

A2		PART I.—AGRICULTURAL OPERATIONS (If "Yes" for any columns 3 to 8, skip to col. 9. If "No" for all columns 3 to 8, fill 12 and 15.)										Part II.		Part II.—SOURCE OF INFORMATION, ETC.—Continued					Date completed (Enter date only after you have answered all questions and have completed an A1 if required.)	Callback information and remarks	Line number											
Line number	Name of road, etc.	Does this person or any member of his household operate a farm (or ranch)?		Any hogs, cattle, sheep, or goats?		Any crops such as corn, oats, hay, or tobacco?		20 or more chickens, turkeys, and geese?		20 or more fruit trees, grape-vines, and planted nut trees?		Any vegetables, berries, nursery or greenhouse products grown for sale?		Does this person have agricultural operations where he lives? ("Yes" in any col. 4 to 8 indicates agricultural operations)		Does this person live in your ED?		Person from whom information was obtained				Is an A1 to be filed? Fill A1 if— (a) "Yes" in col. 9 & "Yes" in col. 10 or (b) "No" in col. 9 & "No" or "Yes" in col. 10		Are Sections VIII through XIII on A1 to be filed? (Fill column 14 only after filling Section VII on the A1) (c) Mark X on the basis of entry for question 11 on A1 in the proper square below. (d) Fill Sections VIII through XIII of A1 if you have placed X in shaded square.					(16)			
		(1)	(2)	(3)		(4)		(5)		(6)		(7)		(8)		(9)		(10)		(11)		(12)		(13)		(14)					(15)	
281		No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Person on line _____ Name _____	No	Yes												321
282																		Person on line _____ Name _____														322
283																		Person on line _____ Name _____														323
284																		Person on line _____ Name _____														324
285		No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Person on line _____ Name _____	No	Yes	Under 30	30-99	100-299	300-999	1,000 & over							325
286																		Person on line _____ Name _____														326
287																		Person on line _____ Name _____														327
288																		Person on line _____ Name _____														328
289																		Person on line _____ Name _____														329
290		No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Person on line _____ Name _____	No	Yes	Under 30	30-99	100-299	300-999	1,000 & over							330
291																		Person on line _____ Name _____														331
292																		Person on line _____ Name _____														332
293																		Person on line _____ Name _____														333
294																		Person on line _____ Name _____														334
295		No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	Person on line _____ Name _____	No	Yes	Under 30	30-99	100-299	300-999	1,000 & over							335
296																		Person on line _____ Name _____														336
297																		Person on line _____ Name _____														337
298																		Person on line _____ Name _____														338
299																		Person on line _____ Name _____														339
300																		Person on line _____ Name _____														340

FIGURE 9.—A2 listing form.

THE ENUMERATION