

USB Director Candidate

Indiana Soybean Alliance

Your contact information:					
Name:					
Address:					
City:	State:	IN	Zip Code:		
County of Residence:					
Phones					
Home:		Work:			
Cell:		Fax:			
E-mail					
A great deal of Director commun					
not have either, and are elected	a USB Direc	tor, would	d you be willing	YES	NO
to get one?				IE9	NU
<u>Tell us about your career in fa</u>	rming:				
Farm Name:					
_City:	State:	IN	County:		
How many years have you farmed? Yea		rs:			
Do you farm with someone else	?				
Acreage:		Farm			
Soybeans		Total:			
Are you an Indiana resident who					
Assessed under the Soybean Pr last two years?	omotion and	Researc	n Checkoff in the	YES	NO
				TLO	NO
Do you own or share risk of loss of soybeans?		YES	NO		
Are you in arrears or default on checkoff payments?		YES	NO		
Are you a federally registered lobbyist?		YES	NO		
Please describe your operation					

Education or special training

School or Course:

Graduation Year:	Degree(s):
	(If you need additional space, please attach blank
Any other special training?	pages)

Participation in agricultural organizations

Organization:	
Years:	Title:
Comments:	(If you need additional space, please attach blank pages)
Organization:	
Years:	Title:
Comments:	(If you need additional space, please attach blank pages)
_	
Organization:	
Years:	Title:
Comments:	(If you need additional space, please attach blank pages)

Community activities

Organization:

Years:	Title:
	(If you need additional space, please attach
Comments:	blank pages)

Organization:	
Years:	Title:
	(If you need additional space, please attach
Comments:	blank pages)

1.	Why would you like to be Indiana's representative on the United Soybean Board
2	Describe your knowledge of soybean checkoff programs - both state and
2.	national.
3.	As a leader and spokesperson for the soybean industry and agriculture in general, what are top issues you believe need attention?

5.	Please provide any additional information you would like the nomination
	committee to know.

Signature:

Date:

Email completed form to amyers@indiansoybean.com, or mail it to Indiana Soybean Alliance Attn: Amber Myers 8425 Keystone Crossing, Suite 200 Indianapolis, IN 46240

Due by February 28, 2025