UNITED STATES DEPARTMENT OF AGRICULTURE
Farm Service Agency
Washington DC 20250

Notice BU-691

For: State and County Offices

Instructions for Completing FY 2006 FSA-467,
Shared Management Operations and Workload Reporting (BU-546R)

Approved by: Acting Deputy Administrator, Management

Dennis J. Tarantino

1 Overview

A Background

3-BU, paragraph 33, Exhibit 12 requires State Offices to prepare a consolidated FSA-467.

B Purpose

This notice:

- provides a schedule for State Offices to submit annual FSA-467's for FY 2006
- provides a schedule for State Offices to submit monthly FSA-467 updates for FY 2006
- provides instructions for completing FSA-467
- instructs State Offices to **only** use FSA-467 dated 6-04-04.

2 Reports

A FSA-467's

FSA-467's are used by BUD and DAFO to:

- update shared management and County Office combination tables
- update County Office workload reports
- prepare annual reports for OMB and congressional inquiries
- track County Office relationships and the effect on COC structures.

Disposal Date	Distribution
November 1, 2006	State Offices; State Offices relay to County Offices

2 Reports (Continued)

B Consolidated FSA-467

Consolidated FSA-467's are required annually for **all** County Offices. Do **not** report pending or temporary changes. Follow instructions in Exhibit 1 to prepare FSA-467's (see subparagraph D for due dates). FAX FSA-467's (6-4-04 version **only**) to both BUD and DAFO according to subparagraph E.

Note: BUD will schedule the consolidated FSA-467's for FY 2007 in October 2006.

C Monthly FSA-467's

Monthly FSA-467's are required **only** if there are changes from the last FSA-467. See subparagraph D for due dates.

Note: Only County Offices with permanent changes in shared management or closed/part-time combinations should be listed on monthly FSA-467's. Do **not** report pending or temporary changes. Negative reports are **not** required.

FAX FSA-467's to BUD and DAFO (see subparagraph E).

D Reporting Schedule

This table provides due dates for consolidated and monthly FSA-467's.

Month	Due Date	Report Type
October - March	April 17, 2006	Consolidated
April	May 15, 2006	Monthly
May	June 15, 2006	Monthly
June	July 17, 2006	Monthly
July	August 15, 2006	Monthly
August	September 15, 2006	Monthly
September	October 16, 2006	Monthly

E Contact and FAX

If you have any questions contact either of the following:

- Deborah Johnson at 202-720-0067
- Bob Flores at 202-720-9068.

FAX completed FSA-467 to both of the following:

- Deborah Johnson, DAFO, at 202-720-5900
- Bob Flores, BUD, at 202-690-0591.

Instructions and Example of FSA-467

Complete FSA-467's according to the following instructions.

Item/ Column	Instruction
1	Enter State name.
2	Enter date.
3	Enter FY.
4	Enter report month.
A	Enter in **alphabetical** order the names of all the County Offices.
B	Select the appropriate check box corresponding to County Office type (see legend for description of office types). Definitions for shared management sub-offices and combined/closed are as follows: **Shared Management Sub-Office (SMSO) Definition** • SMSO is open full-time. • CED manages 1 headquarter County Office and 1 or more full-time SMSO. • SMSO does not have a full-time CED physically located in the office. • Each SMSO operates independent of the headquarter office (other than administrative). • Each office maintains its own separate COC. **Combined/Closed Office (CCO) Definition** • CCO has 1 corresponding headquarter office which remains open full-time. • CCO is un-staffed, part-time or closed. • All producer records are maintained at the headquarter office. • Corresponding workload reporting office is either the headquarter office or SMSO office. • Has only 1 COC representing the headquarter and the closed/combined County Offices.
C	Enter office name of the County Office where producer records are maintained.
D	Enter county name of the corresponding workload reporting office. Leave entry blank if the office type is "N" (non-agricultural county). Non-agricultural counties do **not** have a corresponding headquarter county.
E	Enter County Office name of the corresponding headquarter office. Leave entry blank if the office type is "N" (non-agricultural county). Non-agricultural counties do **not** have a corresponding headquarter county.
F	Enter effective date for all new shared management, closed, or workload reporting changes.
G	Check box to identify office status. Make a selection for all full-time and part-time offices. A part-time office is an office: • with regularly established office hours less than 40 hours per week • with no full-time staff • with no System 36 • that reports workload through the corresponding headquarter or SMSO office.
5	Add comments, if any, to explain details.
6	Enter the name of the person preparing the report.
7	Enter the date the report was prepared.
8	Enter the telephone number of the person preparing the report.

Instructions and Example of FSA-467 (Continued)

The following is an example of a completed FSA-467.

This form is available electronically.

FSA-467
(6-4-04)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

SHARED MANAGEMENT OPERATIONS AND WORKLOAD REPORTING

REPORT NO. BU-546R

1. STATE: Alwaysontime
2. CURRENT DATE *(MM-DD-YYYY)*: 05-06-2006
3. FISCAL YEAR: 2006
4. MONTH: April

Instructions: Send FSA-467 to the Director, BUD, through DAFO, by ***the 10th workday of each month.*** *Negative reports are* ***not*** *required from State Office when there are no changes.*

A. COUNTY NAME	B. 1/ COUNTY OFFICE TYPE *(select one only)*				C. RECORD MAINTENANCE BY	D. WORKLOAD REPORTING OFFICE	E. ADMINISTRATIVE HEADQUARTERS	F. EFFECTIVE DATE *(MM-DD-YYYY)*	G. 2/ OFFICE STATUS *(select one only*	
	H	S	C	N					FT	PT
Adams	X				Adams	Adams	Adams	04-21-2006	X	
Buchanan		X			Buchanan	Buchanan	Adams	04-21-2006	X	
Carter			X		Buchanan	Buchanan	Adams	04-21-2006		
Chester				X				04-21-2006		
Coolidge		X			Coolidge	Coolidge	Jefferson	04-21-2006	X	
Eisenhower	X				Eisenhower	Eisenhower	Eisenhower	04-21-2006	X	
Ford			X		Buchanan	Buchanan	Adams	04-21-2006		X
Garfield			X		Buchanan	Buchanan	Adams	04-21-2006		
Grant		X			Grant	Grant	Jefferson	04-21-2006	X	
Grover			X		Grant	Grant	Jefferson	04-21-2006		
Harding			X		Washington	Washington	Washington	04-21-2006		
Jefferson	X				Jefferson	Jefferson	Jefferson	04-21-2006	X	
Washington	X				Washington	Washington	Washington	04-21-2006	X	

5. COMMENTS:

6. Prepared by	7. Date Prepared *(MM-DD-YYYY)*	8. Telephone Number *(Include Area Code)*	1/ **Office Type Legend:**	2/ **Office Status Legend:**
P.S.Topnotch	05-06-2006	555-555-5555	H = Administrative HQ S = Shared / Sub C = Combined / Closed N = Non-Agricultural	PT = Part Time FT = Full Time

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