

National Farmers Market Manager Survey - January 2020

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SECTION 1: Screening

1. Is the entity identified above a farmers market? A farmers market is defined as a retail outlet in which two or more vendors sell agricultural products (i.e., food and/or fiber originating from the farm) directly to customers at a common, recurrent location.

xxxx 1 Yes - Continue 3 No - Go to Section 8

2. Is the location identified above the location for this farmers market?

xxxx 1 Yes - Continue 3 No - Go to Section 8

3. Was this farmers market at this location in operation during 2019?

xxxx 1 Yes - Continue 3 No - Go to Section 7 2 Do Not Know - Go to Section 8

SECTION 2: General Market Characteristics and Attributes

1. During which months did this farmers market at this location operate during 2019? Check all that apply.

- xxxx Year Round
- xxxx January xxx July
- xxxx February xxx August
- xxxx March xxx September
- xxxx April xxx October
- xxxx May xxx November
- xxxx June xxx December

2. During **peak market season** month(s), what days and how many hours is this farmers market open? Check all days that apply and provide the opening time and closing time for each day.

Day	Opening Time		Closing Time	
<i>EXAMPLE</i> <input checked="" type="checkbox"/> Monday	<i>EXAMPLE</i> 9:00	¹²³⁴ 1 <input checked="" type="checkbox"/> AM 2 <input type="checkbox"/> PM	<i>EXAMPLE</i> 6:00	²³⁴⁵ 1 <input type="checkbox"/> AM 2 <input checked="" type="checkbox"/> PM
¹²³⁴ <input type="checkbox"/> Monday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Tuesday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Wednesday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Thursday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Friday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Saturday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM
xxxx <input type="checkbox"/> Sunday	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM	xxxx	xxxx 1 <input type="checkbox"/> AM 2 <input type="checkbox"/> PM

3. Which of the following types of products were sold at this farmers market at this location during 2019? Check all that apply.

Milk and Dairy	
xxxx	<input type="checkbox"/> Cheese
xxxx	<input type="checkbox"/> Yogurt
xxxx	<input type="checkbox"/> Milk
xxxx	<input type="checkbox"/> Butter

Bread & Baking Goods	
xxxx	<input type="checkbox"/> Baked goods: breads, pies, etc.
xxxx	<input type="checkbox"/> Grains and/or flour

Fruit and Vegetable Products	
xxxx	<input type="checkbox"/> Fresh fruit
xxxx	<input type="checkbox"/> Fresh vegetables
xxxx	<input type="checkbox"/> Fresh and/or dried herbs

Meat, Seafood and Egg Products	
xxxx	<input type="checkbox"/> Fish and/or seafood
xxxx	<input type="checkbox"/> Red meat and products (other than poultry)
xxxx	<input type="checkbox"/> Poultry/Fowl meat and products
xxxx	<input type="checkbox"/> Eggs

Condiments and Sauce	
xxxx	<input type="checkbox"/> Honey
xxxx	<input type="checkbox"/> Canned or preserved fruits and vegetables (jams, jellies, preserves, salsas, fried fruit, etc.)
xxxx	<input type="checkbox"/> Maple syrup and/or products

Beverages	
xxxx	<input type="checkbox"/> Alcoholic beverages (e.g., wine, spirits, beer, hard cider)
xxxx	<input type="checkbox"/> Coffee and/or tea
xxxx	<input type="checkbox"/> All other non alcoholic beverages (e.g., juices, non-alcoholic ciders)

Plants	
xxxx	<input type="checkbox"/> Cut flowers
xxxx	<input type="checkbox"/> Plants in containers
xxxx	<input type="checkbox"/> Bedding plants
xxxx	<input type="checkbox"/> Nursery stock (trees, shrubs)

Other Food Products	
xxxx	<input type="checkbox"/> Tofu and/or meat and dairy substitutes
xxxx	<input type="checkbox"/> Nuts
xxxx	<input type="checkbox"/> Mushrooms
xxxx	<input type="checkbox"/> Wild harvested/foraged products
xxxx	<input type="checkbox"/> Prepared foods (for immediate consumption)
xxxx	<input type="checkbox"/> Seed of edible plants
xxxx	<input type="checkbox"/> Fermented and pickled foods (e.g., kraut, pickles, kimchi, etc.)

