

Each year, an election is held in an LAA to replace the committee member whose three-year term is expiring. In counties with three LAAs, one seat is up for election. This year's election will be in LAA #3 or the Lostine/Wallowa area.

The three steps in the election process are the call for nominations, the election and installation of the new committee member.

Election Timetable

- June 15 Nomination period begins.
- Aug. 2 Deadline to submit nomination forms.
- Nov. 5 Ballots are mailed to eligible voters.
- Dec. 6 Deadline to return completed ballots to FSA county office.
- Jan. 1, 2011 New committee members and alternates are installed.

Nominations Open June 15

Nominations for candidates to run for the Farm Service Agency county committee election representing producers in LAA #3 (Lostine/Wallowa) will be accepted from June 15 - Aug. 2, 2010.

Producers who are residents in LAA #3 and who participate or cooperate in an FSA program *and* are of *legal voting age* may be nominated *to serve on* the county committee.

Individuals may nominate themselves or others as candidates. Also, organizations representing socially disadvantaged minorities and women farmers or ranchers may also nominate candidates.

Nomination form, FSA-669A, is included in this newsletter. Additional forms and details are available at the county office or can be downloaded from the following FSA web site: www.fsa.usda.gov/pas/publications/elections.

Eligible voters can nominate as many candidates as they wish.

To be valid, the nomination form must be signed by the person being nominated, indicating agreement to serve if elected, and returned to the FSA county office by the close of business on Aug. 2, 2010 or postmarked by midnight Aug. 2, 2010.

Who Can Vote

Agricultural producers of legal voting age can vote if they participate or cooperate in any FSA program. A person who is not of legal voting age but supervises and conducts the farming operations on an entire farm can also vote.

No one can be denied the right to vote because of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation or marital or family status.

If you are unsure of your eligibility, contact the staff at the county office.

USDA SERVICE CENTER
88401 Hwy 82 Box B
Enterprise, OR 97828-3042
(541) 426-4521
(541) 426-4789 FAX

Hours:
Monday – Friday
7:30 a.m. – 4:30 p.m.

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FSA Committee Members

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FSA-669A
(03-24-10)U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency**NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION**

This form allows individuals to nominate themselves or any other person as a candidate. If additional forms are needed, this one may be copied or may be obtained at the County FSA Office or obtained electronically at <http://www.sc.egov.usda.gov>. Each form submitted must be:

- A. Limited to one nominee.
- B. Signed and dated by the nominee in Item 3. Nominee must sign if willing to have his/her name placed on the ballot and agrees to serve if elected.

Note: Name shown on ballot will appear exactly the same as in Agency records.
- C. Delivered to the County FSA Office or postmarked no later than August 2, 2010.
- D. Signed and dated as a write-in candidate if elected as a member and willing to serve on the COC.

The County FSA Committee is responsible for reviewing each form to determine the eligibility of nominees. A person who is nominated on this form and is found ineligible will be so notified and have an opportunity to file a challenge.

Persons nominated should actively participate in the operation of a farm or ranch and be well qualified for committee work. A producer is eligible to be a County FSA committee member if the producer resides in the Local Administrative Area (LAA) in which the election is to be held and is eligible to vote.

Federal regulations may prohibit County FSA Committee members from holding certain positions in some farm, commodity, and political organizations if such positions pose a conflict of interest with FSA duties. The positions include functional offices such as president, vice president, secretary, or treasurer; and positions on boards or executive committees. Conflict of interest restrictions also apply to employees, operators, managers, and majority owners of tobacco warehouses. Questions concerning eligibility should be directed to the County FSA Office.

A candidate has the option to request that all voted ballots for an individual county committee election be returned to the respective State Office in lieu of being returned to the county office. This request must be in writing and submitted to the local County Executive Director prior to the announced end of the nomination period.

The duties of County FSA Committee members include:

- A. Administering farm program activities conducted by the County FSA Office.
- B. Informing farmers of the purpose and provisions of the FSA programs.
- C. Keeping the State FSA Committee informed of LAA conditions.
- D. Monitoring changes in farm programs.
- E. Participating in county meetings as necessary.
- F. Performing other duties as assigned by the State FSA Committee

The U.S. Department of Agriculture (USDA) prohibits discrimination in all of its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, political beliefs, genetic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410, or call toll-free at (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.

