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| **2015 TABLE OLIVE CROP INQUIRY - JULY 2015** | | | | | | | | | |
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|  | | | | | | | | OMB No. 0535-0039  Approval Expires: 8/31/2019  Project Code: 745 QID: 163873  SMetaKey: 3873 | |
| **SURVEY_LOGO_1:USDA_logo_bw.gif** | **United States**  **Department of**  **Agriculture** |
|  |  | |  | | | | |  | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |
|  |  | |  | | | | | **C:\Users\evanpa.NASSAD\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\P7P796V4\th.jpg** | **California Department of Food and Agriculture** |
|  |  |  | |  | |  |  | **USDA/NASS - California**  Pacific Region  650 Capitol Mall, #6-100Sacramento, CA 95814  Phone: 1-800-851-1127  Fax: 1-855-270-2722  Email: NASSRFOPCR@nass.usda.gov | |
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| Please make corrections to name, address and ZIP Code, if necessary | | | | | **PLEASE MAIL OR FAX BY JULY 13, 2016** | | | | |
| We request your help in estimating the size of the 2016 olive crop. You are one of a select few olive operations throughout the state who have been randomly selected for this survey. Please return this form in the postage - paid envelope enclosed for you convenience, or fax it to 1-888-478-5637.  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**. | | | | | | | | | |
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| 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 0535-0039. 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. | | | | | | | | | |

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| **ACTUAL 2015 CROP** | | Sevillano | Manzanillo | Other:  (Specify)  \_\_\_\_\_\_\_\_\_\_\_ | Total |
| 1. Total acreage harvested in 2015?. . . . . . . . . . . . . | Acres |  |  |  |  |
| 2. Total Production?. . . . . . . . . . . . . . . . . . . . . . . . . . | Tons |  |  |  |  |
| Of the total production, how many tons were:  a. utilized for canning?. . . . . . . . . . . . . . . . . . | Tons |  |  |  |  |
|  | | | | | |
| **ESTIMATED 2016 CROP** | | Sevillano | Manzanillo | Other:  (Specify)  \_\_\_\_\_\_\_\_\_\_\_ | Total |
| 1. Total acreage to be harvested in 2016?. . . . . . . . . | Acres |  |  |  |  |
| 2. Total Production expected?. . . . . . . . . . . . . . . . . . | Tons |  |  |  |  |
| Of the total production, how many tons will be:  a. utilized for canning?. . . . . . . . . . . . . . . . . . | Tons |  |  |  |  |
|  | | | | | |
| County where your olives are located: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  | |
| (OVER) | | | | | |

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| **Comments** about the 2015 olive crop in your locality: | |
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| **Survey Results:** The 2016 California Olive Forecast will be available August 12 on the Internet at [www.nass.usda.gov/ca](http://www.nass.usda.gov/ca). | |
| **If you have any questions, please call Bonnie Spencer at 1-800-851-1127, Ext. 126.** | |
|  | |
| Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Respondent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | 9911 | | | | 9910 MM DD YY | | | | |
| **Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | **Date: \_\_ \_\_ \_\_ \_\_ \_\_ \_\_** | | | | |
| **This completes the survey. Thank you for your help.** | | | | | | | | | | | | | | |
| **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 | | | | | |  |  | | |  | |  | | |