Miscellaneous	
xxxx	<input type="checkbox"/> Crafts and/or woodworking items
xxxx	<input type="checkbox"/> Soap and/or body care products
xxxx	<input type="checkbox"/> Pet food
xxxx	<input type="checkbox"/> Services, please specify: _____
xxxx	<input type="checkbox"/> Other, please specify: _____
xxxx	<input type="checkbox"/> Other, please specify: _____

SECTION 3: Agricultural Business Development and Support

1. On an average market day during **peak market season**, how many producers/vendors sold at this farmers market at this location during 2019?

Number of Producers/Vendors xxxx _____

- a. Of these (Item 1) producers/vendors, how many were farmers that sold products they produced?

Number of Farmers xxxx _____

- b. At this farmers market at this location, how many producers/vendors had sales revenue generated **primarily** from the following products?

(If you do not have information about an indicated source, please leave a given box blank. If there are no producers/vendors within a given category, please enter "0" in the box.)

Products	Number of Producers/Vendors
Milk and Dairy	xxxx
Bread and Baking Goods	xxxx
Fruit and Vegetable Products	xxxx
Meat, Seafood and Egg Products	xxxx
Condiments and Sauce	xxxx
Beverage	xxxx
Plants	xxxx
Other Food Products and Miscellaneous: _____	xxxx

- c. How many of the producers/vendors identified in Item 1 returned to this farmers market at this location from 2018?

Number of Producers/Vendors xxxx _____ xxxx Not open in 2018 xxxx Do Not Know

- d. Of those producers/vendors identified in Item 1, how many sold products that they produced directly to intermediate markets, retail markets and institutions such as restaurants, schools, hospitals, etc.? An **intermediate market** is a business or organization in the middle of the supply chain marketing mostly locally- and/or regionally-branded products.

Number of Producers/Vendors xxxx _____ xxxx Do Not Know

- e. Approximately how many intermediate markets, retail markets and institutions bought products from producers/vendors at this farmers market at this location?

Number of intermediate markets, retail markets and institutions xxxx _____ xxxx Do Not Know

2. During 2019, what was the total number of producers/vendors that sold at this farmers market at this location?
INCLUDE producers/vendors that sold at this farmers market location just once or a few times during 2019.

Total Number of Producers/Vendors xxxx _____ xxxx Do Not Know

3. On an average market day during **peak market season**, did the number of producers/vendors selling at this farmers market at this location increase, stay the same, or decrease during 2019 when compared with 2018?

xxxx 1 Increased 2 Stayed the same 3 Decreased 4 Do Not Know

4. What types of labeling do vendors use at this farmers market at this location? Check all that apply.

xxxx USDA Certified Organic

xxxx Free Range

xxxx Grass-fed

xxxx Certified Humane

xxxx Locally-grown

xxxx Gluten free

xxxx Other, please specify: _____

xxxx Other, please specify: _____

xxxx None of the above

xxxx Do Not Know

5. A number of farmers market organizers engage in activities designed to improve farm business administration and practice, and provide additional marketing opportunities for producers/vendors.

Did this farmers market at this location assist with training and/or business development support for producers/vendors during 2019?

XXXX 1 Yes - Continue 3 No - Go to Question 7 2 Do Not Know - Go to Question 7

- a. What kinds of training and/or business development support for producers/vendors did this farmers market at this location assist with during 2019?

Hosted workshops, training and/or consultation in: Check all that apply.

XXXX Merchandising

XXXX Marketing

XXXX Production planning

XXXX Bookkeeping/accounting

XXXX Food handling safety (e.g., prepared foods/meals sold at market)

XXXX On-farm food safety (e.g., GAP certification)

XXXX Farming (growing/ harvesting) for beginning farmers and producers

XXXX Value-added production/processing

XXXX Business planning

XXXX Other, please specify: _____

6. Which of the following services did this farmers market at this location provide or manage during 2019?

Provided: Check all that apply.

XXXX Shared kitchen space for producers/vendors

XXXX Storage space for producers/vendors

XXXX Packaging services for producers/vendors

XXXX Other, please specify: _____

XXXX None of the above

Managed: Check all that apply.

XXXX CSA program

XXXX Food hub and/or other aggregated/distribution operation

XXXX Nearby satellite markets (e.g., pop-up markets, farm stand, etc.)

