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| **KIWIFRUIT PRICE INQUIRY****2015 CROP** |

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|  | OMB No. 0535-0039 Approval Expires: 8/31/2016Project Code: 172 QID: 050132  |
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| new_nass_logo_bw | **NATIONAL****AGRICULTURAL****STATISTICS****SERVICE** |

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| **Return by May 4, 2016. FAX: 1-855-270-2722**Please make corrections to name, address and ZIP Code, if necessary. | USDA/NASS Pacific Region650 Capitol Mall, #6-100Sacramento, CA 95814 Phone: 1-800-851-1127 Fax: 1-855-270-2722 Email: NASSRFOPCR@nass.usda.gov |
| Dear Handler:We need your help to prepare estimates for California's 2015 kiwifruit prices and related marketing costs. Please complete this questionnaire and return it by **May 4**. A postage-paid envelope is enclosed for your convenience or you may fax the report to 1-855-270-2722. 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**.If you have any questions, please call Jeff Olson at 1‑800‑851‑1127, Ext. 123. Thank you for your assistance.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 for this information collection 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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| 1. Please report your average Free-on-Board (F.O.B.) shipping point and packinghouse-door (P.H.D.) price per packed tray, master of bags, or volume filled in the following table. |
| **FRUIT SOLD FRESH** |

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| **Type of Container** | **Number of Packed Containers** | **Average Net Weight of Container** | **Average F.O.B. Price Per Packed Container** | **All Costs Per Container From P.H.D. to F.O.B.** | **Equivalent P.H.D. Return Per Packed Container** **(Col. 3 Minus 4 and 5)** |
| **Commission, Selling, Advertising, Administration, Etc.** | **Inspection, Assessments, Storage, Grading, Packing, Etc. 1/** |

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|  | **(1)** | **(2)** | **(3)** | **(4)** | **(5)** | **(6)** |

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|  | **Number** | **Pounds** |  | **Dollars** |  |
| Trays |       |       |       |       |       |       |
| Master of Bags |       |       |       |       |       |       |
| Volume Filled |       |       |       |       |       |       |

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| Other (Specify): |       |       |       |       |       |       |
|       |
| 1/ Includes warehousing, cooling, and packing (including packing materials). |
| 2. What was the percentage of kiwifruit culled at packinghouse-door? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .**Percent** |       |
| 3. How many pounds of kiwifruit were **diverted to processing**? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .**Pounds** |  |

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|  a. What was the average price received per pound? . . . . . . . . . . . . . . . . . . . . . . . . . . . . **. . . . . . . . . . .Dollars Per Pound** |       |
| 4. Of the fruit reported in Item 1, how many pounds were **marketed**  **directly to consumers**? (Include fruit sold at farmers markets and roadside stands.) . . . . . . . . . . . . . . . . . . .**Pounds** |  |

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|  a. What was the average price received per pound? . . . . . . . . . . . . . . . . . . . . . . . . . . . . **. . . . . . . . . . .Dollars Per Pound** |       |

**Comments:**

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

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| **OFFICE USE ONLY** |
| **Response** | **Respondent** | **Mode** | **Enum.** | **Eval.** | **Change**785 | **Office Use for POID** |
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| Respondent Name:  | 9911Phone:  |  9910 MM DD YY Date:  |