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| **CATTLE REPORT -** **January 1, 2014** |
|  | OMB No. 0535-0213 Approval Expires: 3/31/2014Project Code: 150 QID: 304011 SMetaKey: 1472**Version: D -** WY |
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| **SURVEY_LOGO_1:USDA_logo_bw.gif** |
|  | new_nass_logo_bw | **NATIONAL****AGRICULTURAL****STATISTICS****SERVICE** |

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|  | **USDA/NASS**National Operations Division9700 Page Avenue, Suite 400St. Louis, MO 63132-1547Phone: 1-888-424-7828Fax: 1-855-515-1328E-mail: nass@nass.usda.gov |

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|  | **State** | **POID** | **Tract** | **Subtr.** |  |  |  |  |
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| 1. [Verify name and mailing address of this operation. Make any corrections necessary (including the correct operation name) on the label and continue.] |  [ ]  [Check if name label verified] |

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| 2. Were any cattle or calves, regardless of ownership, on this operation on **January 1,** **2014** or at any time during **2013**? (Cattle and calves on grazing land leased on a **fee per head** or **animal unit month (AUM)** basis should be included by the cattle owner, excluded by the land owner.) |  |
| [ ]  **Yes** – [Go to **Item 3**.][ ]  **No** – a. Will there be any cattle or calves, regardless of ownership, on this operation during 2014? [ ]  **Yes** – [Enter **code** **1**.] [ ]  **Don't Know** – [Enter **code** **2**.] [ ]  **No** – [Enter **code** **3**.]. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |
| 493 |
|  b. Were you (the individual named on the label) operating a farm or ranch on January 1, 2014? |
|  [ ]  **Yes** – [Go to **Section 3**.] [ ]  **No** – [Go to **Section 2**.] |  |
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| 3. Are the day-to-day decisions for this **operation** made by  one individual, a hired manager, or partners? [Check one] |  |  |  |
|  | [ ]  One individual *–* [Go to **Section 1**.][ ]  A hired manager *–* [Go to **Section 1**.][ ]  Partners – How many partners make the day-to-day decisions? |  |  | **Number of Partners** |
| [Enter number of partners, including the partner named on the label. Identify the other person(s)in this partnership in the boxes on page 2, then continue with **Section 1***.*]. . . . . . . . . . . . . . . . . . . . . . . . . .  |  |

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|  | **Office Use** |
|  |  |  |  |  |  | 921 | 930 | 941 |

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| 4.  | Please identify the other person(s) in this partnership, then *continue.*[Verify partners names and make necessary corrections if names have already been entered.] |  |  |
|  | [ ]  [Check if verified]  |  |  |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  |  |  |  | 925 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_  | \_\_\_\_\_\_\_  |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | (State) | (Zip) |  | 924 |
|  | Did this partner operate land individually on June 1, 2013? | [ ]  **Yes** [ ]  **No** |  |  |

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|  | [ ]  [Check if verified]  |  |  |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  |  |  |  | 926 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_  | \_\_\_\_\_\_\_  |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | (State) | (Zip) |  | 924 |
|  | Did this partner operate land individually on June 1, 2013? | [ ]  **Yes** [ ]  **No** |  |  |

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|  |  |
|  | [ ]  [Check if verified]  |  |  |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  |  |  |  | 927 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_  | \_\_\_\_\_\_\_  |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | (State) | (Zip) |  | 924 |
|  | Did this partner operate land individually on June 1, 2013? | [ ]  **Yes** [ ]  **No** |  |  |

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|  | [ ]  [Check if verified]  |  |  |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  |  |  |  | 928 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | \_\_\_\_  | \_\_\_\_\_\_\_  |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | (State) | (Zip) |  | 924 |
|  | Did this partner operate land individually on June 1, 2013? | [ ]  **Yes** [ ]  **No** |  |  |

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| **Section 1 – Cattle and Calves**  |

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| 1. On January 1, 2014 were any cattle and calves, regardless of ownership, on the total acres operated? (Cattle and calves on grazing land leased on a **fee per head** or **animal unit month (AUM)** basis should be included by the cattle owner, excluded by the land owner.) |  |
|  [ ]  **Yes** – [Go to **Item 2**.] [ ]  **No** – Were any cattle or calves, regardless of ownership, on the total acres operated at any time during 2013? |  |
|  **[ ]**  **Yes** – [Go to**Item 4b**.]**[ ]**  **No** – [Go to **Section 3**.] |  |  |

