

APPENDIX B5: FARMERS' MARKET MANAGER WEB SURVEY SCREENSHOTS: ENGLISH

NOTE: These screenshots are illustrative. The entire survey will be programmed similarly.



ID Number: _____
OMB Number: 0584-NEW
Expiration Date: XX/XX/20XX

Public reporting burden for this collection of information is estimated to average 25 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. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

This section includes questions from the Manager survey.

Click Next to continue.



1. What is your role at this farmers market? Please check all that apply.

-
- Market manager
 - Paid staff
 - Volunteer staff
 - Vendor
 - Other (please specify)

A rectangular text input field with a light gray border. It contains no text. On the right side, there are three small square buttons with upward-pointing arrows. On the bottom side, there are two small square buttons with left and right-pointing arrows.



2. How long have you worked at this farmers market?

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A5. Between October 2010 and September 2011, did this farmers market sell each of the following products always, sometimes, or never?

	Always	Sometimes	Never
Fruits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vegetables	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Milk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cheese	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Dairy Products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fish or Seafood	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Breads or Rolls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meat or Poultry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Baked Goods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prepared Foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Juice or Cider	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-food Items (Plants, Crafts, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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A6. Between October 2010 and September 2011, what was the minimum number of vendors who participated in this farmers market on any given day?

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A7. Between October 2010 and September 2011, what was the maximum number of vendors who participated in this farmers market on any given day?

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