XXXX Mobile market

XXXX Other, please specify: _____

XXXX None of the above

7. As the representative of this farmers market, do you know how producers/vendors are benefiting from participating at this farmers market location?

xxxx 1 Yes - Continue 3 No - Go to Section 4

a. To the best of your knowledge, in what ways are the producers/vendors impacted by their participation at this farmers market at this location?

Production: Check all that apply.

- xxxx Transitioned from working part time to working full time on the farm
- xxxx Increased the number of workers they employed
- xxxx Able to transition from conventional production to organic production
- xxxx Increased the range of products they sold at the market
- xxxx Increased their overall production of direct-marketed farm products

Innovation: Check all that apply.

- xxxx Initiated "value-added" production to boost revenues
- xxxx Made economic use of cosmetically imperfect agricultural products
- xxxx Began renting the facilities of a commercial/shared-use kitchen

Marketing Opportunities: Check all that apply.

- xxxx Increased number of farmers markets where they sell
- xxxx Sold through other direct-to-consumer markets such as CSAs and/or farm stands
- xxxx Sold to retail markets such as grocery stores and restaurants
- xxxx Sold to institutions such as food hubs, hospitals, and schools

Other: Check all that apply.

- xxxx Other, please specify: _____
- xxxx Other, please specify: _____

- xxxx 1 No benefit - Go to Section 4
- 2 Do Not Know - Go to Section 4

SECTION 4: Farmers Market Development Activities

1. Did this farmers market at this location accept federal nutrition program benefits as payment during 2019 (i.e., the market redeems the benefit, and the benefit is deposited into the markets bank account)?

xxxx 1 Yes - Continue 3 No - Go to Item 2

- a. Which federal nutrition program benefits did this farmers market at this location accept during 2019. Check all that apply.

xxxx Supplemental Nutrition Assistance Program (SNAP)/Food Stamps
(Called differently in some states, e.g., in Wisconsin - FoodShare)

xxxx Women, Infants and Children's (WIC) Farmers Market Nutrition Program (FMNP)
(Called differently in some states, e.g., in Michigan - WIC Project FRESH)

xxxx Senior Farmers Market Nutrition Program (SFMNP)
(Called differently in some states, e.g., in Michigan - Senior Project FRESH in 2010 but Market FRESH in 2011)

xxxx Women, Infants and Children's (WIC) Cash Value Voucher (CVV)
(Called differently in some states, e.g., in New York - WIC Vegetables and Fruits Check Program)

xxxx Other, please specify: _____

xxxx Other, please specify: _____

xxxx Do Not Know

2. Did INDIVIDUAL VENDORS at this farmers market at this location accept federal nutrition program benefits as payment during 2019 (i.e., the vendor redeems the benefit, and the benefit is deposited into the vendor's bank account)?

xxxx 1 Yes - Continue 3 No - Go to Item 3

- a. Which federal nutrition program benefits did individual vendors at the farmers market at this location accept during 2019? Check all that apply.

xxxx Supplemental Nutrition Assistance Program (SNAP)/Food Stamps
(Called differently in some states, e.g., in Wisconsin - FoodShare)

xxxx Women, infants and Children's (WIC) Farmers Market Nutrition Program (FMNP)
(Called differently in some states, e.g., in Michigan - WIC Project FRESH)

xxxx Senior Farmers Market Nutrition Program (SFMNP)
(Called differently in some states, e.g., in Michigan - Senior Project FRESH in 2010 but Market FRESH in 2011)

xxxx Women, Infants and Children's (WIC) Cash Value Voucher (CVV)
(Called differently in some states, e.g., in New York - WIC Vegetables and Fruits Check Program)

xxxx Other, please specify: _____

xxxx Other, please specify: _____

xxxx Do Not Know

3. Did this farmers market location offer any incentives or matching programs (e.g., double bucks, matching vouchers, etc.) during 2019?

xxxx 1 Yes - Continue 3 No - Go to Item 4 2 Do Not Know - Go to Item 4

- a. Which Federal Nutrition Program was the incentive or matching voucher linked to? Check all that apply.