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| 2. Of the total number of cattle and calves on hand January 1, how many were: |  |
| a. beef cows, including beef heifers that had calved? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 351 |
|  |  |  |
| b. milk cows, including any dry cows or milk heifers that had calved? (Exclude any heifers not yet freshened.) [If no milk cows, go to **Item 2c**.] . . . . . . . . . . . . . . . .  | + | 352 |
|  |  |  |
| (i) How many cows were milked on January 1? . . . . . . . . . . . . . . . . . . . . . . . .  | 349 |  |
|  |  |  |  |  |  |  |
| (ii) How much milk was produced that day? (Only one day’s production.) . . . . . . . . . . . . . . . . . .  | 502 | Gals. | OR | 501 | Lbs. |  |
|  |  |  |
| c. bulls weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 353 |
| d. heifers that had not calved, weighing 500 pounds or more: |  |
| (i) for beef cow replacement? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 354 |
|  |  |  |
| (a) How many of these beef cow replacement heifers are expected to calve during 2014? . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 376 |  |
|  |  |  |
| (ii) for milk cow replacement? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 355 |
|  |  |  |
| (a) How many of these milk cow replacement heifers are expected to calve during 2014? . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 377 |  |
|  |  |  |
| (iii) other heifers 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 356 |
|  |  |  |
| e. steers weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 357 |
|  |  |  |
| f. heifer, steer, and bull calves weighing less than 500 pounds, including newborn calves? . . . .  | + | 358 |
| 3. **[Add Items 2a through 2f and verify the total.]** Then the total cattle and calves on hand January 1 was: . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |  |
|  | = | 350 |

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| **Calf Crop for** **2013** (Calves born on grazing land leased on a **fee per head** or **animal unit****month** **(AUM)** basis should be included by the cattle owner, excluded by the land owner.) |  |
| 4. Of the **calves born** on the total acres operated during 2013, how many: (**Exclude** calves purchased.) |  |
| a. were **on hand** January 1, 2014?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 363 |
|  |  |  |
| b. (Of the calves born on the total acres operated during 2013, how many) were **sold**, **moved off** this operation, or **slaughtered** by January 1?. . . . . . . . . . . . . . . . . . . . .  | + | 364 |
|  |  |  |
| c. had **died** by January 1? (**Exclude** calves born dead.). . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 365 |
| 5. **[Add items 4a through 4c and verify the total.]**Then the total calves born during 2013 was:. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |  |
|  | = | 366 |
| a. Of these calves born, how many were born in the six month period, July 1 through December 31, 2013?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |
|  | 361 |
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| **Deaths and Losses** (Cattle and calves that died or were lost on grazing land leased on a **fee per head**or **animal unit month** **(AUM)** basis should be included by the cattle owner, excluded by the land owner.) |
| 6. How many **cattle** weighing 500 pounds or more **died or were lost from all causes** during 2013?. . .  | 367 |
| 7. How many **calves** weighing less than 500 pounds **died or were lost from all causes** during 2013? (**Exclude** calves born dead.). . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  |  |
| 368 |
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| **Cattle and Calves On Feed** |
| We need to know about the cattle and calves on feed for the slaughter market.Their ration would include grain, silage, hay, or protein supplement. |
| 8. Are there any **cattle and calves on feed**, regardless of ownership, on the total acres operated that will be shipped **directly** from your feedlot to slaughter market? **Include** cattle being fed by you for others. **Exclude** any of your cattle being custom fed in feedlots operated by others. **Exclude** cattle being “backgrounded only” for sale as feeders, for later placementon feed in another feedlot, or to be returned to pasture. |
|  [ ]  **Yes** – [Go to **Item 9.**] | **[ ]**  **No** – Did you operate a feedlot or feeding facility on the total acres operated at any time since January 1, 2013? |
|  |  | **[ ]  Yes** – [Go to **Item 10.**]**[ ]  No** – [Go to **Item 12.**] |

