

HOG REPORT - December 1, 2017

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 IA, KS, KY, MI, MN, MS, MO, MT, NE, NC, ND,
 OH, OK, PA, SC, SD, TN, TX, UT, VA, WI, WY



**United States
 Department of
 Agriculture**



**NATIONAL
 AGRICULTURAL
 STATISTICS
 SERVICE**

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State	POID	Tract	Subtr.
__	_____	__	__

- [Verify name and mailing address of this operation. Make any corrections necessary (including the correct operation name) on the label and continue.] [Check if name label verified]
- Has this operation **owned** or **raised** hogs or pigs at any time since **September 1, 2017?** (**Include** hogs and pigs raised under contract.)
 - Yes** - [Go to **item 3** on page 2.]
 - No** - Were any hogs or pigs owned by someone else on this operation on **December 1, 2017?**
 - Yes** - [Go to **item 11** on page 6.]
 - No** - Were any hogs or pigs slaughtered **for consumption by this operation**, regardless of ownership, during 2017?
 - Yes** - [Go to **item 12** on page 6.]
 - No** - [Go to **Section 2** on page 7.]

3. Are the day-to-day decisions for **this operation** made by one individual, a hired manager, or partners? [Check one]

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- One individual – [Go to **Section 1** on page 3.]
- A hired manager – [Go to **Section 1** on page 3.]
- Partners – How many partners make the day-to-day decisions?

[Enter number of partners, including the partner named on the label. Identify the other person(s) in this partnership in the boxes below, then continue with **Section 1** on page 3.]

Number of Partners

--

4. Please identify the other person(s) in this partnership, then go to page 3, **Section 1**, item 1. (Verify partners' names and make necessary corrections if names have already been entered.)

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: (_____) - _____
Did this partner also operate land individually on December 1, 2017 ?
<input type="checkbox"/> Yes <input type="checkbox"/> No

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: (_____) - _____
Did this partner also operate land individually on December 1, 2017 ?
<input type="checkbox"/> Yes <input type="checkbox"/> No

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: (_____) - _____
Did this partner also operate land individually on December 1, 2017 ?
<input type="checkbox"/> Yes <input type="checkbox"/> No

Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: (_____) - _____
Did this partner also operate land individually on December 1, 2017 ?
<input type="checkbox"/> Yes <input type="checkbox"/> No

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Section 1 - Hogs and Pigs Owned

1. On **December 1**, did this operation (named on label) **own** any hogs or pigs, regardless of location? (Include hogs or pigs being raised under contract for you by someone else.)

Yes - [Go to **item 2**.]

No - Did this operation **own** hogs or pigs at any time from **September 1** through **November 30, 2017**?

Yes - [Go to **item 8** on page 5.]

No - Were any hogs or pigs **owned** by someone else on this operation on **December 1**?

Yes - [Go to **item 11** on page 6.]

No - Were any hogs or pigs slaughtered **for consumption by this operation**, regardless of ownership, during 2017?

Yes - [Go to **item 12** on page 6.]

No - [Go to **Section 2** on page 7.]



2. How many sows and gilts for breeding were **owned** by this operation on **December 1**? (Include unweaned gilts intended for breeding.)

Number Owned December 1
301

a. How many of the [item 2] sows and gilts are **expected** to farrow during **December 2017, January or February 2018**?

331

b. How many of the [item 2] sows and gilts are **expected** to farrow during **March, April or May**?

332

3. How many boars and young males for breeding were **owned** by this operation on **December 1**? (Include unweaned boar pigs intended for breeding.)

302

4. Of the hogs and pigs for **market** and **home use owned** by this operation on **December 1**, how many were in each of the following four weight groups? (Exclude breeding hogs and pigs reported in [item 2] or [item 3].)

a. Under 50 pounds? (Include unweaned pigs intended for market or home use.)

315

b. 50 - 119 pounds?

316

c. 120 - 179 pounds?

313

d. 180 pounds and over? (Include sows and boars no longer used for breeding.)

314

5. [Add Items 2 + 3 + 4a + 4b + 4c + 4d and verify the total. If necessary, make corrections before continuing.]

300

Then the **total** hogs and pigs **owned** by this operation on **December 1** was:

=

Section 1 - Hogs and Pigs Owned (continued)

Inventory Values for Hogs and Pigs on Hand on December 1, 2017

6. What is the average value per head of the following [Report to nearest dollar.]

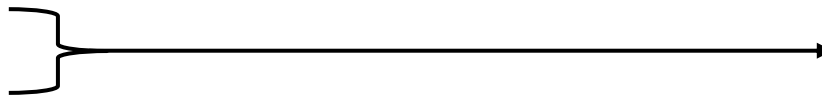
a. Sows and gilts used and to be used for breeding?	\$ per Head	304
b. Boars used and to be used for breeding?	\$ per Head	305
c. Market hogs and pigs for each of the following four weight groups?		
(i) Under 50 pounds? (Include unweaned pigs intended for market or home use.)	\$ per Head	307
(ii) 50 – 119 pounds?	\$ per Head	308
(iii) 120 – 179 pounds?	\$ per Head	309
(iv) 180 pounds and over? (Include sows and boars no longer used for breeding.)	\$ per Head	310

Out-Of-State Hogs and Pigs

7. Did this operation own any hogs or pigs in another State on **December 1**?

¹ **Yes** - [Enter code 1.]