- xxxx Supplemental Nutrition Assistance Program (SNAP)
(Called differently in some states, e.g., in Wisconsin - FoodShare)
- xxxx Women, infants and Children's (WIC) Farmers Market Nutrition Program (FMNP)
(Called differently in some states, e.g., in Michigan - WIC Project FRESH)
- xxxx Senior Farmers Market Nutrition Program (SFMNP)
(Called differently in some states, e.g., in Michigan - Senior Project FRESH in 2010 but Market FRESH in 2011)
- xxxx Women, Infants and Children's (WIC) Cash Value Voucher (CVV)
(Called differently in some states, e.g., in New York - WIC Vegetables and Fruits Check Program)
- xxxx Fruit and Vegetable Prescription (RX)
- xxxx Other, please specify: _____

- b. How were the incentives/matching programs funded? Check all that apply.

- xxxx Federal funding (Including Food Insecurity Nutrition Incentive, or FINI funding)
- xxxx Private funding (Not including market funds)
- xxxx Market funding
- xxxx State funding
- xxxx Other, please specify: _____

4. Did this farmers market at this location offer or sponsor health and/or fitness programs aimed to encourage healthy dieting or lifestyle choices during 2019? For example:

- bicycle races
- budgeting for a healthy diet
- cooking lessons using healthy foods
- exercise classes/events, etc.
- nutrition education
- fitness programs
- health screenings
- healthy cooking demonstrations
- healthy recipe cards

xxxx

1 Yes - Continue 3 No - Go to Item 5 2 Do Not Know - Go to Item 5

a. How frequently does this farmers market at this location offer or sponsor health and/or fitness programs during **peak market season** during 2019? Select only one.

xxxx

- 1 Very Frequently (about once per week during peak market season)
- 2 Somewhat Frequently (about twice per month during peak market season)
- 3 Occasionally (once per month during peak market season)
- 4 Somewhat Infrequently (two or three times per market year)
- 5 Very Infrequently (once per market year)
- 6 Do Not Know

5. Did this farmers market at this location offer or engage in any food waste and/or conservation work during 2019?

xxxx

- 1 Yes - Continue 3 No - Go to Item 6

a. In which, if any, of the following food waste and/or conservation programs? Check all that apply.

xxxx

Canning and other processing classes and demonstrations

xxxx

Composting

xxxx

Gardening/Horticultural Instruction

xxxx

Gleaning

xxxx

Recycling

xxxx

Donating to food banks

xxxx

Other, please specify: _____

b. How frequently did this farmers market at this location offer or engage in food waste and/or conservation work during **peak market season** during 2019? Select only one.

xxxx

- 1 Very Frequently (about once per week during peak market season)
- 2 Somewhat Frequently (about twice per month during peak market season)
- 3 Occasionally (once per month during peak market season)
- 4 Somewhat Infrequently (two or three times per market year)
- 5 Very Infrequently (once per market year)
- 6 Do Not Know

6. Did this farmers market at this location conduct or hire anyone to conduct market research studies and/or evaluations (i.e., customer counts, customer surveys, sales tracking, producers/vendors surveys, etc.) during 2019?

xxxx

1 Yes - Continue3 No - Go to Item 72 Do Not Know - Go to Item 7

- a. Which of the following market research studies and/or evaluations did the farmers market at this location participate during 2019? Check all that apply.

xxxx

 Survey(s) of our customers for product preferences

xxxx

 Survey(s) of our customers for market day/time preferences

xxxx

 Customer counts/estimates

xxxx

 Survey(s) of producers/vendors about their needs, concerns, perceptions

xxxx

 Collection of sales information from producers/vendors

xxxx

 Feasibility studies to add aggregation and/or distribution activities (e.g., CSA/food hub at the farmers market location)

xxxx

 Community needs assessment

xxxx

 Other study, evaluation and/or assessment, please specify: _____

- b. On an average market day during **peak market season**, how many households shop at this farmers market at this location? Estimates are acceptable.

Number of Households Do Not Know

- c. On an average market day during **peak market season**, what are the average sales total for this farmers market at this location?

