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Note: The facsimiles of the questionnaires illustrated in this appendix are examples of those used in the 1992 Economic Census.

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ORM NC	-9901 (Item 5A) (9902) 1992   REF	ECON PORT O			ENS	USES	REAU OF THE C	CENSUS Rofe CEN	ny co	his FILE N rrespon g to thi	ndenc	ce 🔨 .
> Item	5A - ESTABLISH	MENTS	OF YOU	JR CO	MPAN	NY AND IT	S SUB81	DIARIES, A	ND TI	IEIR 19	92 EN	MPLOYMENT AND PAYROLL
YOUF REPO conve Emple this lit	ITEM SHOULD INCLUD R COMPANY AND ITS 3 PRTS ARE NOT REQUIR enience the prelisted es oyer Identification Num st up to date as follows olumn (a) — Correct an	SUBSIDIA ED FOR TI tablishme ber, major :	RIES FOR HE 1992 nts have activity,	WHICH ECONO been gro and geo	I SEPAR MIC CE ouped in ographic	RATE ESTAE INSUSES. Fo In the followi Clocation. Pl	BLISHMENT or your ing sequenc lease bring	ea es e: da • Co	ch esta tablish ita for e olumm (	blishmen nents. If ach estal (c) — Rep	t (includ book fig blishmer bort stat	Hishment data — Report number of employees and payroll ding part-year operations). Please do not combine data for igures are not available for providing employment and payrol ant, please provide your best estimates. atus of each establishment as of the end of 1992. Ind instructions on the reverse side before completing this ite
Line No.	Er establishment name Add store or plan	ar	s of <b>phys</b> nd major <i>if any, an</i>	activity	cation ( /	including Z		employ each esta	rt the n ees and iblishm year op	umber of I payroll I ent (inclu erations)	for ding	Status of establishment at end of 1992 Mark (X) one box and complete as indicated
J	Employer 1D number	Maior ac	(a)					<b> </b>	(b) 1			(c)
	Name					Employees (during pay pay Including March 12, 19	1	(Numl	oer)	1     In operation       2     Idle or inactive (but still owned) →       3     Closed (no new owner or operator), dismantled, or destroyed on →		
								<u> </u>	Mil.	Thou.	Dol.	4 Sold or leased to another
ļ	Physical location - N	imber and	street			Store or pla	ant number	Payroll for 1st quarter of 1992 before				AND enter name, etc., below
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									Mil.	Thou.	Dol.	4 Sold or leased to another
ļ	Provide and the second second					Store or pla	ant number	Payroll for 1st quarter of 1992 before				operator       – Give date at right         AND enter name, etc., below         Name of new owner or operator
1	Physical location - Nu	imber and	street					deductions				
	City			S	State ZIP			Total				Number and street
ensus use	Census file number	то	IND		TAB		WT	payroll for 1992 before				City State ZIP Co
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	Employer ID number	Major ac	tivity	•				Employees (during pay pa	rind	(Numt	per)	1 In operation 2 Idle or inactive (but still owned) Month Yea

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	Physical location - Num	har an	detreat			Store or pla	nt number	Payroll for 1st quarter of 1992 before	Mil.	Thou.	Dol.	A Sold or leased to another operator - Give date at right AND enter name, etc., below 7 Name of new owner or operator
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	Name	lajor a						Employees (during pay p- including March 12, 19		(Numb	ier)	1     In operation       2     Idle or inactive (but still owned) - Month       3     Closed (no new owner or operator), dismantled, or destroyed on
									Mil.	Thou.	Dol.	4 Sold or leased to another
						Store or pla	nt number	Payroll for 1st quarter of 1992				operator – Give date at right AND enter name, etc., below
		ber and	d street					before deductions				Name of new owner or operator
	City				State	ZIP		Total				Number and street
	Census file number	то	IND		TAB		WT	peyrolt for 1992 before				City State ZIP Code
		sc	TE	ccs	NID			deductions				s 🖸 Other – <i>Describe</i> –
	Employer ID number N	lajor ac	ctivity					Employees (during pay po including	boing	(Numb	er)	1 ☐ In operation 2 ☐ Idle or inactive (but still owned) → Month Year
ł	Name							March 12, 19	92)			3 🔲 Closed (no new owner or operator),

2 tor State ZIP Code 1) --- Month ch 12, 1992) ator), lame Closed (no new owner or oper dismantled, or destroyed on -4 Sold or leased to another operator – Give date at right AND enter name, etc., below <sub>2</sub> MH. Thou. Dol. Payroll for 1st quarter of 1992 before deductions Store or plant number Physical location Number and street Name of new owner or operator

