

**BOARD MEMBER NOMINATION FORM**  
Georgia Agricultural Commodity Commission for Soybean

**PERSONAL INFORMATION**

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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COUNTY: \_\_\_\_\_ FARM LOCATION: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**PRODUCTION INFORMATION**

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APPROXIMATE SIZE OF SOYBEAN OPERATION (ACREAGE): \_\_\_\_\_

PERCENT OF INCOME FROM SOYBEAN ACTIVITIES: \_\_\_\_\_ %

NUMBER OF YEARS IN PRODUCTION OF SOYBEAN: \_\_\_\_\_

OTHER COMMODITIES PRODUCED:

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

SOYBEAN/AGRICULTURE GROUP AFFILIATIONS AND POSITIONS HELD, IF ANY:

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

**COMMENTARY AND CERTIFICATION**

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Please provide a brief 50-word or less commentary stating why you think you or the person you are nominating would make a worthy candidate for membership on the Soybean Commission.

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

By signing below, I certify that I am an active producer of Georgia soybean.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Please e-mail to [andy.harrison@agr.georgia.gov](mailto:andy.harrison@agr.georgia.gov) or fax to 404-656-9380, or mail to  
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