Average sales total \$.00 Do Not Know

7. Does bartering and/or other forms of non-monetary trade occur at this farmers market at this location, either between vendors or between producers/vendors and customers?

xxxx

1 Yes3 No2 Do Not Know

SECTION 5: Farmers Market Governance

1. Was there a board or group of persons that collectively made decisions about this farmers market at this location during 2019?

xxxx

- 1 Yes - Continue 3 No - Go to Item 2 2 Do Not Know - Go to Item 2

- a. Which of the following options best describes producers/vendors representation on the board or group at this farmers market at this location during 2019? Select only one.

xxxx

- 1 All members were producers/vendors of the farmers market at this location
- 2 Most members were producers/vendors of this farmers market at this location
- 3 Few members were producers/vendors of this farmers market at this location
- 4 No members were producers/vendors of this farmers market at this location
- 5 Do Not Know

- b. Which of the following options best describes resident/community representation on the board or group at this farmers market at this location during 2019? Select only one.

xxxx

- 1 All members were residents of the community in which this farmers market is located
- 2 Most members were residents of the community in which this farmers market is located
- 3 Few members were residents of the community in which this farmers market is located
- 4 No members were residents of the community in which this farmers market is located
- 5 Do Not Know

- c. Did this farmers market possess written by-laws (rules agreed upon by board members to formalize the decision-making process and business conduct) during 2019?

xxxx

- 1 Yes 3 No 2 Do Not Know

2. Did the farmers market at this location govern itself or was it governed by another entity during 2019? Select only one.

xxxx

- 1 Governed itself - Continue to Item 2a
- 2 Governed by another entity - Go to Item 2b
- 3 Do Not Know - Go to Item 2e

a. Which of the following best describes the farmers market at this location during 2019? Select only one.

xxxx

- 1 Nonprofit - Go to Item 2e
- 2 For-profit - Go to Item 2e
- 3 Government entity - Go to Item 2e
- 4 Other, please specify: _____ - Go to Item 2e

b. Was the farmers market at this location a member of an umbrella farmers market association during 2019? (Umbrella - an entity with staff that manages multiple farmers markets in order to coordinate activities and pool resources.)

xxxx

- 1 Yes - Continue to Item 2c
- 3 No - Go to Item 2d
- 2 Do Not Know - Go to Item 2e

c. What type of umbrella organization was this farmers market at this location association during 2019? Select only one.

xxxx

- 1 Nonprofit - Go to Item 2e
- 2 For-profit - Go to Item 2e
- 3 Government entity - Go to Item 2e
- 4 Other, please specify: _____ - Go to Item 2e

d. What kind of organization governed the farmers market at this location during 2019? Select only one.

xxxx

- 1 Municipal Government Agency/Division
- 2 Government entity - Go to Item 2e
- 3 Nonprofit
- 4 For-profit
- 5 Other, please specify: _____

e. Which of the following best describes the property ownership of the land and improvements where this farmers market is located? Select only one.

xxxx

- 1 Governing organization **leases** - Continue to Item 2f
- 2 Governing organization **wholly owns land and improvements** - Go to Item 3
- 3 Governing organization **wholly owns land but not improvements** - Go to Item 3
- 4 Governing organization **wholly owns improvements but not land** - Go to Item 3
- 5 Governing organization **shares ownership of both** - Go to Item 3
- 6 Governing organization **granted/gifted use of public land** and/or improvements specifically for use by this farmers market at this location - Go to Item 3
- 7 Governing organization **granted/gifted use of private land** and/or improvements specifically for use by this farmers market at this location - Go to Item 3
- 8 Do Not Know - Go to Item 3

f. How long is the lease on this land where this farmers market was located during 2019? Select only one.

xxxx

- 1 Year-to-year
- 2 More than one year but less than 5 years
- 3 More than 5 years
- 4 Do Not Know

3. Were there permanent structures used by the farmers market at this location during 2019?

xxxx

- 1 Yes - Go to Item 3a
- 3 No - Go to Item 4
- 2 Do Not Know - Go to Item 4

a. What kind of permanent structure? Check all that apply.

xxxx

Building

xxxx

Pavilion

xxxx

Other, please specify: _____

4. Did this farmers market at this location have any rules, regulations and/or operating procedures during 2019?

xxxx 1 Yes - Continue 3 No - Go to Item 5 2 Do Not Know - Go to Item 5

a. Which of the following did this farmers market have during 2019?

Rules, Regulations and Requirements: Check all that apply.

- xxxx Signed agreement between vendor and market on by-laws governing the farmers market
- xxxx Vendors are not allowed to sublet a space or stall
- xxxx Adherence to market guidelines of safe food handling practices
- xxxx Pre-application and adherence to the approval process
- xxxx Requirement of participation in food safety training
- xxxx Vendors must be a producer of the food and/or fiber they sell (i.e., producer-only market)
- xxxx Vendors must be from a defined geographical region
- xxxx Vendors must participate in market currency/incentive programs
- xxxx Vendors selling value-added items must use local farms for majority of ingredients
- xxxx Agreement between market and vendor for CSA and/or intermediated sales

Certifications, Memberships and Insurance: Check all that apply.

