

MINT INQUIRY- 2015

OMB No. 0535-0002
 Approval Expires: 8/31/2015
 Project Code: 193 QID: 030376
 SMetaKey: 2696 Version 55



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

USDA/NASS - Wisconsin
 Upper Midwest Region
 210 Walnut St., #833
 Des Moines, IA 50309
 Phone: 1-800-772-0825
 Fax: 1-855-271-9802
 E-mail: NASSRFOUMR@nass.usda.gov

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 0535-0002. 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.

Report for the Farm(s) you Operate

	Peppermint	Spearmint
1. Acres of mint harvested last year, 2014.	201	301
2. Acres of mint harvested this year, 2015.	202	302
3. Total pounds of oil produced this year, 2015.	203	303
4. Average price per pound received this year for your 2015 crop.	204	304
	Dollars	Dollars

COMMENTS:

Survey Results: To receive the complete results of this survey on the release date, go to <http://www.nass.usda.gov/results>.

Would you rather have a brief summary mailed to you at a later date? **Yes = 1** **No = 3** ... 9990

Respondent Name: _____ 9911 9910 MM DD YY
 Phone: (_____) --

This completes the survey. Thank you for your help.

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										
4-Office Hold		4-Partner		4-CATI						Optional Use				
5-R - Est		9-Oth		5-Web						9907	9908	9906	9916	
6-Inac - Est				6-e-mail										
7-Off Hold - Est				7-Fax										
				8-CAPI										
				19-Other										
S/E Name														