



**MUSHROOM GROWER INQUIRY AGARICUS MUSHROOMS
July 2009**



**NATIONAL
AGRICULTURAL
STATISTICS
SERVICE**

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At the request of the mushroom industry, the Department of Agriculture is conducting an annual survey to determine production of mushrooms for the past crop year and intentions for the next crop year. Response to this survey is voluntary and not required by law. However, the information you furnish is confidential and used only in arriving at national and selected State totals. Your prompt response in returning the report in the enclosed envelope, which needs no stamp, is appreciated.

Please make corrections to name, address and Zip Code, if necessary.

INSTRUCTIONS

Report for the Mushroom Houses (Beds) you operate. Include space owned by you as well as leased from others.

Use this form to report **only** Agaricus (White Button, Crimini and Portabello) mushrooms. Information for SPECIALTIES such as Shiitake, Oysters, and other specialty mushrooms are to be reported on a separate form.

1. Did you grow Agaricus mushrooms **anytime** during the year July 1, 2008 to June 30, 2009?

- Yes, Continue
- No, Go to Section 3

SECTION 1: AGARICUS MUSHROOMS FOR THE YEAR ENDING JUNE 30, 2009

1. What was the **total square feet of growing area** used for harvesting Agaricus mushrooms during the year July 1, 2008 to June 30, 2009? **(Include tray system operations.)** 301
Square Feet

a. How much total square footage was filled annually? **(Include all fillings.)** 302
Square Feet

2. What were the **total pounds of Agaricus mushrooms sold** July 1, 2008 to June 30, 2009 from the total square feet reported in Question 1a? **(Include White Button, Crimini, and Portabello varieties.)** 303
Pounds

3. For the **total Agaricus mushrooms** sold (Question 2), please report the pounds and value of sales for the following categories. (Report grower value at point of first sale. For firms which grow and process their own mushrooms, value reported should be before processing.)

	Pounds	Value (Whole Dollars)
a. Fresh market packed by your firm.	304	305 \$
b. Sold to Brokers or Repackers (Total).	306	307 \$
(i) For Fresh Market Use.	308	309 \$
(ii) For Processing.	310	311 \$
c. Sold directly to Cannery or Freezers.	312	313 \$

(Note: Sum of the pounds in 3a, 3b, and 3c should equal Question 2 above.)

4. Of the total pounds of Agaricus mushrooms sold (Questions 3a, 3b, and 3c), how many pounds were **grown certified organic?** 314
Pounds

5. How many pounds (Question 4) were **sold as certified organic mushrooms?** 315
Pounds

6. Did this operation grow any **BROWN Agaricus** mushrooms (Portabello, Crimini) from July 1, 2008 to June 30, 2009?
- YES – Please Continue.
 - NO – Go to Section 2

	Pounds
7. What were the total pounds of BROWN Agaricus mushrooms sold July 1, 2008 to June 30, 2009 from the total square feet reported in Question 1a? (Include Portabello and Crimini type mushrooms only).	316

Please report by category:

- None**
- a. **Fresh market packed by your firm.**
- b. **Sold to Brokers or Repackers (Total)**
(Include fresh market use and processing).
- c. **Sold directly to Cannery or Freezers.**

Pounds	Value (Whole Dollars)
317	318 \$
319	320 \$
325	326 \$

(Note: Sum of the pounds in 7a, 7b, and 7c should equal Question 7 above.)

SECTION 2: PLANS FOR THE COMING CROP YEAR

1. What is the total square footage of Agaricus mushrooms you intend to fill between July 1, 2009 and June 30, 2010?

		Square Feet
a. For fresh market?	+	327
b. For the processing market?	+	328
c. Total fillings (sum of 1a + 1b).	=	329

SECTION 3: CHANGE IN OPERATOR – Complete this section only if you did not grow Agaricus mushrooms during July 1, 2008 to June 30, 2009.

1. Did you change ownership or leasing arrangement during the year ending June 30, 2009? YES NO

1a. If YES, please list below the date that beds were transferred to others, and the name, address, and telephone number of the individual in charge who operated the beds during the remainder of the year:

Date beds were transferred _____ Name of Firm _____
 Operator _____
 Address _____
 City, State, & Zip Code _____ Telephone No. _____

SECTION 4: OTHER

1. Did you produce any mushrooms under any other firm name or with any other person during the year ending June 30, 2009?

1a. If YES, please list the names below and check "YES" or "NO" to indicate if they are included in your report:

- (1) _____ YES NO
 (2) _____ YES NO

Location of mushroom houses: State: _____ County: _____

Name of Firm _____
 Operator _____
 Address _____
 City, State, & Zip Code _____ Telephone No. _____

Would you like to receive a free copy of the results of this survey in the mail?
 (The survey results will also be available on the Internet at <http://www.nass.usda.gov>
 after 3:00 pm EDT on August 20, 2009.)

Yes = 1

099

COMMENTS:

REPORTED BY: _____ PHONE: () _____ DATE: _____

OFFICE USE

Response	Respondent	Mode	Enum.	Eval.	Office Use for POID	9910	MM	DD	YY
9901	9902	9903	098	100	789	407			408
S/E Name									

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 0535-0039. 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.