- xxxx Membership in a market association
- xxxx Only USDA-certified organic producers are accepted
- xxxx Licensing to sell products
- xxxx Liability insurance
- xxxx Organic certification to market as organic
- xxxx Authorized to accept Federal Nutrition Program benefits
- xxxx Membership in a trade or producer marketing association
- xxxx Membership in a production co-op

Other: Check all that apply.

- xxxx Other, please specify: _____
- xxxx Other, please specify: _____
- xxxx No requirements

5. Did this farmers market at this location have a manager during 2019? Select only one.

xxxx

- 1 Yes, as a paid employee of the farmers market organization - Go to Item 5a
- 2 Yes, as a paid employee of another agency or organization - Go to Item 5a
- 3 Yes, as a paid independent contractor - Go to Item 5a
- 4 Yes, as a volunteer - Go to Item 5b
- 5 No - Go to Item 6
- 6 Do Not Know - Go to Item 6

a. How was the farmers market manager paid and what amount?

xxxx

- 1 As a salaried employee - Complete the table below
- 2 Do Not Know- Go to Item 5b

xxxx 1 <input type="checkbox"/> Hourly	xxxx \$
xxxx 2 <input type="checkbox"/> Daily	xxxx \$
xxxx 3 <input type="checkbox"/> Weekly	xxxx \$
xxxx 4 <input type="checkbox"/> Monthly	xxxx \$
xxxx 5 <input type="checkbox"/> Seasonally	xxxx \$
xxxx 6 <input type="checkbox"/> Annually	xxxx \$

b. During an average week, approximately how many hours does the farmers market manager work for this farmers market at this location?

INCLUDE after market hours

Number of hours xxxx _____ xxxx 2 Do Not Know

6. Did the manager of this farmers market at this location also manage additional farmers market locations during 2019?

xxxx 1 Yes 3 No 2 Do Not Know

7. Excluding the farmers market manager, did this farmers market location employ any additional paid workers during 2019?

xxxx 1 Yes - Go to Item 7a
 3 No - Go to Item 8
 2 Do Not Know - Go to Item 8

a. Excluding the farmers market manager, how many employees in the following categories did this farmers market at this location employ during 2019?

Number of part-time employees (1 to 34 hours per week) (i.e., individuals who work less time than the average full-time employee. xxxxx _____

Number of full-time employees (35 hours or more per week) xxxxx _____ xxxxx 2 Do Not Know

(If there were no employees in a given category, please enter "0" in the box for that category. Please enter only numbers in the boxes; no commas, periods, letters or symbols.)

Role/Job Responsibility	Number of Full-Time Employees (35 hours or more per week)	Number of Part-Time Employees (1 to 34 hours per week)
Budget Expert/Accountant	xxxx	xxxx
Program/Project Coordinator	xxxx	xxxx
Federal Nutrition Program Coordinator	xxxx	xxxx
Farmers Market Incentives Coordinator	xxxx	xxxx
Site/Facilities Management/Support	xxxx	xxxx
Research/Evaluation	xxxx	xxxx
Other, please specify: xxxxx _____	xxxx	xxxx
Other, please specify: xxxxx _____	xxxx	xxxx

8. Did any volunteers contribute their time at this farmers market at this location during 2019?

EXCLUDE paid employees

xxxx 1 Yes - Continue 3 No - Go to Section 6 2 Do Not Know - Go to Section 6

a. If yes, Number of volunteers xxxxx _____

Section 6: Farmers Market Budget and Fees

1. Did this farmers market at this location have an annual operating budget during fiscal year 2019?

- xxxx 1 Yes - What was it? xxxx \$ _____ .00
- 3 No - Go to Item 2
- 2 Do Not Know - Go to Item 2

a. Report how much this farmers market received from the following sources in its annual operating budget during fiscal year 2019. Check all that apply.

xxxx <input type="checkbox"/> Public sponsorship	xxxx \$.00
xxxx <input type="checkbox"/> Private donations	xxxx \$.00
xxxx <input type="checkbox"/> Grant Award(s)	xxxx \$.00
xxxx <input type="checkbox"/> Loan	xxxx \$.00
xxxx <input type="checkbox"/> Fundraiser	xxxx \$.00
xxxx <input type="checkbox"/> Producer/Vendor Fees	xxxx \$.00
xxxx <input type="checkbox"/> Other, Please specify: _____	xxxx \$.00
Total (Your total should equal to the operating budget in Item 1 above)	xxxx \$.00

2. Did this farmers market location at this location charge participating producers/vendors a fee to sell at this location during 2019?