FSA-669A (03-24-10)	U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency
<h2 style="margin: 0;">NOMINATION FORM FOR COUNTY FSA COMMITTEE ELECTION</h2>	

1. NAME OF NOMINEE <i>(Type or Print Nominee's Full Name)</i>	TO BE COMPLETED BY COUNTY FSA OFFICE	
2. ADDRESS OF NOMINEE	4. INITIALS OF EMPLOYEE RECEIVING FORM AND DATE RECEIVED	
3. NOMINEE'S CERTIFICATION: <i>I hereby agree to have my name placed on the ballot, that I will serve if elected, and if there is a conflict of interest, I will resign such position.</i> <input type="checkbox"/> <i>I DO want to witness the settling of tied votes with another nominee.</i> <input type="checkbox"/> <i>I DO NOT want to witness the settling of tied votes with another nominee.</i>	5. COUNTY 6. LAA 7. STATE 8. NOMINATOR'S CERTIFICATION: <i>If this nomination is by other than self, the following eligible voter or representative of a community based organization hereby nominates the afore-named person to be a candidate in the next County FSA Committee election for the county.</i>	
3A. SIGNATURE OF NOMINEE	3B. DATE	8A. SIGNATURE OF NOMINATOR <i>(If the individual is self nominating, no signature is required).</i>
<input type="checkbox"/> <i>Check here if nominee is a write-in candidate.</i>		8B. DATE

9. TO BE COMPLETED BY NOMINEE

VOLUNTARY INFORMATION FOR MONITORING PURPOSES: The following information is requested by the Federal Government in order to monitor FSA's compliance with federal laws prohibiting discrimination against program participants on the basis of race, color, national origin, religion, sex, marital status, handicapped condition, or age. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your nomination or to discriminate against you in any way.

ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	RACE (Choose as many boxes as applicable) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
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INSTRUCTIONS FOR COMPLETING THIS FORM

- Complete the form as follows:
- ITEM 1** Type or Print the nominee's full name. The nominee must be:
 - A. Eligible to vote in the designated County FSA Committee election.
 - B. Eligible to hold the office of County FSA Committee member.
 - C. Willing to serve if elected.
 - ITEM 2** Enter the nominee's current address.
 - ITEM 3** The nominee must check one of the boxes to indicate a preference regarding the settling of tied votes.
 - ITEMS 3A & 3B** The nominee must sign and date.
 - ITEMS 8A & 8B** The nominator must sign and date. *(If the individual is self nominating, no signature is required.)*
 - ITEM 9** Completing this item is voluntary.
- ALL FORMS MUST BE RECEIVED IN THE COUNTY OFFICE OR POSTMARKED BY AUGUST 2, 2010.

NOTE: *The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Food, Conservation, and Energy Act of 2008 (Pub. L. 110-246). The information will be used to obtain nominees for election to the County FSA Committee. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for County Personnel Records, USDA/FSA-6. Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility for nomination for election to the County FSA Committee.*

*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 0560-0229. The time required to complete this information collection is estimated to average 10 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. The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.***

Election

The county committee election is held by mail. Ballots will only be mailed to eligible voters in the Lostine/Wallowa area on Nov. 5, 2010 and must be returned to the FSA county office by the close of business on Dec. 6, 2010 or postmarked by midnight Dec. 6, 2010.

Who Can Hold Office

To hold office as a county committee member, a person must meet the basic eligibility criteria.

- Participate or cooperate in a program administered by FSA
- Be eligible to vote in a county committee election
- Reside in the LAA in which the person is a candidate

Not have been:

- Removed or disqualified from the office of county committee member, alternate or employee
- Removed for cause from any public office or have been convicted of fraud, larceny, embezzlement or any other felony
- Dishonorably discharged from any branch of the armed services.

For more information about county committee elections, contact the county office staff.



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