Project Code 181 QID 150028 OMB No. 0535-0109 Approval Expires 4/30/2009

# AGRICULTURAL LABOR SURVEY April 2009



NATIONAL AGRICULTURAL STATISTICS SERVICE

USDA, NASS, Hawaii Field Office 1428 S. King Street Honolulu, HI 96814 1-800-804-9514 Fax: 808-973-2909

E-mail: nass-hi@nass.usda.gov

Your help is needed to estimate the number of agricultural workers and their average wage rate. Authority to collect information on the Agricultural Labor Survey is Title 7, Section 2204 of the U.S. Code. The information will be used to compile and publish estimates at a Regional and National level for the United States. Response is voluntary and all answers are confidential.

| Attempted Contacts |  |  |  |  |  |  |
|--------------------|--|--|--|--|--|--|
| Date Time Notes    |  |  |  |  |  |  |
|                    |  |  |  |  |  |  |
|                    |  |  |  |  |  |  |
|                    |  |  |  |  |  |  |
|                    |  |  |  |  |  |  |

| Stratum | POID | Tract | Subtr. |
|---------|------|-------|--------|
|         |      |       |        |
|         |      |       | Į.     |

|    |      | erify name and mailing address of this operation. Make any corrections   | ☐ [ Check if na | ame label verified) |  |  |  |
|----|------|--|-----------------|---------------------|--|--|--|
|    | nec  | necessary (including the correct operation name) on the label and continue.]   |                 |                     |  |  |  |
| 2. | Sin  | nce June 1, 2008, have you or will you (name on label)   |                 |                     |  |  |  |
|    | a.   | grow any crops or cut hay? [Include grains, row crops, oilseeds, fruits, nuts, vegetables (including strawberries and melon crops), nursery and greenhouse, Christmas trees, and other specialty crops.] |                 |                     |  |  |  |
|    |      | ☐ YES – [Go to item 3] ☐ NO – [Continue]   |                 |                     |  |  |  |
|    |      | own or raise any livestock, poultry, bees, or aquaculture? [Include livestock and poultry owned, and any being raised under contract for someone else.]  |                 |                     |  |  |  |
|    |      | ☐ YES – [Go to item 3] ☐ NO – [Continue]   |                 |                     |  |  |  |
|    | C.   | sell any agricultural products?  |                 |                     |  |  |  |
|    |      | ☐ YES – [Go to item 3] ☐ NO – [Continue]   |                 |                     |  |  |  |
|    | d.   | receive government agricultural payments? [Exclude government payments received as a landlord.]  |                 |                     |  |  |  |
|    |      | ☐ YES – [Go to item 3] ☐ NO – [Continue]   |                 | OFFICE USE          |  |  |  |
|    | e.   | have more than 19 acres of idle cropland or more than 99 acres of pastureland?   |                 | 785                 |  |  |  |
|    |      | ☐ <b>YES</b> – [Go to item 3] ☐ <b>NO</b> – [Go to Section 7, page 11, item 1]   |                 |                     |  |  |  |
|    |      |  | 1               | OFFICE USE          |  |  |  |
| 3. |      | e the day-to-day decisions for this operation made by one individual,  | I               | R. UNIT             |  |  |  |
|    | a hi | ired manager, or partners? [Check one]   | I               | 921                 |  |  |  |
|    |      | One individual – [Go to Section 2, page 5, item 1]   | I               | SUB.<br>941         |  |  |  |
|    |      | A hired manager – [Go to Section 2, page 5, item 1]  | I               | 941                 |  |  |  |
|    |      |  |                 |                     |  |  |  |
|    |      | Partners – How many partners make the day-to-day decisions?  | Number          | JUNE 1              |  |  |  |
|    |      | [Enter number of partners, including operator, and then continue]  |                 | 930                 |  |  |  |

