## **BOARD MEMBER NOMINATION FORM**

Georgia Agricultural Commodity Commission for Wine & Grapes

## PERSONAL INFORMATION NAME: \_\_\_\_\_\_ TITLE OR POSITION: \_\_\_\_\_ BUSINESS NAME: ADDRESS: COUNTY: REGION: \_\_\_ North \_\_\_ South \_\_\_ Central CELL PHONE: PHONE NUMBER: EMAIL ADDRESS: PRODUCTION INFORMATION APPROXIMATE SIZE OF OPERATION (ACREAGE): LITERS OR GALLONS PRODUCED ANNUALLY: NUMBER OF YEARS IN PRODUCTION: \_\_\_\_\_ OTHER COMMODITIES PRODUCED: AGRICULTURE GROUP AFFILIATIONS AND POSITIONS HELD. IF ANY: **COMMENTARY AND CERTIFICATION** 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 Wine & Grape Commission. By signing below, I certify that I am an active producer of Georgia Wine & Grapes. **SIGNATURE** DATE Please e-mail to andy.harrison@agr.georgia.gov or fax to 404-656-9380, or mail to Georgia Department of Agriculture

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