

| Proj | ect Code 186 QID       |                               |   | OMB   | No. 0535-0003: Approval Expires 9/30/20                      | 310 |
|------|------------------------|-------------------------------|---|---|--|-----|
|      | JSDA                   |                               | RECEIVED BY FARM<br>ON Agricultural Cooperative C<br>2009 |   | AGRICULTURAL<br>AGRICULTURAL<br>STATISTICS<br>COUNTS SERVICE |     |
|      |                        |                               |   | P.O. Box<br>Austin, T<br>512-916-1<br>Fax: 1-80<br>E-mail: na<br>For our mol<br>by Farmers<br>report total<br>purchased | X 78767  |     |
| Plea | ase make correctior    | ns to name, address and Z     | Zip Code, if necessary.                                   |   |  |     |
| 1.   | Do you expect t        |                               | ET any upland cotton from U.S. f                          | -   | next twelve months?  |     |
| 2.   | Will you <b>exclud</b> | e cash purchases or ma        | arketings of upland cotton from                           | non-farmers?  |  |     |
|      | 605                    | 3 <b>NO</b>                   | 5 DOES NOT APPLY  |   |  |     |
| 3.   | Will you exclud        | <b>e</b> cash purchases or ma | arketings of upland cotton <b>from</b> (                  | other countries?  |  |     |
|      |                        | 3 <b>NO</b>                   | 5 DOES NOT APPLY  |   |  |     |
| 4.   | Will this operati      | on market upland cotto        | n from farmers in <b>other states</b> ?                   |   |  |     |
|      | xxx 1 YES -            | – Specify States              |   |   |  |     |

**NOTE:** Inform the respondent that the prices should reflect an **f.o.b. warehouse price**. Reported price should account for all grades of cotton purchased or delivered to your firm directly from producers as first time sales, without regard to eventual ownership or user. Include only cotton for which you paid or will pay the check-off as cotton purchased from producers. Ask the respondent to provide a **settlement sheet** (*check stub, sales ticket, assembling sheet*) showing a typical transaction and a **monthly summary** (*monthly report*). It will help determine the firm's ability to report based on our guidelines.

## 5. Will you report the monthly average price for cotton delivered during the month after--

| a. | subtracting compression and load out  | <sup>XXXX</sup> <b>YES</b> 5 N/A      | <sup>3</sup> NO – Will you estimate?        | <sup>XXXX</sup> <sup>1</sup> YES<br><sup>3</sup> NO |  |
|----|---|---------------------------------------|---|---|--|
| b. | subtracting interest expenses   | ☐ <sup>1</sup> YES                    | <sup>3</sup> NO – Will you estimate?        | XXXX 1 YES  |  |
| C. | subtracting any government payments   | <sup>XXXX</sup> <b>YES</b> 5 N/A      | <sup>3</sup> NO – Will you estimate?        | XXXX I 1 YES  |  |
| d. | <b>subtracting</b> Marketing Loan Gains from<br>redeeming loans at less than the loan<br>value (adjusted World Price)                                 | <sup>1</sup> YES <sup>5</sup> N/A     | <sup>3</sup> NO – Will you estimate?        | XXXX 1 YES  |  |
| e. | <b>subtracting</b> handling, processing,<br>transportation and other marketing<br>charges after delivery to the warehouse<br>until the cotton is sold | ☐ <sup>1</sup> YES                    | <sup>3</sup> <b>NO</b> – Will you estimate? | XXXX 1 YES<br>3 NO                                  |  |
| f. | subtracting storage expenses  | ☐ <sup>1</sup> YES ☐ <sup>5</sup> N/A | <sup>3</sup> NO – Will you estimate?        | XXXX 1 YES<br>3 NO                                  |  |
| g. | subtracting allowance from weight lost in storage   | xxxx 1 YES 5 N/A                      | <sup>3</sup> NO – Will you estimate?        | <sup>XXXX</sup> <sup>1</sup> YES<br><sup>3</sup> NO |  |
| h. | subtracting income from commodities other than cotton   | XXXX 1 YES 5 N/A                      | <sup>3</sup> NO – Will you estimate?        | <sup>XXXX</sup> <sup>1</sup> YES<br><sup>3</sup> NO |  |
| i. | subtracting income from manufacture of materials  | <sup>XXXX</sup> YES 5 N/A             | <sup>3</sup> <b>NO –</b> Will you estimate? | <sup>XXXX</sup> <sup>1</sup> YES<br><sup>3</sup> NO |  |
| j. | subtracting income or dividends from capital investments  | <sup>XXXX</sup> YES <sup>5</sup> N/A  | <sup>3</sup> <b>NO</b> – Will you estimate? | XXXX 1 YES  |  |
| k. | subtracting storage income from private firms or government   | xxxx                                  | <sup>3</sup> <b>NO</b> – Will you estimate? | XXXX 1 YES  |  |