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| 9. How many **cattle and calves** were **on feed** January 1 that will be shipped **directly** from your feedlot to slaughter market? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 652 |

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| 10. What was the **total capacity** of your feedlot on January 1? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 676 |
| [If capacity is 1,000 or greater, skip **Item 11**.]  |

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| 11. During 2013, how many cattle and calves on feed were shipped **directly** to slaughter market from your feedlot? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 678 |

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| **Breeding Stock Values** (Report for cattle inventory on hand January 1, 2014.) |  |  |
| 12. What is the average replacement value per head of the following breeding stock: [Report to nearest dollar.] |  |  |
| a. Beef cows? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | $ | 190 |
| b. Heifers kept for beef cow replacement weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . .  | $ | 192 |
| c. Milk cows? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | $ | 266 |
| d. Heifers kept for milk cow replacement weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . .  | $ | 267 |
| e. Bulls weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | $ | 191 |

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| **Slaughter for Consumption by this Operation** (regardless of ownership) |  |  |
| 13. During 2013, how many cattle and calves were custom slaughtered at commercial establishments **for consumption by this operation**?. . . . . . . . . . . .  | **Cattle** | **Calves** |
| 268 | 269 |

|  |  |  |
| --- | --- | --- |
| 14. During 2013, how many cattle and calves were slaughtered on thisoperation **for consumption by this operation**? (**Include** mobile slaughtering. **Exclude** custom slaughter at commercial establishments.). . . . . . . .  |  |  |
| 270 | 271 |

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|  | 1 – Incomplete, has cattle2 – Incomplete, cattle presence unknown | 498 |
|  | 3 – Valid Zero |  |

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| **Grazing Fees in Your Area**  |

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| 15. Were any cattle or calves reported on the total acres operated (Item 3, page 3 is positive)?  [ ]  **Yes** – [Continue.] [ ]  **No** – [Go to **Section 1A on the next page.**]  |

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| 16. Which of the following is the most commonly used method of charging for grazing on  **privately owned, non-irrigated** grazing land in your area? [Check appropriate box.] 5 [ ]  Per Head Per Month 7 [ ]  Per Animal Unit Month (AUM) 9 [ ]  Per Cow With Nursing Calf Per Month  | **Dollars and Cents** |
| a. What was the average charge for this method in your area during 2013? . . . . . . . . . . . . . . . . . . .  | 91\_  | . \_\_ \_\_ |

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| 17. During 2013, did this operation pay a fee to graze cattle on **privately owned,** **non-irrigated** land using either a **per head per month, per animal unit month,** **or per cow with nursing calf per month method**?  [ ]  **Yes** – [Enter **code 1**, then continue.] [ ]  **No** – [Enter **code 3**, then continue.] . . . . . . . . . . . . . . . . . .  | **Code** |
| 908 |

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| **NOTES** |
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| **Section 1A – Causes of Predator and Non - Predator Loss** |
| **Questions 1 – 4 are collected for use by other agencies within the Department of Agriculture.**  |
| [Refer to Items 6 and 7 on page 4.] |  | **Office Use** |
| 1. If cattle or calves died or were lost on this operation last year, please report what happened to them. |  | 1 – Incomplete | 115 |
|  | 3 – Valid Zero |
|  Record answers in the tables below. How many cattle or calves died or were lost from:  |  |  |  |