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## PARTNER NAMES

| [Verify part | ner(s) name   | er person(s) in the<br>and make nece | essary corre | ctions if name(s) have al | ready been                            | entered.] | _          |
|--------------|---------------|--------------------------------------|--------------|---------------------------|---------------------------------------|-----------|------------|
| [Check       | if verified]  |                                      |              |                           |                                       |           | OFFICE USE |
| Name:        |               |                                      |              | Phone: ()                 | · · · · · · · · · · · · · · · · · · · |           | Stratum    |
|              | (First)       | (Middle)                             | (Last)       |                           |                                       |           | 925        |
| Address:     |               |                                      |              |                           |                                       |           | Ind. Op.   |
|              |               | (Rt or St.)                          |              | (City)                    | (State)                               | (Zip)     | 924        |
| Did this pa  | rtner operate | e land individual                    | ly on June 1 | , 2008?                   |                                       |           |            |
| Yes          | No            |                                      |              |                           |                                       |           |            |
|              |               |                                      |              |                           |                                       |           | _          |
| [Check       | if verified]  |                                      |              |                           |                                       |           | OFFICE USE |
| Name:        |               |                                      |              | Phone: ()                 | <del> </del>                          |           | Stratum    |
|              | (First)       | (Middle)                             | (Last)       |                           |                                       |           | 926        |
| Address:     |               |                                      |              |                           |                                       |           | Ind. Op.   |
|              |               | (Rt or St.)                          |              | (City)                    | (State)                               | (Zip)     | 924        |
| Did this pa  | rtner operate | land individual                      | ly on June 1 | , 2008?                   |                                       |           |            |
| Yes          | □ No          |                                      |              |                           |                                       |           |            |
|              |               |                                      |              |                           |                                       |           | _          |
| [Check       | if verified]  |                                      |              |                           |                                       |           | OFFICE USE |
| Name:        |               |                                      |              | Phone: ()                 |                                       |           | Stratum    |
| ivanic.      | (First)       | (Middle)                             | (Last)       | _ 1 Hone. ()              | <del></del>                           |           | 927        |
|              | ` '           | ,                                    | ` ,          |                           |                                       |           |            |
| Address:     |               |                                      | <del> </del> |                           |                                       |           | Ind. Op.   |
|              |               | (Rt or St.)                          |              | (City)                    | (State)                               | (Zip)     | 924        |
| Did this pa  | rtner operate | e land individual                    | lv on June 1 | 2008?                     |                                       |           |            |
| Yes          | No            |                                      | ,            | ,                         |                                       |           |            |
|              |               |                                      |              |                           |                                       |           | _          |
| [Check       | if verified]  |                                      |              |                           |                                       |           | OFFICE USE |
| Name:        |               |                                      |              | Phone: ( )                |                                       |           | Stratum    |
|              | (First)       | (Middle)                             | (Last)       |                           | <del> </del>                          |           | 928        |
|              |               |                                      |              |                           |                                       |           |            |
| Address:     |               |                                      |              | (2): )                    |                                       |           | Ind. Op.   |
|              |               | (Rt or St.)                          |              | (City)                    | (State)                               | (Zip)     | 924        |
| Did this pa  | rtner operate | e land individual                    | ly on June 1 | , 2008?                   |                                       |           |            |
|              |               |                                      |              |                           |                                       |           |            |

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## Section 2 - UNPAID WORKERS

April 2009

| Su | М  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
|    |    |    | 1  | 2  | 3  | 4  |
| 5  | 6  | 7  |    | 9  | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 |    |    |

Now I would like to ask about the hours you (the operator), any of your partners, and any family members, may have worked during the 7 days beginning Sunday, April 12<sup>th</sup> and ending Saturday, April 18<sup>th</sup>.

| 1. | How many hours did you (the operator) spend   |                               |                  |              | OFFICE USE |
|----|---|-------------------------------|------------------|--------------|------------|
|    | that week doing farm/ranch work on this operation without pay?                              | Operator                      |                  | Hours        | 010        |
| 2. | [If Partnership] Did any partners do farm/ranch wo  | rk that week <b>without</b>   | pay?             |              |            |
|    | YES – How many hours did each work? [Exclude the operator's hours                           |                               |                  |              |            |
|    | recorded in item 1]   | Partner 1                     |                  | Hours        |            |
|    | ☐ NO − [Continue with item 3]   | Partner 2                     |                  | Hours        | OFFICE USE |
|    |   | Partner 3                     |                  | Hours        | 011        |
|    |   | Partner 4                     |                  | Hours        |            |
| 3. | Did anyone else, such as a family member or neigh<br>on this operation <b>without pay</b> ? | bor, do at least <b>15 ho</b> | ours of farm/ran | ch work that | week       |
|    | ☐ <b>YES</b> - [Continue] ☐ <b>NO</b> - [Go to Section 3, i                                 | tem 1]                        |                  |              | NUMBER     |
|    | a. How many unpaid workers, excluding the opera hours that week?                            |                               |                  |              | 020        |
|    |   |                               |                  |              |            |
|    | b. How many hours did each of these work?   | Worker 1                      |                  | Hours        |            |
|    |   | Worker 2                      |                  | Hours        | OFFICE USE |
|    |   | Worker 3                      |                  | Hours        | 021        |
|    |   | Worker 4                      |                  | Hours        |            |

