

## FRUIT INQUIRY August 2008

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NATIONAL AGRICULTURAL STATISTICS SERVICE

New Jersey Field Office Room 205 Health & Agriculture Building P.O. Box 330 Trenton, NJ 08625 Phone: 609-292-6385 Fax: 1-800-625-7581 Email: nass-nj@nass.usda.gov

Fruit crop prospects become more definite as the season advances and further information is needed to make reliable monthly forecasts. Reports from all fruit areas are needed to insure the accuracy of these reports. Please help by mailing your report by **July XX**, in the enclosed postage paid envelope. Response to this survey is voluntary and not required by law. Individual reports will be kept confidential. Thank you for your cooperation.

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

Please report the expected production of fruit crops now, as compared with prospects for a full crop. Let 100 percent represent the full crop you would expect if there was no damage from unfavorable weather, insects, disease, etc.

## **REPORT FOR YOUR ORCHARD(S)**

1.	What is the present expected production of	PERCENT		
	a. <b>PEACHES</b> as a percent of a full crop?	063		
	b. APPLES as a percent of a full crop?	030		
		<sup>3</sup> / <sub>4</sub> BUSHELS		
2.		064		
<ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> </ol>		DOLLARS and CENTS		
3.	What is the average retail price received by you for PEACHES sold in July?	065 \$		
4.	What is the average <b>wholesale</b> price received by you for <b>PEACHES</b> sold in <b>July</b> ?	066 \$		
		BUSHELS		
5.	What is the quantity of APPLES expected for harvest this year,2008?	031		
		DOLLARS and CENTS		
6.	What is the average (per bushel) fresh market price received by you for <b>APPLES</b> sold in <b>July</b> ?	032 \$		
7.	If you would like to receive a copy of the results of this survey in the mail, please make a check ( $\checkmark$ ) in the box.	998		
	(Results will also b e available on the Internet at http://www.nass.usda.gov)			

Please **COMMENT** about the fruit crop in your locality.

								9910	MM	DD	YY
Respondent	Name:		Phone:					Date:			
Name of Orchard: County:											
Response		Respondent			Mode			Ev	val.		
1-Comp 2-R 3-Inac 4-Office Hold	5-R – Est 6-Inac – Est 7-Off Hold – Est 8-Known Zero	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-Mail 2-Tel 3-Face-to-Face 4-CATI 5-Web	6-e-mail 7-Fax 8-CAPI 19-Other	9903	098	100		

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