³ **No** - [Enter code 3.]



Code
321

[If Yes, verify this report includes ONLY hogs owned in this State.]

Section 1 - Hogs and Pigs Owned (continued)

Farrowings and Pig Crop from September 1 through November 30, 2017

8. Did any sows or gilts **owned** by this operation farrow during the last three months? (**September - November**)

Yes - [Complete the following for each month starting with the most recent month.]

a. How many sows and gilts **owned** by this operation farrowed during (month)?

b. How many of the pigs from these (**Item 8a**) litters were:

(i) **owned** by this operation on **December 1**?

(ii) **sold** or **slaughtered** before **December 1**?

No - [Continue.]

Farrowings		
November Sows	October Sows	September Sows
888	891	894
Pig Crop		
November Pig Crop	October Pig Crop	September Pig Crop
889	892	895
890	893	896

Section 1 - Hogs and Pigs Owned (continued)

Death Loss from September 1 through November 30, 2017

9. How many weaned pigs and older hogs **owned** by this operation died during **September, October, and November 2017**? 335

Contract Hog and Pig Production

10. Were any hogs or pigs **owned** by this operation being **raised under contract** by another person or firm on **December 1**? 336
 Yes - [Continue.] **No** - [Go to **item 11**.]

a. How many **producers** were raising hogs or pigs for you under contract on **December 1**? 317

b. How many hogs and pigs (**owned** by this operation) were these **[item 9a]** producers raising for you under contract on **December 1**? 333

[Verify that these hogs and pigs ARE included in the total (item 5 on page 3), then continue.]

11. Were any hogs or pigs **owned** by someone else on this operation on **December 1**? 323
 Yes - [Continue.] **No** - [Go to **item 12**.]

a. How many hogs and pigs **owned** by someone else were on this operation on **December 1**? 322

b. Who owns the hogs and pigs?

c. Is this hog owner a **contractor**?

Yes **No**

[Verify that these hogs and pigs ARE NOT included in item 5 on page 3.]

d. Will the operator on the label **own** hogs or pigs at any time between now and **June 1, 2018**?

Yes **No**

(Owner's Name, Address, & Phone Number)

Name _____

Address _____

City, St., ZIP _____

Phone _____

324

Slaughter for Consumption by this Operation (regardless of ownership)

Total

12. During 2017, how many hogs and pigs were custom slaughtered at commercial establishments **for consumption by this operation**? 881

13. During 2017, how many hogs and pigs were slaughtered on this operation **for consumption by this operation**? (**Include** mobile slaughtering. **Exclude** custom slaughter at commercial establishments.) 880

• [Complete Section 2 only if the operation shown on the label DOES NOT own hogs or raise hogs under contract, otherwise go to Section 3 on page 8.]

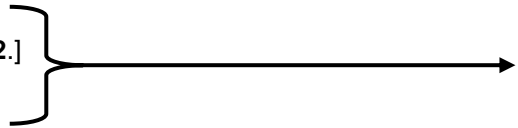
Office Use - Completion Code - Hog Presence	1 - Incomplete, Hogs Present	499
	2 - Incomplete, Unknown Presence	
	3 - Valid Zero	

Section 2 - Intentions to Own or Raise Hogs

• [Complete Section 2 only if the operation shown on the label DOES NOT own hogs or raise hogs under contract, otherwise go to Section 3 on page 8.]

1. Will the operator on the label raise hogs or pigs on this operation at any time between now and June 1, 2018?

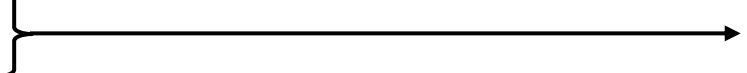
- Yes** - [Enter **code 1**, then go to **Section 3**.]
- Don't Know** - [Enter **code 2**, then continue with **item 2**.]
- No** - [Enter **code 3**, then continue with **item 2**.]



Code
492

2. Does this operation (named on the label) own and operate any buildings, structures, or facilities for raising hogs or pigs? (Such as buildings used for breeding, farrowing, finishing, etc.)

- Yes** - [Enter **code 1** and continue.]
- No** - [Enter **code 3** and continue.]



Code
488

3. Has this operation sold, rented, or turned over any hog facilities to someone else?

- Yes** - [Continue.] **No** - [Go to **item 5**.]

4. Who is using the hog facilities now?

[Enter the name and address of the person or firm now using the facilities.]

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

[Write a note to describe the current status of this operation, then continue with **Section 3**.]

5. Was the operator (name on label) operating a farm or ranch on December 1, 2017? (Including growing crops or raising livestock.)

- Yes** **Don't Know** **No**

Section 3 - Conclusion

1. Do you (the operator named on the label) make any day-to-day decisions for another hog operation?

- Yes** - What is the name of the other hog operation(s)?
- No** - [Continue.]

Operation Name : _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: (____) _____

COMMENTS

2. **Survey Results:** To receive the complete results of this survey on the release date go to www.nass.usda.gov/Surveys/Guide_to_NASS_Surveys/

Would you rather have a brief summary mailed to you at a later date?

Yes **No**

9990

Respondent Name:	9911 Phone:	9910 MM DD YY Date:
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Thank you for your help

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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			
									_____ - _____ - _____ - _____			
									Optional Use			
									9907	9908	9906	9916
S/E Name												