Total annual payroli for 1992 before deductions

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TAB

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Census file number

State ZIP Code

Number and street

5 🗌 Other – Describe –

City

Per	age of page
FORM NC-9901 (item 5B)       U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS       PLEASE ENTER YOUR CENSUS FILE NUMBER SREPORT OF ORGANIZATION	
Item 58 LISTING OF ADDITIONAL ESTABLISHMENT(S) AND/OR NEW PLANT(S) UNDER CONSTRUCTION OPERATED BY YOUR COMPANY AND ITS SUBSIDIARIES	
<ul> <li>Column (a) – List separately any establishments of your company and its subsidiaries that are not accounted for in item 5A or on other report forms in this mailing package, but were in operation or any new plents under construction during part or all of 1992.</li> <li>For sequired establishments that you list, complete item (e).</li> <li>For new plent(a) under construction or all other establishments that you list, complete item (f).</li> <li>Column (b) – Complete this column for each listed establishment.</li> <li>Column (c) – Mark (X) the box which best describes the activity of each establishment. See box codes at right.</li> <li>Column (d) – Describe major activity or list principal products or services.</li> <li>MOTE: Additional copies of item 5B are available upon request to Bureau of the Census, 1201 East 10th Street, Jeffersonville, IN 47134-0001. If you prefer, you may use your own paper to list additional establishments; in such instances, however, please follower of the census, 1201 East 10th Street, Jeffersonville, IN 47134-0001. If you prefer, you may use your own paper to list additional establishments; in such instances, however, please follow</li> </ul>	
Important DO NOT DUPLICATE ESTABLISHMENTS ALREADY PRELISTED IN ITEM 5A	
Line your store or plant number, if any, and address of <b>physical</b> location (including ZIP Code) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	ss activity in 1992 cription of major activity or ncipal products or services (d)
Employer Identification number       -       -       Employees       (Number)       1       10         Name       Store or plent number       -       -       -       -       -       1       10         Physical location Number and street       -       -       -       -       -       -       1       10       -         Physical location Number and street       -	
City     State     ZIP Code     before       deductions     7     16       deductions     8     17       (e) Name and address of former     8     17       owner or operator and date of     9     18       purchase     1982 before     1982 before	
Name and address of former owner or operator Month Year deductions Constructions	FORM
(f) Date establishment opened or is expected to open and expected employment         Month         Year         Expected employment         Census only         TAB         WT         CCS         OID	
Employer Identification number         Employers       (Number)         Name       Store or plant number       Giving per period including March 12, 1982)       1       10         Physical location Number and street       Payroll for 1st quarter of 1992       Mil.       Thou.       1       10         City       State ZIP Code       State ZIP Code       State Code       7       16         (e) Name and address of former owner or operator and date of purchase       Total annual payroll for       8       17	
Name and address of former owner or operator Name and address of former owner or operator Name and address of former owner or operator ISC ITO IND	FORM
Census         Census           (f) Date establishment opened or is expected to open and expected employment         Month         Year         Expected employment         Use only         TAB         WT         CCS         OID	
Employer Identification number       -       Employees feduring pay period including pay pay period including pay pay period including pay pay period including pay period including pay pay pay period including pay	
purchase         payroli for           Name and address of former owner or operator         Month         Year         deductions	
Image: Construction of the stabilishment opened or is expected to open and expected to open and expected employment     Month     Year     Expected employment     Census file number     SC     TO     IND       Consusting of the stabilishment opened or is expected to open and expected to open and expected to open and employment     Month     Year     Expected employment     TAB     WT     CCS     OID	FORM
Employer Identification number       -       -       Employes       (Number)         Name       Store or plant number       -       -       -       1       10         Physical location       Number and street       -       -       -       -       -       -         Physical location       Number and street       -	
City         State         ZIP Code         Defore deductions         6         15         7         16           (e) Name and address of former         8         17         16         17         17         16	
owner or operator and date of purchase     Total annual payroll for     9     18       Name and address of former owner or operator     Month Year     deductions	
(f) Dete establishment opened Month Year Expected employment use	FORM

