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| Project 131 QID 030023 Version 6 | OMB No. 0535-0220 Approval Expires 1/31/2014 |
| SURVEY_LOGO_1:USDA_logo_bw.gif | **COTTON GINNINGS FINAL REPORT****2012 CROP** | new_nass_logo_bw |  **NATIONAL** **AGRICULTURAL** **STATISTICS** **SERVICE** |
|  |  | **California** **Field Office**P.O. Box 1258Sacramento, CA 958121-800-851-1127 Fax: 1-888-478-5637 nass-ca@nass.usda.gov |
| *Please make corrections to name, address and Zip Code, if necessary.* | The amount of cotton ginned is needed by the cotton industry for market and trade analysis. 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 in combination with similar reports from other producers. Response is **voluntary**. |

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| INSTRUCTIONS* Report all cotton ginned from the 2012 crop.
* Please RETURN your report promptly.
* This report may be faxed to our office at 1-888-478-5637 or mailed.
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|  | **Upland** | **American Pima** |
| 1. Total bales of cotton ginned this season to date . . . . . . . . . . . . . . . . . . . . . . . . Bales | 411  | 311  |
| 2. How many more bales do you expect to gin to the end of the season? . . . . . . Bales | 412       | 312       |
| 3. Total pounds of lint cotton produced from these (Item 1) bales. . . . . . . . . . . Pounds | 413       | 313       |
|  or4. Average weight per bale of the (Item 1) ginned cotton(excluding bagging and ties) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . Lbs/Bale | 414  | 314  |

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| 5. Total pounds of cottonseed derived from these (Item 1) bales.. . . . . . . . . . . Pounds  | 415  | 315  |
| a. Of the (Item 5) total pounds of cottonseed, how many poundswere or will be delivered to oil mills?. . . . . . . . . . . . . . . . . . . . . . . . . . . . Pounds\* | 416       | 316       |
| b. Of the (Item 5) total pounds of cottonseed how many poundswere or will be used for feed, seed or other uses?. . . . . . . . . . . . . . . . . Pounds\* | 417       | 317       |
|  |  **\*** Item 5a + Item 5b = Item 5 |

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|  | **Plants** |
| 6. How many SAW ginning plants, which you report for on this form, operated during the [CROP YEAR] crop season?. .. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 501  |
| 7. How many ROLLER ginning plants, which you report for on this form, operated during the [CROP YEAR] crop season? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 502       |

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| 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 number is 0535-0220. The time required to complete this information collection is estimated to average 10 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. |

**– PLEASE CONTINUE ON REVERSE SIDE –**

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| COTTON GINNINGS [CROP YEAR] CROPFor the total [CROP YEAR] crop ginnings (Item 1 + Item 2 on face page) please report the number of bales ofcotton ginned and to be ginned by STATE and COUNTY IN WHICH GROWN. |
| STATEWhere Grown | OfficeUse | COUNTYWhere Grown | OfficeUse | UplandBales Grown | American PimaBales Grown |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
|       | 503 |  | 504  | 404  | 304  |
| Total (Should equal Item 1 + Item 2 on face page.) |   |   |

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| **Survey Results:** To receive the complete results of this survey on the release date, go to www.nass.usda.gov/results/ |
| Would you rather have a brief summary sent to you at a later date? | 1[[ ]](#_top)  Yes 3[ ] No | 99 |

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| Respondent Name: \_\_\_\_\_\_\_\_\_\_\_\_ | 9911Phone: (\_\_\_\_\_) \_\_\_\_\_ |  9910 MM DD YY Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ |
| **OFFICE USE ONLY** |
| **Response** | **Respondent** | **Mode** | **Enum.** | **Eval.** | **Change** |  | **Optional Use** |
| 1-Comp2-R3-Inac4-Office Hold5-R – Est6-Inac – Est7-Off Hold – Est8-Known Zero | 9901 | 1-Op/Mgr2-Sp3-Acct/Bkpr4-Partner9-Oth | 9902 | 1-Mail2-Tel3-Face-to-Face4-CATI5-Web6-e-mail7-Fax8-CAPI19-Other | 9903 | 098 | 100 | 785 | 921 | 407 | 408 | 9906 | 9916 |
|  |  |  |  |
| S/E Name |  |  |  |  |