| Δ | n | ril | 12 | n | n | 9 |
|---|---|-----|----|---|---|---|
|   |   |     |    |   |   |   |

| Su | М  | Т  | W  | Th | F  | S  |
|----|----|----|----|----|----|----|
|    |    |    | 1  | 2  | 3  | 4  |
| 5  | 6  | 7  | 8  | 9  | 10 | 11 |
| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| 26 | 27 | 28 | 29 | 30 |    |    |

## Section 3 - CONTRACT, AGRICULTURAL SERVICE OR CUSTOM WORKERS

- 1. During the week of April 12th through the 18th, was any work performed on your operation using---
  - Contract labor
  - An agricultural service
  - Custom work for a fee or under contract

For those workers on the payroll that you paid wages directly to the worker, please report those workers in Section 4 – PAID WORKERS, below.

| <b>S</b> – [Enter code 1 and continue]   NO – [Enter code 3 then go to Section 4, below]  | 029            |
|---|----------------|
| Examples of Contract, Agricultural Service and Custom Work:   |                |
| Artificial insemination (AI); combining; corn or cotton picking; fertilizing; harvesting of fruit, vegetable or berry crops; hay baling; milk testing; pruning; sheep shearing; spraying; thinning; veterinarian work; weeding. | <br> <br> <br> |
| What was done? How many workers were there?   | 5              |
|   |                |
| Total Contract, Ag. Service and Custom Workers  |                |

#### Section 4 - PAID WORKERS

NO - [Enter Code 3 then go to Section 5, page 8]

| 1. | Did this operation have anyone on the payroll to do agricultural work the week of April 12th through the   | 18 <sup>th</sup> ? |      |
|----|--|--------------------|------|
|    | [Include part-time workers, paid family members and hired managers. Only report Hired Workers that were directly paid by the farm operation. Do not include contract leberges or workers reported in Section 2 above 1 |                    |      |
|    | laborers or workers reported in Section 3 above.]  |                    | CODE |
|    | YES - [Enter code 1 then continue on next page]  | 400                |      |

#### **Section 4** – PAID WORKERS (continued)

|    | April 2009 |    |    |    |    |    |
|----|------------|----|----|----|----|----|
| Su | М          | Т  | W  | Th | F  | S  |
|    |            |    | 1  | 2  | 3  | 4  |
| 5  | 6          | 7  | 8  | 9  | 10 | 11 |
| 12 | 13         | 14 | 15 | 16 | 17 | 18 |
| 19 | 20         | 21 | 22 | 23 | 24 | 25 |

29

30

2. For the paid workers, record the number of workers, hours worked, and the gross wages paid the week of April 12<sup>th</sup> through the 18<sup>th</sup>. Please separate the workers by the main type of work they were hired to do based on the following groups:

28

| Code | Work Hired to Do  |
|------|---|
| 1    | FIELD WORKERS Jack-of all-trades and machinery operators on crop farms, fruit or vegetable pickers, greenhouse or nursery workers, hay balers and haulers, etc.           |
| 2    | LIVESTOCK WORKERS  Jack-of-all-trades and machinery operators on livestock or poultry operations, workers hired to fix fences, tend animals, milk cows, gather eggs, etc. |
| 3    | SUPERVISOR/MANAGER Hired managers, range foremen, crew leaders, etc. Exclude individuals not directly involved in day-to-day decisions on the farm.                       |
| 4    | OTHER WORKERS Office workers, bookkeepers, pilots, pesticide applicators, etc.  |

| Work Hired to Do | Worker<br>Code<br>(shown above) | Number<br>of Paid<br>Workers | Total<br>Hours<br>Worked | Total Gross<br>Wages That Week<br>(Dollars) |
|------------------|---------------------------------|------------------------------|--------------------------|---|
|                  | 411                             | 412                          | 413                      | 414   |
|                  | 421                             | 422                          | 423                      | 424   |
|                  | 431                             | 432                          | 433                      | 434   |
|                  | 441                             | 442                          | 443                      | 444   |
|                  | 451                             | 452                          | 453                      | 454   |

3. TOTAL PAID WORKERS 360

26

27

4. In 2009, how many of these **TOTAL PAID WORKERS** will be paid by this operation---a. For 150 days or more of work?
b. For 149 days or less of work?

