

# COTTON IN PUBLIC STORAGE OPERATION PROFILE – JULY 2014

OMB No. 0535-XXXX  
 Approval Expires:  
 Project Code: QID:  
 SMetaKey:



**United States  
 Department of  
 Agriculture**



**NATIONAL  
 AGRICULTURAL  
 STATISTICS  
 SERVICE**

**USDA/NASS**

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

The information you provide will be used for statistical purposes only. In accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107–347 and other applicable Federal laws, your responses will be kept **confidential** and will not be disclosed in identifiable form to anyone other than employees or agents. By law, every employee and agent has taken an oath and is subject to a jail term, a fine, or both if he or she willfully discloses ANY identifiable information about you or your operation. Response is **voluntary**.

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-XXXX. 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.

1. Will this public warehouse **store** any bales of **cotton** in 2014?

- xxx 1  **Yes** – Go to Item 2  
 3  **No** – Will this public warehouse **store** any bales of **cotton** in the future? . . . . . xxx 1  **Yes** – Go to Item 7  
 3  **No** – Go to Item 7

2. Will this public warehouse **store** bales of **cotton** in more than one location in 2014?

- xxx 1  **Yes** – List information on each separate location below. Use additional pages if necessary.  
 3  **No** – Go to Item 4

<b>Office Use</b>
xxx

WAREHOUSE NAME	PHYSICAL ADDRESS	CONTACT PERSON
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3. Considering all locations reported in Item 2, how would this firm prefer to report?

- xxx  
 1  Each location individually  
 2  Headquarters reports all locations separately  
 3  Other combination, Specify:

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4. What is the **maximum storage capacity** of all of the locations that this warehouse will store bales of cotton in 2014? . . . . .

<b>CWT</b>
xxx

**(OVER)**

5. Who will be the primary contact at this warehouse responsible for completing our monthly survey?

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

6. Who will be the alternate contact at this warehouse responsible for completing our monthly survey?

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

7. COMMENTS:

9912	9911	9910	MM	DD	YY
Respondent Name: _____	Phone: (____) _____	Date: ____	__	__	__

**OFFICE USE ONLY**

Response		Respondent		Mode		Enum.	Eval.	R. Unit	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-Mail	9903	9998	9900	9921	9985	9989			
2-R		2-Sp		2-Tel						_____			
3-Inac		3-Acct/Bkpr		3-Face-to-Face						<b>Optional/NOC Use</b>			
4-Office Hold		4-Partner		4-CATI						9907	9908	9906	9916
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									
S/E Name													

This completes the survey. **Thank you for your help**