ACTIVITY REPORT
(DUE January 31 of each year.)

______________________________  County, 20______

Month and year weed superintendent started in this position: ________________________________

For the preceding year, indicate the following:

1. Control authority employees:
   a. Number of weeks weed superintendent was employed full-time as a weed superintendent.......................________
   b. Number of part-time or seasonal personnel employed annually. .................................................................________
   c. Number of full-time personnel. ..................................................................................................................________
   d. Percent of time weed superintendent spent on required noxious weed activities........................................________%

2. County noxious weed budget:
   a. Actual total weed budget spent for the previous fiscal year. .................................................................$________
   b. Total weed budget most recently adopted and approved (total requirements) .............................................$________
   c. Tax dollars required for weed control for last fiscal year ........................................................................$________

3. Public relations and education:
   a. Number of public education and informational meetings presented by the control authority......................________
   b. Number of noxious weed articles published based on information provided by the control authority ..........________
   c. Number of radio interviews conducted by the control authority regarding noxious weeds ......................________
   d. Number of informational letters or brochures distributed by the control authority regarding noxious weeds ..________
   e. Number of events that informational noxious weed displays were presented by the control authority ........________

4. Number of inspections completed and documented with appropriate inspection reports  (Spring)  (Fall)
   a. Annual noxious weed inspection ..............................................................................................................________  ________
   b. Special noxious weed inspection ..............................................................................................................________  ________
   c. Complaint noxious weed inspection ........................................................................................................________  ________
   d. Follow-up noxious weed inspection ........................................................................................................________  ________
   e. Crop inspections ..............................................................................................................................................________  ________
   f. Article inspections ..............................................................................................................................................________  ________

5. Noxious weed notification and enforcement:
   a. Number of reports received concerning uncontrolled noxious weed infestations (includes landowner complaints
      and Nebraska Department of Agriculture (NDA) reports) ............................................................................________
   b. Number of requests made to individuals or other entities to control noxious weeds (excluding official notices). ..........________
6. **Official 15-day notice results:**
   a. Number of 15-day notices issued .................................................................
   b. Number of 15-day notices which achieved acceptable compliance prior to notice expiration ..................................
   c. Number of notices prosecuted .....................................................................
   d. Dollar value of fine notices collected ...........................................................
   e. Number of 15-day notice disposition reports completed ..........................

7. **Official 10-day notice results:**
   a. Number of 10-day notices issued .................................................................
   b. Number of 10-day notices which achieved acceptable compliance prior to expiration ..................................
   c. Number of parcels force controlled by the county ........................................
   d. Number of parcels force controlled by contractors ....................................
   e. Total number of acres force controlled ......................................................
   f. Total number of liens filed for nonpayment ................................................
   g. Total number of 10-day notice disposition reports completed ..................

8. **Weed Superintendent Education and Training:**
   a. Number of regional Nebraska Weed Control Association (NWCA) meetings attended ........................................
   b. Number of state NWCA meetings, workshops, or seminars attended .........
   c. Number of university, state, or federal information or training sessions attended ..........................................
   d. Number of private industry training sessions attended .............................
   e. Other (list number of sessions attended) ......................................................

9. **Number of meetings weed superintendent held or attended with (other than those listed above):**
   a. Control authority ..........................................................................................
   b. County attorney ..........................................................................................
   c. District NDA inspector ..............................................................................
   d. Railroad officials ......................................................................................
   e. Road departments ....................................................................................
   f. Municipalities .........................................................................................
   g. Federal officials ......................................................................................
   h. Other or miscellaneous ...........................................................................

County Weed Superintendent Signature _______________________________ Date __________

Control Authority Chairperson/President Signature ___________________ Date __________