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| **CATTLE REPORT -** **January 1, 2016** | | |
|  | OMB No. 0535-0213  Approval Expires: 6/30/2017  Project Code: 150 QID: 304011  SMetaKey: 1472  **Version: A -** AL,AK, AR, DE, FL, GA, HI, IL, IN, IA, KY, LA, MD, MI, MN, MS, MO, NC, NH, NJ, NY, OH, PA, SC, TN, VA, WV, WI | |
|  |
| **SURVEY_LOGO_1:USDA_logo_bw.gif** | **United States**  **Department of**  **Agriculture** |
|  |  | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |
|  | **USDA/NASS**  National Operations Division  9700 Page Avenue, Suite 400  St. Louis, MO 63132-1547  Phone: 1-888-424-7828  Fax: 1-855-415-3687  E-mail: nass@nass.usda.gov | |
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| 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 0535-0213. The time required to complete this information collection is estimated to average 20 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. | | | | | | | | |
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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,** **2016** or at any time during **2015**? (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 2016?  **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, 2016? | |
| **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** | | |
|  |  |  |  |  |  | 9921 | 9930 | 9941 |

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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) |  | | |  | |  |  | 9922 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \_\_\_\_ | | \_\_\_\_\_\_\_ |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | | | (State) | | (Zip) |  | 9924 |
|  | Did this partner operate land individually on June 1, 2015? | | | **Yes**  **No** | | | | |  |  |

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|  | [Check if verified] | |  | |  | |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  | | |  |  |  | 9923 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \_\_\_\_ | \_\_\_\_\_\_\_ |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | | | (State) | (Zip) |  | 9924 |
|  | Did this partner operate land individually on June 1, 2015? | | | **Yes**  **No** | | | |  |  |

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|  | [Check if verified] | |  | |  | |  |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  | | |  |  |  | 9927 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \_\_\_\_ | \_\_\_\_\_\_\_ |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | | | (State) | (Zip) |  | 9924 |
|  | Did this partner operate land individually on June 1, 2015? | | | **Yes**  **No** | | | |  |  |

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|  | [Check if verified] | |  | |  | |  | |  | **Office Use** |
|  | Name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |  | **Stratum** |
|  |  | (First) (Middle) (Last) |  | | |  | |  |  | 9928 |
|  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | \_\_\_\_ | | \_\_\_\_\_\_\_ |  | **Ind. Op.** |
|  |  | (Rt. or St.) | (City) | | | (State) | | (Zip) |  | 9924 |
|  | Did this partner operate land individually on June 1, 2015? | | | **Yes**  **No** | | | | |  |  |

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| **Section 1 – Cattle and Calves** |

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| 1. On January 1, 2016 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 2015? | |  |
| **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 2016? . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | | 376 | | |  |
|  | | | | | |  |  |
| (ii) for milk cow replacement? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | | | | + | 355 |
|  | | | |  | | |  |
| (a) How many of these milk cow replacement heifers  are expected to calve during 2016? . . . . . . . . . . . . . . . . . . . . . . . . . . . . | | | | 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** **2015** (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 2015, how many:  (**Exclude** calves purchased.) | |  |
| a. were **on hand** January 1, 2016?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | + | 363 |
|  |  |  |
| b. (Of the calves born on the total acres operated during 2015, 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 2015 was:. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |
|  | = | 366 |
| a. Of these calves born, how many were born in the six month period,  July 1 through December 31, 2015?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | |  |
|  | | 341 |
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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 2015?. . . | 367 |
| 7. How many **calves** weighing less than 500 pounds **died or were lost from all causes** during 2015? (**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 placement  on feed in another feedlot, or to be returned to pasture.  **Exclude** “Cows and Bulls” on feed. | | |
| **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, 2015? | |
|  |  | **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 2015, how many cattle and calves on feed were  shipped **directly** to slaughter market from your feedlot? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 678 |