	U.S. DEPARTMENT O BUREAU OF THE CENSU		1992 EC	CON	0	міс	CEN	sus	ES (	CLASSIFIC	CATION	I REPORT
OF THE	FORM NC-992	6		Г	_				OME	3 No. 0607-0742:	Approval E	xpires 06/30/94
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	Census use only											
			(P)	10000		rroot on		r in na		address, and Z	IR Code)	
YOUR RE	ESPONSE IS REQUI	IRED BY LAW.					,		-	-		ve this
CONFIDE	E <b>NTIAL.</b> It may be se dents' files are immu	een only by Cer	nsus Bureau employ	ees an	nd r	may be i	ised or	ly for s	statisti	ical purposes. Fu	irther, copie	s retained
	MPLOYER IDENT nployer Identificati			hal the			the o		d for	thic actabliche	ant on	
its latest	1992 Employer's (	Quarterly Fed	eral Tax Return, Tr	reasur	ry I	Form 94	1?					
094 1 🗌 Yes	2 🗌 No – <i>Re</i> El	port current number (9 digits	;)		_							
Item 2 – Pl A	HYSICAL LOCAT nswer items a, b	ION OF EST.	ABLISHMENT -	k	b.	ls this e legal be	establi ounda	shmer ies of	t phy the c	vsically located ity, town, villa	inside the ge, etc.?	•
	- P.O. Boxes or rural					095 1	Yes	2	□No	3 🗌 No legal boundarie	4 🗆 D	on't 10w
	e as shown in mailin	ng label, if diffe	erent, indicate chan		c.		_	-	-	ere physically I	ocated	
Number a	na street					09	3 1∐0 ¢	city, villa or borou	age, Igh	2 Town or township		ther or on't know
City, town	, village, etc.	State ZIP C	Code	- c	d.	Name o	of cou	nty wh	ere p	hysically locat	ed	
	USINESS OR AC the ONE box which		es your major type o	of activ	vity	during	the pas	t year.				
070 1 🗆 N	MANUFACTURING	2□OTHER – S	Specify activity ———									
	he ONE box which E	BEST describes	your specific busine	ess or	act	tivity.						
	ERTIFICATION -	-	-	te and	ha	s been p	repare				ons.	
Name of pers	on to contact regard	ing this report -		Teleph	100	ne		→ Ar	ea co	de Number		Extension
Signature of a	authorized person				Date			I		I		1
1	FAILURE TO REPORT	-										

U. S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	1992 EC	CONOMIC CENSUSES
NC-9923	GENERA	L SCHEDULE OMB No. 0607-0740: Approval Expires 06/30/94
DUE DATE: 30 DAYS AFTER RECEIPT		
If you have any questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to:		NC-9923
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001		
Census use only		
	(Pl	ease correct any error in name, address, and ZIP Code)
YOUR RESPONSE IS REQUIRED BY LAW this questionnaire to answer the questions a IS CONFIDENTIAL. It may be seen only by copies retained in respondents' files are imm Item 1 – EMPLOYER IDENTIFICATION M Is the Employer Identification (EI) Number shown as that used for this establishment on its latest 1 Quarterly Federal Tax Return, Treasury Form 941	. Title 13, United States of nd return the report to th Census Bureau employe nune from legal process. IUMBER n in the label the SAME 992 Employer's	Code, requires businesses and other organizations that receive the Census Bureau. By the same law, <b>YOUR CENSUS REPORT</b> les and may be used only for statistical purposes. Further, <b>WHOLESALE TRADE (W)</b> Principal Commodity Sold – Specify
094 1 ☐ Yes 2 ☐ No - Enter current El Number	(9 digits)	
Item 2 – PHYSICAL LOCATION OF ESTA Answer items a, b, c, and d NOTE: P.O. boxes or rural routes are not phy a. 1 Same as shown in mailing label. If different	vsical locations.	□ Agent or broker □ Merchant □ Other type of wholesaler – <i>Specify</i>
Number and Street		(Specify source of receipts in ITEM 4) MANUFACTURING (M)
City, Town, Village, etc. State ZIP C	ode	Publishing, or Publishing and Printing – Specify $\overline{\nabla}$
<ul> <li>b. Is this establishment physically located inside of the city, town, village, etc?</li> </ul>	e the legal boundaries	(Specify source of receipts in ITEM 4)
095 1 Yes 3 No legal boundar	ries	275200 4 Commercial printing, lithographic
2 No 4 Don't know		$\Box$ Other commercial printing – Specify $\mathbf{z}$
c. Type of municipality where physically located 096 1 □ City, village, or borough 3 □ 2 □ Town or Township	o Other or don't know	(Specify source of receipts in ITEM 4)
d. Name of county where physically located		241100 7 Logging camps and logging contractors
Item 3 – BUSINESS OR ACTIVITY Mark (X) the ONE box which best describes activity of this establishment in 1992.	the PRINCIPAL	359900 8 ∐Machine shop, jobbing and repair □Other manufacturing – <i>Specify</i> <del>∡</del>
070 881100 2 Private household (employing e.g., cooks, maids, gardeners, se	) domestic help, ecretaries, etc.)	(Specify source of receipts in ITEM 4 and materials consumed in ITEM 5)
RETAIL TRADE (R)		CONSTRUCTION (C) Building construction – general contractor
594130 7 🔲 Bicycle shop 581230 0 🔲 Cafeteria		152100 4 ☐ Single–family housing construction ☐ Other building construction – <i>Specify</i>
573420 7 Computer software store		
581250 8 Contract feeding		(Specify source of receipts in ITEM 4)
581300 1 Drinking place (alcoholic bevera	iges)	Heavy construction contractor
565100 5 🗌 Family clothing store 571210 4 🔲 Furniture store		161100 3 $\Box$ Highway and street construction $\Box$ Other heavy construction – Specify $\overline{\nabla}$
554110 7 Gasoline service station		$\Box$ other heavy construction – Spechy $Z$
594110 9 General-line sporting goods sto	re	(Specify source of receipts in ITEM 4)
594700 7 Gift, novelty, or souvenir shop 541110 3 Grocery store		Special trade contractor
553120 7 Home and auto supply store		175100 7 Carpentry work
581260 7 🗌 Ice cream/frozen yogurt stand (c 592100 2 🗌 Liquor store	or store)	177100 5 └─ Concrete work 173100 9 └─ Electrical work
581210 2 Restaurant or lunchroom (full se		179400 7 Excavation work
581240 9 Refreshment places (limited me 581220 1 Social caterer	nu, e.g., fast food)	174100 8 └─ Masonry or other stonework 172100 0 └─ Painting or paper hanging contractor
553110 8 🔲 Tires, batteries, and accessories	dealer (new)	171100 1 Plumbing, heating, or air conditioning contractor
554120 6 Truck stop 562100 8 Woman's clothing store		176100 6 $\Box$ Roofing, siding, or sheet metal work $\Box$ Other special trade contractor – Specify $\overline{z}$
Other kind of retail business – S	pecify 🖌	
(Specify source of recei	pts in ITEM 4)	(Specify source of receipts in ITEM 4)
PENALTY FOR FAILURE TO REPORT		CONTINUED ON PAGE 2

