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| **CATTLE ON FEED INQUIRY - February** **1, 2017** | | | | | | | | |
|  | | | | | | | OMB No. 0535-0213  Approval Expires: 6/30/2017  Project Code: 363  Version 19 | |
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|  |  | |  | | | | **SURVEY_LOGO_1:USDA_logo_bw.gif** | **United States**  **Department of**  **Agriculture** |
|  |  | | Iowa Operations with less than 1,000 head. | | | | **http://nassnet/miso/PRIME_Center/Communication_Guidelines/Official_Logos/NASS%20Graphic/nass_logo_bw.gif** | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |
|  |  |  | |  |  |  | **USDA/NASS -** **Iowa**  Upper Midwest Region  210 Walnut St., #833Des Moines, IA 50309  Phone: 1-800-772-0825  Fax: 1-855-271-9802  E-mail: NASSRFOUMR@nass.usda.gov | |
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| Your answers to the questions below are needed to prepare reliable State and National cattle on feed statistics to be published in the February 24 Iowa Cattle on Feed Report. The data are collected and published as a service to the cattle industry and may assist in planning and adjusting your cattle feeding operations. Your report is needed even though you may not currently have cattle on feed. Please mail your report in the enclosed envelope. The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. 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 15 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. | | | | | | |
| Please make corrections to names, address and ZIP Code, if necessary. | | | | | | |

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| We need to know about all cattle and calves on feed for the slaughter market, regardless of ownership, on the total acres operated. |  |

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| * **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” from feed. |

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| 1. How many cattle and calves were on feed **February** **1** that will go **directly** from this operation to the slaughter market? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 652 |
| |  | | --- | | 2. During **January**, how many cattle and calves: | | |

|  |  |
| --- | --- |
| a. were placed on feed in your feedlot(s)?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 653 |
| b. were shipped to slaughter market from your feedlot(s)?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 654 |
| c. were shipped to someone else’s feedlot(s)?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 655 |
| d. were returned to grazing?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 656 |
| e. died?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 657 |

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| 3. How many cattle and calves were on feed **January** **1** that will go **directly** from this operation to the slaughter market? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 916 |

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| 4. Considering your **cattle feeding facilities,** what is the **largest** number of cattle and calves that you would feed for the **slaughter market**, at any one time?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 676 |

**OVER PLEASE**

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| --- | --- |
| HAY PRICES |  |

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| * Include any size or type of bale but exclude hay bought or sold as standing hay. * Exclude all hay purchased from dealers or any source other than farmers. | | |
|  | TONS | |
| 5 How many tons of baled alfalfa hay and alfalfa hay mixtures did you purchase from other farmers in September?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 289 | |
|  | DOLLARS | |
| 6 What was the total amount you paid for the alfalfa hay and alfalfa hay mixtures purchased from other farmers in September?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 181 | |
|  | TONS | |
| 7 How many tons of other baled hay, including fescue, clover, bermuda, sudan, sudan crosses, lespedza, bahia, timothy, grain, ryegrass, other grass, other tame, and wild hays did you purchase from other farmers in September? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 319 | |
|  | DOLLARS | |
| 8 What was the total amount, you paid for the other baled hay purchased from other farmers in September?. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 187 | |

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| 9. Has this operation (name on label) been sold, or turned over to someone else? |
| NO - Go to Item 10  YES - Identify the new operator(s). |

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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| a. Did this person operate land individually in this State on June 1, 2017?  YES  NO |

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| 10. **Survey Results:** To receive the complete results of this survey on the release date, go to  <http://www.nass.usda.gov/Surveys/Guide_to_NASS_Surveys> |
| Would you rather have a brief summary mailed to you at a later date? |

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| 1Yes 3No | 9990 |

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|  |  |  | **Office Use** | **Optional Use** |
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| **Comments:** |  |
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|  | |  | 9911 | 9910 MM DD YY |
| Respondent Name: |  |  | Phone: (\_\_\_\_\_) | Date: |

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| This completes the survey. **Thank you for your help.** |

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| **OFFICE USE ONLY** | | | | | | | | | | | | |
| **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-PASI (Mail)  2-PATI (Tel)  3-PAPI (Face-to-Face)  6-email  7-Fax  19-Other | 9903 | 9998 | 9900 | 9985 | 9989 | | | |
| **R. Unit** |  | | | |
| 9921 | **Optional Use** | | | |
| 9907 | 9908 | 9906 | 9916 |
| S/E Name | | | | | |  | | | | | | |