- xxxx 1 Yes - Continue 3 No - Go to Item 3 2 Do Not Know - Go to Item 3

a. How did this farmers market at this location determine the fee amount? Check all that apply.

- xxxx Flat Rate
- xxxx Based on percentage of sales
- xxxx Based on size of the vendor stall
- xxxx Other, please specify: _____
- xxxx Do Not Know

3. Was there an annual membership or application fee during 2019?

- xxxx 1 Yes 3 No 2 Do Not Know

SECTION 7: Closed Markets

1. Was this farmers market at this location open during 2019?

xxxx

- 1 Yes - Go to Section 8 3 No - Continue

2. What was the primary reason this farmers market at this location closed? Select only one.

xxxx

- 1 Do Not Know
- 2 Loss of market founder/manager
- 3 Not enough farm producers/vendors to provide products
- 4 Lack of sufficient interest in participating by local producers
- 5 Lack of diversity of agricultural products offered
- 6 Low market sales
- 7 Lost market location/could not secure viable replacement location
- 8 Poor location
- 9 Lack of dedicated resources to manage day-to-day market operations
- 10 Lack of volunteers
- 11 Due to regulations, local ordinances, health citations, etc.
- 12 Competition from other farmers market(s)
- 13 Competition from other retail markets(s)/store(s)
- 14 Other, Please Explain: _____
- 15 Other, Please Explain: _____

a. Please elaborate on the reason why this farmers market at this location closed.

xxxx

3. Please indicate the last year this farmers market at this location was open.

xxxx

- 1 Do Not Know
- 2 2019
- 3 2018
- 4 2017
- 5 2016
- 6 2015
- 7 2014
- 8 2013
- 9 Prior to 2013

4. How many years did this farmers market at this location operate?

xxxx

- 1 Do Not Know
- 2 1 year
- 3 2 years
- 4 3 years
- 5 4 years
- 6 5 years
- 7 6 years - 10 years
- 8 11 - 15 years
- 9 More than 15 years

SECTION 8: Conclusion

1. It is important that we do not have duplication on our list of entity/farmers market locations. Is it possible the information on this form would be reported by another representative from this entity/farmers market at this location or the entity/farmers market operates under a different name?

xxxx 1 Yes - Continue 3 No - Go to Item 2

- a. Please provide the alternate contact information for this entity/farmers market:

Alternate Name of Entity/Farmers Market:	xxxx		
Alternate Contact Person Name:	xxxx		
Phone Number for Alternate Contact Person:	xxxx _____ - _____ - _____		
2019 Physical Address:	1082		
City:	1083	State:	1084 Zip Code: 4672

2. What is your name?

xxxx Name: _____

3. What is your primary relationship with this entity/farmers market at this location? Select only one.

- xxxx
- 1 Market manager/Director
 - 2 Board member
 - 3 Communications/Public Relations Contact
 - 4 Head/Representative of a farmers market association
 - 5 Representative of sponsoring organization (e.g., chamber of commerce, non-profit group, etc.)
 - 6 Agricultural Extension Agent
 - 7 Market president
 - 8 Market employee
 - 9 Market volunteer
 - 10 State agency/Government employee
 - 11 Local agency/Government employee
 - 12 Representative of a local economic development organization
 - 13 Market vendor
 - 14 Other, please specify: _____

Skip to next page

OR

Space for Notes and Comments

Respondent Name:	9911 Phone: () -	9910 M M D D Y Y Date: _ _ _ _ _ _
Respondent Email:		

This completes the survey. Thank you for your response.

OFFICE USE ONLY																	
Response	9901	Respondent		9902	Mode		9903	Enum.	Eval.	Change	R. Unit	Office Use for POID					
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est		1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth			1-PASl (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other							9989 _ _ _ - _ _ - _ _ _					
												Optional Use					
												9907	9908	9906	9916		
S/E Name																	