



Dairy Farmers of Wisconsin

# NOMINATION FORM

## Director Election 2025

for Milk Producers in Districts 3, 6, 9, 12, 15, 18, 21, and 24

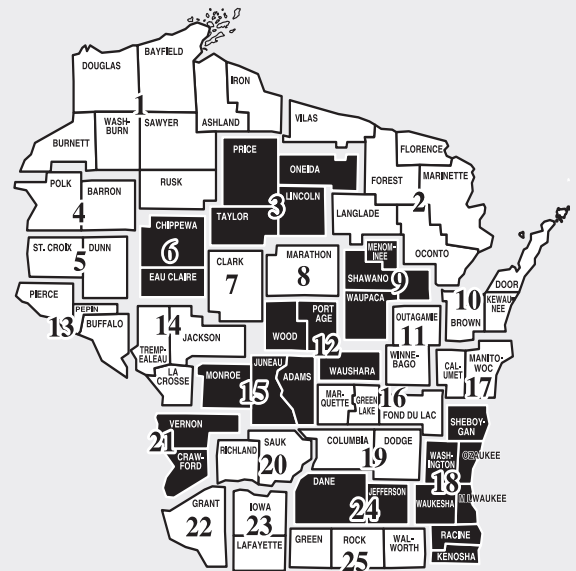
Wisconsin's Milk Marketing Order requires a partial election of the marketing board each year. This year, elections will be held for board member positions in Districts 3, 6, 9, 12, 15, 18, 21, and 24. Directors elected to these positions will serve terms that begin on July 1, 2025, and end on June 30, 2028.

Only affected producers are eligible to nominate or be nominated. "Affected producer" means an individual, partnership, corporation, or other business entity in Wisconsin engaged in the production of milk within this state and the sale of milk to a handler or consumer. Producers must reside in the district in which they are nominated. Nominees require five or more nominations from other milk producers from the same district who are not from the same entity as the nominee. The nominee must sign the nomination form.

Successful candidates will become more knowledgeable of the milk market order and support the actions and activities of both local and national checkoff organizations. Both organizations use electronic communications, and elected directors should have the capability to receive such communications to keep informed of all checkoff activities. Nomination forms must be postmarked on or before March 28, 2025. The board member election will take place May 1 through May 23, 2025.

### DISTRICTS:

- District 3 - Lincoln, Oneida, Price, and Taylor counties
- District 6 - Chippewa and Eau Claire counties
- District 9 - Menominee, Shawano, and Waupaca counties
- District 12 - Portage, Waushara, and Wood counties
- District 15 - Adams, Juneau, and Monroe counties
- District 18 - Kenosha, Milwaukee, Ozaukee, Racine, Sheboygan, Washington, and Waukesha counties
- District 21 - Crawford and Vernon counties
- District 24 - Dane and Jefferson counties



Department of Agriculture, Trade and Consumer Protection

Division of Agricultural Development

2811 Agriculture Drive, PO Box 8911, Madison WI 53708-8911

**Nomination Form** - Mail To: DATCP, Market Orders, PO Box 8911, Madison, WI 53708-8911

(Please Print Clearly)

Person Nominated \_\_\_\_\_

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

Telephone \_\_\_\_\_ County \_\_\_\_\_

District \_\_\_\_\_ Email Address \_\_\_\_\_

Signature of person nominated \_\_\_\_\_

**NOTICE** - Five other producers must sign on reverse side of this form.



# Nomination Signed by Five Other Milk Producers

Each nomination shall be signed by five or more affected producers residing within the same district as the nominee. We, the undersigned milk producers, being affected producers, hereby nominate the person on this form for election to the Milk Marketing Board – Dairy Farmers of Wisconsin. Please print legibly.

Print Name/Farm Name	Address, City, Zip Code	County	Phone	Signature

## DECLARATION OF ELIGIBILITY

- I certify that I am an “affected producer” in the production of milk in Wisconsin and I, therefore, meet the qualifications for nomination as a Director to serve on the Milk Marketing Board – Dairy Farmers of Wisconsin. “Affected producer” means an individual, partnership, corporation, or other business entity engaged as an owner or tenant in the production of milk within this state, and selling milk in commercial channels.
- I certify that I meet the criterion checked below, as specified in ch. 96, Wis. Stats., chs. ATPC 140 and ATPC 144, Wis. Adm. Code:
  - a. I am an individual directly engaged in the production and sale of milk in the state of Wisconsin.
 OR
  - b. I have the authority to run for the position of Director, as the sole individual representing an “affected producer” for purposes of holding a directorship on the marketing board, and I am doing so with the approval of said entity.  
(Please specify the affected producer: corporation, partnership, limited liability company or other) \_\_\_\_\_
- I will notify the marketing board and DATCP immediately if, for any reason, the information I have attested to herein changes.

I declare under penalty of false swearing under the law of Wisconsin that the foregoing is true and correct.

Signed on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ (City, Village, Town, or other location, and State).

\_\_\_\_\_ (print name)

\_\_\_\_\_ (signature)

**See Reverse Side**