## 6. Which of the following can you include in the monthly average price--

| a. | <b>including</b> transportation cost to warehouse   | xxxx <sup>1</sup> YES <sup>5</sup> N/A | <sup>3</sup> NO – Will you estimate?        | <sup>XXXX</sup> <sup>1</sup> YES <sup>3</sup> NO |
|----|---|--|---|--|
| b. | including warehouse receiving charges .   | □ <sup>1</sup> YES □ <sup>5</sup> N/A  | <sup>3</sup> NO – Will you estimate?        | XXXX 1 YES<br>3 NO                               |
| C. | <b>including</b> producer check-off fees for<br>Cotton Research and Promotion<br>Assessment Program (CRPAP) | xxxx                                   | <sup>3</sup> NO – Will you estimate?        |  |
| d. | including interest income   | xxxx <sup>1</sup> YES <sup>5</sup> N/A | <sup>3</sup> <b>NO –</b> Will you estimate? |  |
| e. | including income from hedging   | xxxx 1 YES 5 N/A                       | <sup>3</sup> NO – Will you estimate?        | XXXX<br><sup>1</sup> YES<br><sup>3</sup> NO      |
| f. | <b>including</b> allowance for weight gained in storage   | xxxx 1 YES 5 N/A                       | <sup>3</sup> NO – Will you estimate?        | XXXX 1 YES<br>3 NO                               |
| g. | <b>including</b> anticipated end-of-year distributions from cotton marketings                               | xxxx 1 YES 5 N/A                       | <sup>3</sup> NO – Will you estimate?        |  |
| h. | <b>including</b> capital retains from cotton marketings   | xxxx 1 YES 5 N/A                       | <sup>3</sup> <b>NO –</b> Will you estimate? |  |
| i. | <b>including</b> expenses reimbursed by government (storage and interest)                                   | xxxx                                   | <sup>3</sup> <b>NO –</b> Will you estimate? |  |
| j. | <b>including</b> storage income from private firms or government  | xxxx <sup>1</sup> YES <sup>5</sup> N/A | <sup>3</sup> NO – Will you estimate?        |  |

7. Will you report the **total number of bales** of upland cotton marketed (based on actual pooled cotton sales) and cash purchases for the **previous month**?

601

a. Will you report, the **total number of bales** of upland cotton marketed (based on actual pooled cotton sales) and cash purchases for the first **15 days of the current month**?

