

WALNUT NURSERY SALES

OMB No. 0535-0039
 Approval Expires: ??/??/20??
 Project Code: 760
 SurveyID: 3874



**United States
 Department of
 Agriculture**



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

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 Pacific Region
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Please make corrections to name, address, and ZIP Code, if necessary.

PLEASE MAIL OR FAX BY OCTOBER 14, 2023

The information you provide will be used for statistical purposes only. Your response 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 and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 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.

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Section 1 - Introduction

1. Did you sell any walnut trees during the period August 1, 2021 to July 31, 2023?

INCLUDE seedlings

EXCLUDE sales to other nurseries

Yes - Please continue to Section 2 below

No - Please go to Survey Results on back page

Section 2 - Walnut Trees Sold

1. Report the number of walnut trees (including seedlings) sold below.

VARIETY	NUMBER OF TREES SOLD			
	August 1, 2021 - July 31, 2022		August 1, 2022 - July 31, 2023	
	Number of Trees Sold	% of Trees Sold for New Plantings	Number of Trees Sold	% of Trees Sold for New Plantings
Chandler				
Durham				
Franquette				
Hartley				
Howard				
Ivanhoe				
Livermore				
Solano				
Tulare				
Other				
Seedlings				
TOTAL				

Section 3 - Conclusion

1. Comments related to the information you reported:

Operator Email:

Operator Phone:

9929	9917	9918	check if cell phone
	Check to receive results by email <input type="checkbox"/>	() _____	<input type="checkbox"/>

Operation Email: (if different from above)

Operation Phone:

9937	9920	9936	check if cell phone
	Check to receive results by email <input type="checkbox"/>	() _____	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	() _____	<input type="checkbox"/>	Date: ____	____	____	____

This completes the survey.

If you have any questions, please call Lena Schwedler at 1-800-851-1127, Ext 86618

OFFICE USE ONLY										
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID	
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989	
2-R		2-Spouse		2-PATI (Tel)					_____	
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					_____	
4-Office Hold		4-Partner		6-Email					_____	
5-R – Est		9-Other		7-Fax					_____	
6-Inac – Est				19-Other					_____	
7-Off Hold – Est									_____	
						R. Unit	Optional Use			
						9921	9907	9908	9906	9916
S/E Name										