Sum MUST equal **TOTAL PAID WORKERS**, item 3 above.

#### SUGARCANE AND PINEAPPLE COMPANIES ONLY

| 5. | How many of the | TOTAL PAID WORKERS, | reported in item 3, were: |
|----|-----------------|---------------------|---------------------------|
|----|-----------------|---------------------|---------------------------|

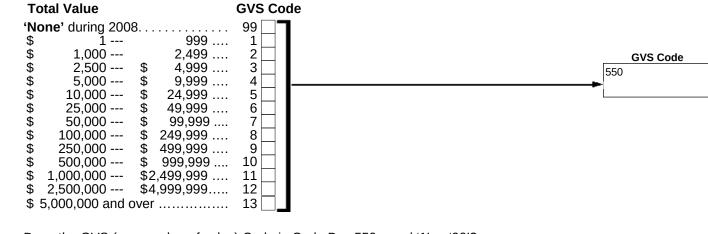
| a. | Sugarcane workers (exclude mill workers)    | 505 |  |
|----|---|-----|--|
| b. | Pineapple workers (exclude cannery workers) | 506 |  |

#### Section 5 - VALUE OF SALES

1. Please classify this operation in terms of total gross value of sales [Be sure sales represent only **2008** and **earlier years' production**.]

#### Considering:

- Sales of all crops, livestock, poultry, and livestock products (milk, eggs, etc.) sold in 2008.
- The value of product removed for all crops, livestock, and poultry produced under contract in 2008.
- Sales of all miscellaneous agricultural products in 2008.
- All government agricultural payments received in 2008.
- Landlord's share of government payments and crops sold in 2008.
- a. What code represents the total gross value of sales, including government agricultural payments?



| b. | Does the GVS (gross value of | f sales) Code in Code Box 550 equal '1' or '99'' |
|----|------------------------------|--|
|    | YES - [Continue]             | $\square$ <b>NO</b> - [Go to page 9, item $2$ ]  |

c. Record all **2009** crops, land uses, and livestock or poultry now on the total acres operated, then go to page 9, item 2.

| _                      |                  |                                     |       | _                   |             |
|------------------------|------------------|-------------------------------------|-------|---------------------|-------------|
| Land Use               | ACRES            | Field Crops Intended<br>For Harvest | ACRES | Other Crops         | ACRES       |
| CRP/WRP                |                  |                                     |       | Cut Christmas Trees |             |
| Idle Cropland          |                  |                                     |       |                     |             |
| Fallow Land            |                  |                                     |       |                     |             |
|                        |                  |                                     |       |                     |             |
|                        |                  |                                     |       |                     |             |
| _                      |                  | _                                   |       | Livestock           | NUMBER      |
| Government Payments    | WHOLE<br>DOLLARS | Fruits/Nuts                         | ACRES | Cattle – Dairy      |             |
| CRP/WRP Payments       |                  |                                     |       | Cattle – Other      |             |
| Other Gov't Payments   |                  |                                     |       | Chickens            |             |
|                        |                  | , <del></del>                       |       | Hogs                |             |
| Pasture/Rangeland      |                  |                                     |       | Horses              |             |
| Cropland Used Only For | ACRES            |                                     |       | Mules/Burros        |             |
| Pasture                |                  | _                                   |       | ¬                   |             |
| Permanent Pasture      |                  | Vegetables/Melons                   | ACRES |                     |             |
| Woodland Pasture       |                  |                                     |       |                     |             |
| r                      |                  | , <del></del>                       |       |                     |             |
| Aquaculture            | NUMBER           |                                     |       |                     | Office Use  |
| Acres of Ponds in Use  |                  |                                     |       | Т                   | OTAL POINTS |
| Foodsize/Stockers      |                  | Berries                             | ACRES | 552                 |             |

| Fingerlings/Broodfish |  |  | PASTURE POINTS |
|-----------------------|--|--|----------------|
| Trout Eggs            |  |  | 554            |