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| **Inventory Values** for Cattle and Calves on hand January 1, 2016.) |  |  |
| 12. What is the average value per head of the following:  [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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| f. Other heifers weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | $ | 195 |
| g. Steers weighing 500 pounds or more? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | $ | 196 |
| h. Calves weighing less than 500 pounds? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | $ | 197 |

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| **Slaughter for Consumption by this Operation** (regardless of ownership) |  | |  |
| 13. During 2015, how many cattle and calves were custom slaughtered  at commercial establishments **for consumption by this operation**?. . . . . . . . . . . . | | **Cattle** | **Calves** |
| 268 | 269 |

|  |  |  |
| --- | --- | --- |
| 14. During 2015, how many cattle and calves were slaughtered on this  operation **for consumption by this operation**? (**Include** mobile  slaughtering. **Exclude** custom slaughter at commercial establishments.). . . . . . . . |  |  |
| 270 | 271 |

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|  | 1 – Incomplete, has cattle  2 – Incomplete, cattle presence unknown | 498 |
|  | 3 – Valid Zero |  |

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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 has Deaths/Injuries | | 115 |
| 2– Incomplete unknown Deaths/Injuries | |
| Record answers in the tables below.  How many cattle or calves died or were lost from: | 3 – Valid Zero | |
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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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| --- | --- | --- | --- |
| 5. How many calves and cattle were injured but not killed by predators during 2015?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  | 970 | 971 |

|  |  |
| --- | --- |
| 6. Did you use any non-lethal methods to prevent wildlife-caused losses on your cattle operation?  1**Yes** = 1, Continue  3**No** = 3, Go to **Item 10** . **. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .** | 134 |

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| 7. To prevent wildlife caused losses on your cattle operation,  Did you use: | **Yes** | **No** |  |  |
| a. Guard Animals. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 121 |
| b. Fencing (Predator Exclusion Fencing). . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 124 |
| c. Herding. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 126 |
| d. Night Penning. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 127 |
| e. Fright Tactics. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 128 |
| f. Livestock Carcass Removal. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 129 |
| g. Culling Older Cattle to Prevent Death Loss. . . . . . . . . . . . . . . . . . . . | 1 | 3 |  | 130 |
| h. Frequent Checks in High Predation Areas/Seasons. . . . . . . . . . . . . | 1 | 3 |  | 132 |
| i. Other Non – lethal (specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ). . . . . . . | 1 | 3 |  | 133 |
|  |  | |  |  |
| 8. Did you spend any money on **non-lethal** predator control measures for cattle and calves during 2015? |  |  |  |  |
| 1**Yes** = 1, Continue  3**No** = 3, Go to **Item 10 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .** | | | | 135 |

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| --- | --- |
|  | **Dollars** |
| 9. How much was spent on cattle and calves for **non-lethal** predator control measures  by this operation during 2015?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 136 |

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| --- | --- | --- |
| 10. Did you spend any money on **lethal** predator control measures for cattle and calves during 2015? |  | |
| 1**Yes** = 1, Continue  3**No** = 3, Go to **Item 12  . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .** | | 137 |

|  |  |
| --- | --- |
|  | **Dollars** |
| 11. How much was spent on cattle and calves for **lethal** predator control measures  by this operation during 2015?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 138 |

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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, 2015?  **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, 2015?  **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, 2015?  **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, 2015?  **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**.]. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 9990 |
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|  |  |  |
| --- | --- | --- |
| Respondent Name: | 9911  Phone: ( ) | 9910 MM DD YY  Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ |
| **This completes the survey. Thank you for your help.** | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Response** | | **Respondent** | | **Mode** | | **Enum.** | | **Eval.** | **Change** | **Office Use for POID** | | | | |
| 1-Comp  2-R  3-Inac  4-Office Hold  5-R – Est  6-Inac – Est  7-Off Hold – Est | 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 | 9998 | | 9900 | 9985 | 9989  \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ | | | | |
| **Optional Use** | | | | |
| 9907 | 9908 | | 9906 | 9916 |
| S/E Name | | | | | |  |  | | |  | |  | | |