Item 3 – BUSINESS OR ACTIVITY – Continued	FINANCE, INSURANCE, AND REAL ESTATE (F)
SERVICES (S)	
	641110 2 Insurance agent or broker
872100 3 Accounting, auditing, or bookkeeping service 871200 2 Architectural services	628200 8
753210 4 $\Box$ Auto top and body shop, except paint shop	653130 5 Nonresidential real estate property manager
753810 1 $\Box$ Auto repair shop, general (except diesel)	651220 6 Operator of manufacturing or industrial building
753220 3 Automotive paint shop	651210 7 Operator of professional or other office building
724100 3 Barber shop	651230 5 🔲 Operator of shopping center
723100 4 🔲 Beauty shop (or unisex shop)	651300 6 Owner-operator of apartment building
734900 4Building cleaning or maintenance service	653160 2 🔲 Real estate appraiser
835100 9 Child day care services	653110 7 Residential real estate or broker
804100 6 LChiropractors' office/clinic 866100 1 Church, synagogue, convent, monastery, etc.	☐ Other kind of finance, insurance, or real estate – <i>Specify</i>
864100 3 Civic, social, or fraternal association	
733610 0 $\Box$ Commercial art	
733500 3 Commercial photography	(Specify source of receipts in ITEM 4)
737200 6 Computer prepackaged software, except stores	OTHER (O)
737100 8 Computer programming services (custom software)	ר ר
802110 7 Dentist's office	
801110 8 Doctor's office, medical (M.D. degree only)	□ AGRICULTURAL SERVICE Specify source of
803110 6 Doctor's office, osteopathic (D.O. degree only) 873200 0 Economic, sociological, educational research	receipts in
873200 0 Economic, sociological, educational research 871100 4 Engineering services	ELECTRIC, GAS, OR SANITARY SERVICES     ITEM 4     IMINERAL EXTRACTION
733620 9 Graphic arts and related design	
832200 0 Individual and family social service	OTHER BUSINESS OR ACTIVITY – Specify 📈
874100 1 Management or administrative services	
874200 9 🗌 Management consulting services	(Specify source of receipts in ITEM 4)
701130 7 Motel or tourist court	
811110 6 Lawyers (or attorney's) office	Item 4 – SOURCE OF SALES, RECEIPTS, OR REVENUE
804200 4 Optometrist's office/clinic 804300 2 Optometrist's office/clinic	
804300 2 Podiatrist's office/clinic 874300 7 Public relations services	List below the principal lines of merchandise sold, construction work done, products produced or services provided and indicate the
871300 0 Surveying services	approximate percentage each was of the total dollar volume of
784100 0 Video tape rental	business in 1992 (e.g., gasoline 85%, auto repairs 10%, oil 5%).
□ Other kind of services – Specify 🖌	Source Percent
(Specify source of receipts in ITEM 4)	%
TRANSPORTATION (T)	%
4212 Local trucking without storage	
4212 Trucking, except local	%
Type of trucking	
40 Agriculture products	%
70 Dump trucking	
60 Garbage and trash collection	TOTAL – Should equal 100% → 100 % Item 5 – MATERIALS CONSUMED
20 General freight trucking	
30	If you are a manufacturer, list the primary materials consumed in
$\Box \text{Other specialized trucking} - Specify =$	producing the manufactured products.
(Specify source of receipts in ITEM 4)	
451300 8 Air courier services	
411930 1	
421520 8 $\Box$ Courier services, except local or by air 473110 5 $\Box$ Freight forwarder	
411920 2 Limousine service	Item 6 – CLASS OF CUSTOMER
421510 9 Local courier services, except air	
415100 7 🗌 School bus	Mark (X) the ONE box which best describes to whom you sell most of your products or provide your services.
473120 4 Shipping agent or broker	To the general public (household consumers and
411910 3 Sightseeing bus	individuals)
412100 0 Taxicab	To retail or wholesale establishments
472500 8 └── Tour operator 472400 1 └── Travel agent	To construction contractors
$\Box \text{ Other transportation} - Specify \neq \blacksquare$	To institutional, industrial, commercial, professional, government, or farm users
	Other customers – Specify 📿
	- -
(Specify source of receipts in ITEM 4)	5 🛄
Item 7 – REMARKS	
Item 8 - CERTIFICATION - This report is substantially accurate and	has been prepared in accordance with instructions.
Name of person to contact regarding this report – Print or type	Telephone Area Code Number Extension
Signature of authorized person	Date
orginature of authorized person	
FORM NC-9923	