## Section 5 - VALUE OF SALES (Continued)

Code

Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from this operation?

|    |      | (corn silage, seed corn, etc.)   |        |               |                      |
|----|------|--|--------|---------------|----------------------|
|    | 4 –  | Vegetables and Melons  | 4 🗌    |               |                      |
|    |      | (cantaloupes, ginger root, potatoes, pumpkins, sweet corn, sweet potatoes, taro, tomatoes, watermelons, and others)        |        |               |                      |
|    | 5 –  | Fruit, Tree Nuts and Berries   | 5 🗌    |               |                      |
|    |      | (bananas, coffee, grapes, guavas, macadamia nuts, oranges, papayas, pineapple, strawberries, and others)                   |        |               |                      |
|    | 6 –  | Nursery, Greenhouse, Floriculture and Sod  | 6      |               |                      |
|    |      | (bedding plants, bulbs, cut flowers, flower seeds, foliage plants, mushrooms, nursery potted plants, shrubbery, sod, etc.) |        |               |                      |
|    | 7 –  | Cut Christmas Trees and Short Rotation Woody Crops   | 7      | _             | FARM TYPE CODE       |
|    | 8 –  | Other Crops and Hay  | 8 🗌    | $\rightarrow$ | 551                  |
|    |      | (forage, forestry products, grass seed, herbs, peanuts, silage, sugarcane, etc.)   |        | -             |                      |
|    | 9 –  | Hogs and Pigs  | 9 🗌    |               |                      |
|    | 10 – | Milk and Dairy (milk and other dairy products, sales of dairy animals)   | 10 🗌   |               |                      |
|    | 11 – | Cattle and Calves  | 11 🗌   |               |                      |
|    | 12 – | Sheep, Goats   | 12 🗌   |               |                      |
|    |      | (wool, mohair, milk, etc.)   |        |               |                      |
|    | 13 – | Horses, Mules  | 13     |               |                      |
|    | 14 – | Poultry and Eggs   | 14     |               |                      |
|    |      | (broilers, chickens, turkeys, ducks, eggs, geese, hatchlings, and poultry products)  |        |               |                      |
|    | 15 – | Aquaculture  | 15     |               |                      |
|    |      | (finfish, shellfish, ornamentals, etc.)  |        |               |                      |
|    | 16 – | Other Livestock  | 16 🗌 🗖 |               |                      |
|    |      | on 6 - PEAK HIRED WORKERS  |        |               | NUMBER OF<br>WORKERS |
| 1. |      | ng 2008, what was the largest number of hired workers,<br>ding paid family members, on the payroll on any one day?         |        |               | 277                  |
|    | ,    |  |        |               | CODE                 |
|    | Į    | DON'T KNOW - [Enter code 2]  |        |               | 278                  |
|    |      | NONE - [Enter code 3]  |        |               |                      |
|    |      |  |        |               |                      |

[Skip page 11, go to back page, item 1 and continue]

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Complete this section **only** if you answered "NO" for **all** questions in item 2 on the face page.

## Section 7 - CHANGE IN OPERATOR

|    | Has the operation named on the label been sold, rented or  | turned over to someone else?   |
|----|--|--|
|    | YES – [Go to item 2] NO – [Continue ]  | a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year (including growing crops or raising livestock)?  YES NO DON'T KNOW  Regardless of answer to above, write a note to explain the situation, then go to back page, item 1. |
| 2. | Please provide the following information for the operation   | that has taken over the land:  |
|    | Operation Name:  |  |
|    | Operator Name:   |  |
|    | Address:   | Phone: ()  |
|    | City:Sta   | ate: Zip:  |
| 3. | Was this new operation, reported in item 2, in business to the second of | pefore June 1, 2008?   |
| 4. | Is this new operation, reported in item 2, managed?  YES - [Go to back page, item 1]  NO - [Continue]  |  |

| Were any individuals associated with the new operation, reported in item 2 above, operating land individually before June 1, 2008? |
|--|
| ☐ YES - [Go to back page, item 1]  |
| NO - [Go to back page, item 1]   |
|  |

