

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 control number is 0535-0002 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.

1. Did you plant dry beans on your farm during 2015?

No

Yes, please continue with item 2

Will you plant any dry beans on your farm in the future?

Yes, please complete item 3 and return questionnaire in envelope provided

No, please complete item 3 and return questionnaire in envelope provided

2. Please report dry bean acreage on the total acres in your operation. Exclude soybeans.

Dry Bean Class	Planted or to be planted in 2015				
	Acres				
Navy (pea)	500				
Black	102				
Cranberry	103				
Dark Red Kidney	104				
Light Red Kidney	105				
Small Red	106				
Great Northern	107				
Pinto	108				
Other (specify):	109				
TOTAL DRY BEAN ACREAGE	501				

3. To avoid duplication, indicate below any farm name or partner(s) associated with this operation *not* included in the above address.

Farm Name:		If not farming, check ( ) reason below:
Partner's Name(s):		<ul><li>1. Farm sold.</li><li>2. Entire farm rented to others.</li><li>3. Retired from farming.</li></ul>
	State:	Zip:

Please comment on	the	2015	crop:
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Survey Results: To receive the complete results of this www.nass.usda.gov/results Would you rather have a brief summary mailed to you at	_	3 <b>No</b>	OFFICE US	<u>SE</u>
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Respondent Name:	Phone: ()	Date:	- <u></u>	

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

					OFFIC	E USE C	ONLY			<b>OFFIC</b> 200	EUSE	<b>OFFIC</b> 201	EUSE
Response		Respond	ent	Mode		Enum.	Eval.	R. Unit	Change	Office Use for POID			C
1-Comp 2-R 3-Inac 4-Office Hold 5-R – 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	9903	9998	9900	9921	9985	9989			
6-Inac – Est 7-Off Hold – Est				6-e-mail 7-Fax									
				8-CAPI 19-Other						9907	9908	9906	9916
S/E Name													