



**FORM A CORN YIELD SURVEY**  
**Initial Interview**  
**2020**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**Date:** \_\_\_\_\_

Earlier this season you gave a representative from our office information about the corn acreage on your farming operation. We are now collecting information to help determine corn production in (*Your State*) and the United States

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 0535-0088. The time required to complete this information collection is estimated to average 20 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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NOTES:

All questions below apply to this SAMPLE.

3. For the Sample Field, subtract Column 4 from Column 2 for the total acres of corn to be harvested for grain or seed. Report these acres here:..... ACRES

4. What was the planter row width setting?..... INCHES

**Kansas and Nebraska Only for Item 5**

5. Has this field been (or will it be) irrigated? 1  Yes 3  No 2  Don't Know CODE

6. On what date was planting completed in this corn field?..... MM DD

7. With your permission I will go out to the field and mark off two small plots to be used in making stalk and ear counts. I will return to the plots each month until harvest to make counts and measurements, and harvest and weigh a few ears. Would that be all right?

Yes - Continue. Inform respondent what day/approximate time you intend mark off two small plots to be used in making stalk and ear counts

No - Conclude interview and return all forms.

8. Have you or will you apply pesticides with organophosphorus content to the sample field?

Yes

No

Don't know

If yes, enter latest application date \_\_\_\_\_ and name of pesticide \_\_\_\_\_.

9. Where should I leave the corn picked from the units? \_\_\_\_\_

(Copy to the sample kit envelope the location where the operator wishes you to leave the corn.)

10. Do you intend to harvest this field as high moisture corn? (High moisture corn is defined as corn with moisture content of 30 percent or more.)

Yes

No

Don't know

NOTE: If this is a gleaning sample, tell the operator "After harvest, I will also lay out two small plots to determine harvest loss."

11. Respondent Name: \_\_\_\_\_

<p>PLEASE CHECK THE FOLLOWING:</p> <ul style="list-style-type: none"> <li>Review the form for completeness</li> <li>Sign name</li> <li>On the kit envelope, record operators' <ul style="list-style-type: none"> <li>Telephone number</li> <li>Expected harvest date</li> <li>Pesticide intentions (Item 7), and</li> <li>Location to leave corn (Item 8)</li> </ul> </li> </ul>
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Enumerator Number	<input type="text" value="190"/>
Supervisor Number	<input type="text" value="191"/>
Evaluation	<input type="text" value="193"/>
R. Unit	<input type="text" value="921"/>

12. Enumerator Name: \_\_\_\_\_

STATUS CODE