



OLIVE UTILIZATION AND PRICE INQUIRY

November 1, 2009



**USDA, NASS, California
Field Office**
P.O. Box 1258
Sacramento, CA 95812
1-800-851-1127 Fax: 1-888-478-5637
E-mail: nass-ca@nass.usda.gov

Dear Handler,

Your assistance is requested in determining California olive production, utilization, and average prices paid to growers for the 2009 and 2008 crop year. Please use this form to report only olives that were received from the grower. Do not include transfers from other handlers.

Please return this report by November 21 in the enclosed postage-paid envelope, or fax it to 1-888-478-5637. You may also complete this survey on the internet from November 9 until November 30. Response to this survey is voluntary and not required by law. However, your cooperation is very important to accurately estimate California's olive production, utilization, and prices. Individual reports are kept confidential and only used in State totals. If you have any questions, please call Aaron Cosgrove at 1-800-851-1127. Thank you.

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

Please mail, fax or complete on the internet by November 21, 2009.

FAX Number: 1-888-478-5637

Survey Web site: www.agcounts.usda.gov

Variety and Size	Acres	Tons	Average Price Paid to Growers Including Bonuses and Excluding Hauling Allowances	Hauling Allowance
			<i>Dollars per Ton</i>	
2009 Crop				
<u>PROCESSED FOR OIL</u>				
Sevillano				
Manzanillo:				
Argbequia, Arbosana, Koroneiki:				
Other: <i>(Please List)</i>				
<u>PROCESSED FOR OTHER SPECIALTY PRODUCTS ^{1/}</u>				
Sevillano				
Manzanillo				
Other: <i>(Please List)</i>				

^{1/} Examples of specialty products are as follows: Spanish, Sicilian, and/or Greek style olives.

Comments: _____

Respondent Name: _____ Phone: «PHONE»
 E-mail: «EMAIL» Fax: «PHONEFAX»

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 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.

9910 MM DD YY
Date: ___ ___ ___

Response		Respondent		Mode		Enum.	Eval.	Office Use for POID	
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2-R		2-Sp		2-Tel					
3-Inac		3-Acct/Bkpr		3-Face-to-Face					
4-Office Hold		4-Partner		4-CATI					
5-R – Est		9-Oth		5-Web					
6-Inac – Est				6-e-mail					
7-Off Hold – Est				7-Fax					
8-Known Zero				8-CAPI					
				19-Other					
								407	408
S/E Name									