

Contact person: Help desk (contact centre) / Phone: 6259 300 / E-mail: klienditugi@stat.ee / Postal address: Vabaduse plats 2, 71020 Viljandi

Statistical activity code: 20405

## Price of the means of agricultural production. Veterinary products

Write in the questionnaire the unit price of the goods sold, exclusive of VAT and expenses added to the price such as transport etc. cost. If the same good has been sold in the reference period at different prices depending on the quality, quantity, agreement with buyer, etc., write in the questionnaire the weighted average price. If the price of goods differs significantly from the previous month's price, please provide in the remark field a short description of the reasons for the price change (so that we do not have to contact you). The list of goods is amended only when sale of the goods concerned has been terminated; in that case, this good is replaced by another one as similar as possible. If goods from the same group of goods not listed in the questionnaire have been sold in large quantities, write the name, unit of measurement and unit price of the goods in the vacant row.

Questionnaire code: 12622023	Submitted in: By 5th date after the end of the reporting month
Period:	Periodicity: Monthly

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# Statistics Estonia guarantees the full protection of data submitted.

Economic unit Registry code: Name:	E-mail: Phone:
Postal address County: City / Rural municipality: Village / Town / City district: Secondary address unit:	Street: Building: Apartment: Postal code:
Economic activity in the sample	
Completed by Personal ID code: Firstname and surname:	E-mail: Phone:
Completed on (date):	Signature:

## A. VITAMINS AND MEDICAMENTS

		Unit price, euros (rounded to sents)	Remark (filled in if necessary)
		1 ′	2
Metabolase 500ml N1	<u> </u>		
Vitamin E + Selen vet 100ml N12	C_105		
Vitamin AD3E bela-pharm 100ml N1	C_106		
Cefaximin-L Antimastitic Ointment 5ml N12	C_202		
Pen & Strep 100ml N1	C_205		
Pen-Strep 100ml N1	C_205		
Fatroximin iu tabl N36	C 206		
Metricure iu susp N10	C_207		
Fatroximin iu foam I N6	C_208		
Suiseng inj susp 50D N1	C 210		
Caremast vet N20	C_215		
Procapen Injector 10ml N24	<u>C_216</u>		
Shotapen inj 100ml N1	C_217		
Deltanil 1000ml N1	C_218		
Bimectin pasta 6,42g N1	<u> </u>		

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#### **B. OTHER VITAMINS AND MEDICAMENTS**

If you want to add important vitamins or medicaments missing in Table 1. Vitamins and medicaments from the list, use Table 2. Other vitamins and medicaments.

	Name of goods	Unit of measurement	Unit price, euros (rounded to sents)	Remark (filled in if necessary)
	1	2	3	4
1				
2				
3				
4				
5				

# C. TIME SPENT ON FILLING OUT THE QUESTIONNAIRE (incl. for preparing the data; only for April)

Please estimate how much time you spent on filling out the questionnaire (incl. time spent on reading the instructions, collecting and preparing data). Record the total time spent by all employees.

	Hours	
Time spent		
For example, if it took 1.5 hours, i.e. 90 minutes, to fill in the		
questionnaire, enter 1 on the hours row and 30 on the minutes row.		

#### Y2. Overall assessment on the questionnaire

Please give an overall assessment on completing the questionnaire. 20 - Easy 30 - Average (neither easy nor difficult) 40 - Difficult		Answer
50 - Very difficult	Please give an overall assessment on completing the questionnaire.	20 - Easy 30 - Average (neither easy nor difficult)

## Y3. Suggestions and comments

COMMENT