602

| 8.          | Will you report<br>and cash purch   |                            |   |                         |                                       | <b>ce</b> of upland                         | d cotton                    | marketed          | (based  | d on act             | tual po | oled cotto | on sales)    |
|-------------|---|----------------------------|---|-------------------------|---------------------------------------|---|-----------------------------|-------------------|---------|----------------------|---------|------------|--------------|
|             | <sup>603</sup> <b>YES</b>   |                            | 3 NO  |                         |                                       |   |                             |                   |         |                      |         |            |              |
|             | a. Will you rep<br>sales) and o   | ort, the<br>cash pi        | e <b>average f.</b><br>urchases for             | <b>o.b. w</b><br>the fi | <b>varehouse</b><br>rst <b>15 day</b> | e price of up<br>s of the cu                | oland cot<br><b>rent mo</b> | ton marke<br>nth? | eted (b | ased or              | n actua | l pooled   | cotton       |
|             |   | 'ES                        | 3   | NO                      |                                       |   |                             |                   |         |                      |         |            |              |
| 9.          | Will you report of same month?  | contrac                    | t purchases:                                    | from                    | farmers so                            | o that the qu                               | antities a                  | and corres        | spondi  | ng valu              | es are  | both repo  | orted in the |
|             | xxx   |                            | <sup>2</sup> NO                                 |                         |                                       |   |                             |                   |         |                      |         |            |              |
| 10.         | Do you plan to  | have c                     | ash purchas                                     | ses of                  | cotton du                             | ring the 200                                | 8-2009 c                    | rop year?         | •       |                      |         |            |              |
|             | XXX 1 YES -   | - Pleas                    | se complete                                     | the Pr                  | rivate Mer                            | chant Profile                               | Survey                      | 3 I               | NO      |                      |         |            |              |
| 11.         | Who will be the   | prima                      | ry contact a                                    | at you                  | r operatior                           | n for comple                                | ting our                    | monthly s         | urvey?  | )                    |         |            |              |
|             |   |                            |   |                         |                                       |   |                             |                   |         |                      |         |            |              |
|             | Name:   |                            |   |                         |                                       | Position:                                   |                             |                   |         |                      |         |            |              |
|             | Telephone: (  | )                          |   |                         | I                                     | Fax: (                                      | )                           |                   |         | Emai                 | l:      |            |              |
| 12.         | Who will be the   | altern                     | ate contact                                     | at you                  | ur operatio                           | on for compl                                | eting our                   | monthly           | survey  | ?                    |         |            |              |
|             | Name:   |                            |   |                         | I                                     | Position:                                   |                             |                   |         |                      |         |            |              |
|             | Telephone: (  |                            | )   |                         | I                                     | Fax: (                                      | )                           |                   |         | Emai                 | l:      |            |              |
| 13.         | By which metho  | od wou                     | ld you prefei                                   | r to re                 | port?                                 |   |                             |                   |         |                      |         |            |              |
|             | 1 Electronic  | c/Web                      | [   | 2                       | Fax                                   | 3 Te  | elephone                    |                   |         |                      |         |            |              |
|             |   |                            |   |                         |                                       |   |                             |                   |         |                      |         |            |              |
|             | anks so muc<br>ceived by Far  |                            | •   | tance                   | e today a                             | and for you                                 | ur conti                    | nued he           | lp in ( | comple               | eting t | he Pric    | es           |
| of info     | ding to the Paperwork Red<br>rmation unless it displays a<br>tion is estimated to average | a valid OME<br>e 10 minute | 3 control number. These per response, inclusion | he valid O<br>uding the | MB number is 05<br>time for reviewin  | 535-0003. The time<br>g instructions, searc | required to co              | mplete this info  | rmation | 9910<br><b>DATE:</b> | ММ      | DD         | YY           |
| and m       | naintaining the data needed<br><b>Response</b>  | i, and comp                | Respond   |                         | cuon or informati                     | on.<br>Mode                                 |                             | Enum.             | Eval.   |                      | Office  | Use for P  | OID          |
| 1-Co<br>2-R | mp  |                            | 1-Op/Mgr<br>2-Sp                                | 9902                    | 1-Mail<br>2-Tel                       | 6-e-m<br>7-Eax                              |                             | 098               | 100     | 789                  |         |            |              |

| 1-Comp           | 9901 | 1-Op/Mgr    | 9902 | 1-Mail         | 6-e-mail | 9903 | 098 | 100 | /89        |         |
|------------------|------|-------------|------|----------------|----------|------|-----|-----|------------|---------|
| 2-R              |      | 2-Sp        |      | 2-Tel          | 7-Fax    |      |     |     |            |         |
| 3-Inac           |      | 3-Acct/Bkpr |      | 3-Face-to-Face | 8-CAPI   |      |     |     |            |         |
| 4-Office Hold    |      | 4-Partner   |      | 4-CATI         | 19-Other |      |     |     |            |         |
| 5-R – Est        |      | 9-Oth       |      | 5-Web          |          |      |     |     |            | • • •   |
| 6-Inac – Est     |      |             |      |                |          |      |     |     | Optio      | nal Use |
| 7-Off Hold – Est |      |             |      |                |          |      |     |     | 407        | 408     |
| 8-Known Zero     |      |             |      |                |          |      |     |     |            |         |
| S/E Name         |      |             |      |                |          |      |     |     | OFFICE USE | 002     |