



Contractor Expense Survey 2011 Layers



**NATIONAL
AGRICULTURAL
STATISTICS
SERVICE**

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We are collecting information on costs and returns and need your help to make the information as accurate as possible. Authority for collection of information on the Costs and Returns Report is Title 7, Section 2204 of the U.S. Code. Under Title 7 of the U.S. Code and CIPSEA (Public Law 107-347), facts about your operation are kept **confidential** and used only for statistical purposes. Response is **voluntary**.

1. During 2011, were you a production contractor where you paid a fee to someone else to raise layers that **you owned**?
A production contract is a verbal or written agreement setting terms, conditions, and fees to be paid by the contractor to the operation for the production of crops, livestock, or poultry.

Yes - Continue

No - Record name and telephone number on back page

2. For 2011, please report the average cost of inputs provided to contract growers per dozen.

Inputs	Hatching Eggs		Table Eggs	
a. Total Dozen Under Contract	dz		dz	
b. Total Number of Contractees	#		#	
c. Total Cost per Dozen	\$. ____	\$. ____
Of the total cost per dozen, how much was for--				
(i) fee paid to contractee?	\$. ____	\$. ____
(ii) marketing charges?	\$. ____	\$. ____
(iii) disinfectants & insecticides?	\$. ____	\$. ____
(iv) layers placed on the operation?	\$. ____	\$. ____
(v) feed?	\$. ____	\$. ____
(vi) litter?	\$. ____	\$. ____
(vii) medication, vaccination, debeaking, veterinary & custom services?	\$. ____	\$. ____
(viii) fuel?				
(1) Diesel Fuel	\$. ____	\$. ____
(2) Gasoline	\$. ____	\$. ____
(3) Natural Gas	\$. ____	\$. ____
(4) LP Gas	\$. ____	\$. ____
(5) Other (Specify: _____)	\$. ____	\$. ____

Please continue on back

Inputs	Hatching Eggs		Table Eggs	
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(ix) utilities?					
(1) Electricity.....	\$		• ____	\$	• ____
(2) Water / Other.....	\$		• ____	\$	• ____
(x) supplies?.....	\$		• ____	\$	• ____
(xi) taxes?.....	\$		• ____	\$	• ____
(xii) hauling?.....	\$		• ____	\$	• ____
(xiii) other expenses? (Include admin. cost, depreciation, technical services & other.) (Specify: _____).....	\$		• ____	\$	• ____

Reported by: _____ Telephone (____) _____

Response		Respondent		Mode		Enum	Eval	Duplication Adjustor	Date MM DD YY	Optional
1-Comp	9901	1-Op/Mgr	9902	2-Tel	9903	0098	0100	0922	9910	0003
2-R		2-Sp		3-Face-to -Face					____ 11	
3-Inac		3-Acct/Bkpr							Office Use for POID	
		4-Partner							0919	
		9-Other							_____ - _____ - _____	
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 0535-0218. The time required to complete this information collection is estimated to average 45 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.