

AG YIELD SURVEY - JUNE 2025

OMB No.0535-0213
Approval Expires: 3/31/2027
Project Code: 128
SurveyId:3629 Version 26



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

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.

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 0535-0213. 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.

Office Use Only	FIPS	POID	Tract	Subtr.
	__ __	__ __ __ __ __ __ __ __	__ __	__ __

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. WINTER WHEAT

		TOTAL CROP	
a. Harvested and to be harvested (grain and seed only).....	Acres	<div>541</div>	
b. Expected yield for grain and seed.....	Bu. per Acre	<div>151</div>	
c. Has harvest been completed?..... Yes = 1 No = 3		<div>980</div>	

CONTINUE ON BACK

SECTION 2: CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: (_____) _____ ☐ Check if cell phone.

2. Survey Results:

Operator Email:

Operator Phone:

9929	Check to receive results by email <input type="checkbox"/>	9918 (_____) _____	Check if cell phone <input type="checkbox"/>
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Operation Email: (if different from above)

Operation Phone: (if different from above)

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

Respondent Phone: (if different from above)

9912	9911 (_____) _____	Check if cell phone <input type="checkbox"/>	9910 MM DD YY Date: — — — —
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This completes the survey. The results will be available on the release date at: nass.usda.gov/results.
Thank you for your help.

Office Use	9909	916
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OFFICE USE ONLY												
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 — — — — - — — — - — — — —			
							R. Unit		Optional Use			
							9921		9907	9908	9906	9916
S/E Name												