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| 2. Predator Causes:  |  | **Calves** | **Cattle** |
| [ ]  | Grizzly Bears. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 953 | 042 |
| [ ]  | Black Bears. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 952 | 041 |
| [ ]  | Bobcats or Lynx. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 948 | 034 |
| [ ]  | Coyotes. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 950 | 038 |
| [ ]   | Dogs. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 689 | 037 |
| [ ]   | Foxes. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 688 | 036 |
| [ ]   | Wolves. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 687 | 039 |
| [ ]   | Ravens. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 957 | 044 |
| [ ]   | Eagles. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 951 | 040 |
| [ ]   | Vultures. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 961 | 045 |
| [ ]   | Mountain Lions, Cougars, or Pumas. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 954 | 043 |
| [ ]   | Other Predators [specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . . . . . . . . . . .  | + | 955 | 049 |
| [ ]   | Unknown predators. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 960 | 060 |
| 3. Non-Predator Causes: |  |  |  |
| [ ]   | Digestive problems (bloat, scours, parasites, enterotoxemia, acidosis, etc.)  | + | 962 | 046 |
| [ ]   | Respiratory problems (pneumonia, shipping fever, etc.). . . . . . . . . . . . . . . .  | + | 964 | 047 |
| [ ]   | Metabolic problems (milk fever, grass tetany, etc.). . . . . . . . . . . . . . . . . . . .  | + | 965 | 048 |
| [ ]   | Mastitis. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 967 | 051 |
| [ ]   | Lameness or injury. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 968 | 054 |
| [ ]   | Other Diseases. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 963 | 063 |
| [ ]   | Weather related causes (chilling, drowning, lightning, etc.). . . . . . . . . . . . . .  | + | 956 | 050 |
| [ ]   | Calving related problems. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 966 | 053 |
| [ ]   | Poisoning (nitrate poisoning, noxious feeds, noxious weeds, etc.). . . . . . . .  | + | 958 | 052 |
| [ ]   | Old age. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + |  | 061 |
| [ ]   | Theft (stolen). . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 024 | 056 |
| [ ]   | Other non-predator causes [specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . . . . . . . . . . . .  | + | 027 | 057 |
| [ ]   | Unknown non - predator causes. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | + | 032 | 058 |
| 4. Add calf and cattle deaths by cause in each column. These totals should agree with the death loss recorded in items 6 and 7 previously. If they don’t agree, make corrections wherever necessary. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | = |  |  |
|  |  | 028 | 059 |

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| **Section 2 – Change in Operator**  |

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|  **[Complete this section only if the answers to items 2 and 2b on the front page are both “No.”]**  |
| 1. Has the operation named on the label been sold, rented, or turned over to someone else? |
|  [ ]  **Yes** – [Continue.] [ ]  **No** – [Go to **Item 1a**.]  | 1a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? (Including growing crops or raising livestock.) [ ]  **Yes** [ ]  **Don't Know** [ ]  **No** [Regardless of answer to above, write a note to explain the situation, then go to **Section 3**.] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2. Was the operator (name on label) operating a farm or ranch on June 1, 2013? [ ]  **Yes** – [Continue.] [ ]  **No** – [Continue.] |  |
| 3. Please provide the following information for the operation that has taken over the land: |  |
| a. What is the name and address of the new operation? Operation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Operator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_\_ Phone: (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  |
| b. Was the [Item 3a] new operation in business before June 1, 2013? [ ]  **Yes** – [Go to **Section 3**.] [ ]  **No** – [Continue.] |
| c. Is the [Item 3a] new operation managed? [ ]  **Yes** – [Go to **Section 3**.] [ ]  **No** – [Continue.]  |
| d. Were any individuals associated with the [Item 3a] operation operating land individually before June 1, 2013? [ ]  **Yes** – [Go to **Section 3**.] **[ ]**  **No** – [Go to **Section 3**.] |
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| **Section 3** **– Conclusion** |

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| 1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?[ ]  **Yes** – [Continue.] [ ]  **No** – [Go to **Item 2**.] |
| a. What is the name of the other operation(s)? . . . . . .  | Operation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| b. Was this additional operation in business before June 1, 2013? [ ]  **Yes** – [Continue.] [ ]  **No** – [Continue.] | Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  State: \_\_  | ZIP: \_\_\_\_\_\_\_\_ |
| Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
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| 2. **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 mailed to you at a later date? |
|  [ ]  **Yes** – [Enter **code 1**.] [ ]  **No** – [Enter **code 3**.]. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 099 |
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| --- | --- | --- |
| Respondent Name:  | 9911Phone: ( )  | 9910 MM DD YYDate: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ |
| **This completes the survey. Thank you for your help.** |

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| **Response** | **Respondent** | **Mode** | **Enum.** | **Eval.** | **Change** | **Office Use for POID** |
| 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 | 0098 | 0100 | 0785 | 0789\_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ |
| **Optional Use** |
| 0407 | 0408 | 9906 | 9916 |
| S/E Name |  |  |  |  |