## **CONCLUSION**

S/E Name

| 1.                 | Do you (th   | ne oper  | ator named  | on the        | label) make an  | y day - | - to – day de | ecisions for A | ANOTHER farn                            | n or ra  | nch?               |   |
|--------------------|--|----------|---|---------------|---|---------|---------------|----------------|---|----------|--------------------|---|
|                    | YES -  | – [Cont  | tinue]  | □ N           | <b>O</b> – [Go to item  | 2 belo  | w]            |                |   |          |                    |   |
|                    | a. What  | is the r | name of this  | operat        | ion?  |         |               |                |   |          |                    |   |
|                    | [OFFICE USE ONLY: If ADDITIONAL OPERATION IS INDIVIDUAL OR PARTNERSHIP, complete a separate questionnaire for the additional operation.] |          |   |               |   |         |               |                |   |          |                    |   |
|                    | b. Was this additional operation in business before June 1, 2008?  |          |   |               |   |         |               |                |   |          |                    |   |
|                    | ☐ YES – [Continue] ☐ NO – [Continue]   |          |   |               |   |         |               |                |   |          |                    |   |
| 2.                 |  | -        |   | istrict ii    | n which your fai  |         | ch is located |                | - , , , , , , , , , , , , , , , , , , , | •        |                    |   |
|                    | Hawai  | ii Cour  | nty   |               | Honolulu Cou  | nty     |               | Kauai Cou      | nty                                     | Ma       | ui County          |   |
|                    | Duna (   | (110)    |   |               | Honolulu (610)  |         |               | Waimea (2:     | 10)                                     | H        | ana (310)          |   |
|                    | South  | Hilo (12 | 20)   |               | Koolaupoko (64  | 10)     |               | Koloa (220)    | )                                       | M        | akawao (320)       |   |
|                    | ☐ North I  | Hilo (13 | 0)  |               | Koolauloa (650)   | )       |               | Lihue (230)    |   | W        | /ailuku (330)      |   |
|                    | Hamak  | kua (140 | 0)  |               | Waialua (660)   |         |               | Kawaihau (     | 240)                                    | ☐ La     | ahaina (340)       |   |
|                    | North I  | Kohala   | (150)   |               | Wahiawa (670)   |         |               | Hanalei (25    | 50)                                     | Пм       | olokai (350)       |   |
|                    |  | Kohala   | -   |               | Waianae (680)   |         | _             | ,              | •                                       |          | alawao (360)       |   |
|                    |  | Kona (1  | -   |               | Ewa (690)   |         |               |                |   |          | ,                  |   |
|                    |  | Kona (1  | -   |               |   |         |               |                |   |          |                    |   |
|                    | Kau (1   | -        | -00)  |               |   |         |               |                |   |          |                    |   |
| 3.                 | (The surve   | ey resu  |   | be ava        | oy of the results<br>ilable on the Int                                    |         |               |                | gov on                                  |          |                    |   |
|                    | □ VEC  | [Ente    | or Codo 11  | )             |   |         |               |                |   |          | <b>CODE</b><br>099 |   |
|                    |  | -        | er Code 1]<br>r Code 3]                               | }-            |   |         |               |                |   | <b>→</b> | 099                |   |
|                    |  |          |   | J             | Thank you   | u for   | vour re       | snonse         |   |          |                    |   |
| <b>D</b> -         |  |          |   |               | •   |         | •             | -              | Dhara (                                 |          |                    |   |
| кe                 | spondent:_   |          |   |               | Dat   | e:      |               |                | Phone: (                                | _) _     |                    | _ |
|                    |  |          |   |               |   |         |               |                |   | Office U | se for POID        |   |
|                    |  |          |   |               |   |         |               |                | 789                                     |          |                    |   |
|                    |  |          |   |               |   |         |               |                |   |          | <u> </u>           |   |
|                    |  |          |   |               |   |         |               |                | Date                                    |          |                    |   |
|                    | Response   | •        | Respond   | spondent Mode |   |         | Enum.         | Eval.          | MM DD YY                                |          |                    |   |
| 2-R<br>3-In<br>4-O |  | 9901     | 1-Op/Mgr<br>2-Sp<br>3-Acct/Bkpr<br>4-Partner<br>9-Oth | 9902          | 1-Mail<br>2-Tel<br>3-Face-to-Face<br>4-CATI<br>5-Web<br>6-E-mail<br>7-Fax | 9903    | 098           | 100            | 9910                                    |          |                    |   |
|                    |  |          |   | 1             | 8-CAPI  | 1       |               |                | 0                                       | 9        |                    |   |

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0535-0109. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

19-Other