

# Committees & Working Groups

## ASTA Committee Assignments

Each member company is permitted to have one voting person per committee. There is no limit to the number of non-voting representatives designated by a company. For questions, contact Ann Jorss, Chief Operating Officer, at 703.837.8140. Committee Code Examples: (LEGIS) (BIOTECH).

Please feel free to make copies of this page.



### VOTING COMMITTEE MEMBERS

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

### NON-VOTING COMMITTEE MEMBERS

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Committee Code(s):

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

Please return completed form to Ann Jorssat:

American Seed Trade Association • 1701 Duke Street, Suite 275 • Alexandria, Virginia 22314 • [www.betterseed.org](http://www.betterseed.org) • (T) 703.837.8140 • (F) 703.837.9365