

# CROP DISTRICT & 100-BUSHEL HARVEST FORM



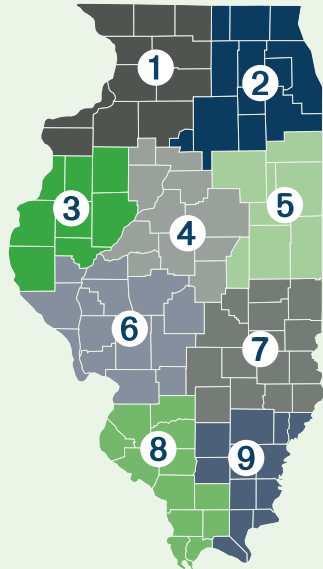
ISA CHECKOFF PROGRAM

*This form must be completed on or before November 15.*

Complete and submit this form electronically to [YieldChallenge@ilsoy.org](mailto:YieldChallenge@ilsoy.org)  
*(All fields are required)*

## CROP DISTRICT (Check One)

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9



**100-BUSHEL CHALLENGE**  
(Optional)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Farm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

County of Field Location \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Sponsor Name\* \_\_\_\_\_

Sponsor Phone\* \_\_\_\_\_ Sponsor Email\* \_\_\_\_\_ *\*If applicable*

## PLANTING INFORMATION

Seed Brand \_\_\_\_\_ Variety \_\_\_\_\_

Variety Maturity Group \_\_\_\_\_ Planting Date \_\_\_\_\_ Planting Population \_\_\_\_\_

Row Width (inches) \_\_\_\_\_ Irrigated  YES  NO

Previous Crop (2015) \_\_\_\_\_ Previous Crop (2016) \_\_\_\_\_

Seed Inoculant  YES  NO

Seed Fungicide  YES  NO

Seed Insecticide  YES  NO

Seed Nematicide  YES  NO

Other Seed Treatment Product  YES  NO

Product: \_\_\_\_\_

Product: \_\_\_\_\_

Product: \_\_\_\_\_

Product: \_\_\_\_\_

Product: \_\_\_\_\_

## WEED CONTROL

Burndown Herbicide Used  YES  NO

Pre-emerge Herbicide Used  YES  NO

Post-emerge Herbicide Used  YES  NO

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

## FERTILITY

Fall Application  YES  NO

Spring Application  YES  NO

Starter or Pop-up  YES  NO

Top Dress or Side Dress  YES  NO

Foliar Application  YES  NO

Manure Applied to Field  YES  NO

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

Product(s): \_\_\_\_\_

## FOLIAR INSECT CONTROL

Foliar Insecticide Used

YES  NO

Product(s): \_\_\_\_\_

## FOLIAR DISEASE CONTROL

Foliar Fungicide Used

YES  NO

Product(s): \_\_\_\_\_

## TILLAGE PRACTICE

Strip Till or No Till

Fall

Spring

Fall + Spring

Please describe tillage practice: \_\_\_\_\_

## CALCULATION OF HARVESTED ACRES *(2 acres harvest minimum)*

Harvest Date \_\_\_\_\_

1) Calculate harvest area: Length \_\_\_\_\_ x Width \_\_\_\_\_ ÷ 43,560 (ft<sup>2</sup>/acre) = \_\_\_\_\_ acres harvested

Example: 1000' x 105' ÷ 43,560 = 2.410 acres

2) Record lbs. of grain harvested at harvest moisture: \_\_\_\_\_ Example: 7,800 lbs

3) Correct for moisture: [(100 - \_\_\_\_\_ % harvest moisture)/(100-13%)] x lbs of grain harvested \_\_\_\_\_ = lbs of grain at 13% moisture

Example: 7,800 lbs of grain at 16% moisture

$[(100-16)/(100-13)] \times 7,800 \text{ lbs} = 7,531.034 \text{ lbs of grain at 13\% moisture}$

4) Lbs. of grain weighed \_\_\_\_\_ ÷ 60 lbs/bushel = \_\_\_\_\_ bushels

Example: 7,531.034 lbs ÷ 60 = 125.517 bushels

5) Bushels of grain \_\_\_\_\_ ÷ harvested area \_\_\_\_\_ = bushels per acre

Example: 125.517 bushels ÷ 2.410 acres = 52.08 bushels per acre

## CERTIFICATION

\_\_\_\_\_  
Producer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Name of Approved Verifier\*

\_\_\_\_\_  
Signature of Approved Verifier\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Name of second Approved Verifier\*

\_\_\_\_\_  
Signature of second Approved Verifier\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone

**\*If you are in the District Yield Challenge, you need only one verifier from the list of Approved Verifiers.**

**If you are in the 100-Bushel Challenge, you need a second official Verifier provided by ISA. Verifiers need to sign the harvest form.**

**If you have questions, call or email Dan Davidson, Yield Challenge Coordinator, at (309) 533-8085 or [YieldChallenge@ilsoy.org](mailto:YieldChallenge@ilsoy.org).**