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	199	_	_	US OF	RETAIL TRADE			
CB-5202					OMB No. 0607-0719: Ap	proval E	Expires (	06/30/9
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the surge to refer to the 11-digit Census tile Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m. castern time, Monday through Friday: 1–800–233–6136		-			c	B-5202	]	
Please read the accompanying instructions before answering the questions.								
Census use								
			(Ples	se correct an	y errors in name, address, and ZIP C	ode)		
YOUR RESPONSE IS REQUIRED BY LINING         this questionnaire to answer the question         Is conFIDENTIAL. It may be seen only retained in respondents' files are immunities         Item 1.       EMPLOYER IDENTIFICATION NUM         Is the Employer Identification (EI) Number label the same as the one used for this to on its latest 1992 Employer's Quarterly F         094       1 Yes       2 No - Report current (9 digits)         (9 digits)       Item 2.       PHYSICAL LOCATION	by Census from legal BER er shown ir stablishme ederal Tax	Bureau I process n the ent	emplo	HOW TO REPORT DOLLAR FIGURES Item 4. D Sales of m operating	y be used only for statistical purpose Dollar figures should be <b>rounded</b> to <b>thousands</b> of dollars. <b>Example:</b> If a figure is <b>\$1,125,628.79</b> • Preferred report Acceptable OLLAR VOLUME OF BUSINESS terchandise and other receipts for 1992 (Exclude ter taxes collected)	Mil- lions   (000) 1 1 Mil. 010	Thou- sands (000) <b>126</b> 125 Thou.	es Dol- lars (000) 629 Dol.
<ul> <li>a. Is this establishment's physical locati</li> <li>the address shown in the label? (P.O. I)</li> <li>addresses are not physical locations)</li> <li>093 1 Yes 2 No - Report phy</li> </ul>	box and rura	al route	,	Item 5. P Payroll in <sup>-</sup> a. <u>Annual</u>	AYROLL 1992, BEFORE DEDUCTIONS	Mil.   030     031	Thou.   	Dol.     
Number and street				h First au	arter (January–March)		l	   
City, town, village, etc. S b. Is this establishment physically locate		' Code		Item 6. El Number of period incl	MPLOYMENT f paid employees for pay luding March 12, 1992 th full- and part-time	032	Numbe	r
boundaries of the city, town, village, 095 1 Yes 3 No legal bounda 2 No 4 Do not know	etc.?			What was	IND OF BUSINESS this establishment's PRINCIPAL siness in 1992? Mark (X) only			
<ul> <li>c. In what type of municipality is this esphysically located?</li> <li>096 1 City, village, or borough</li> <li>2 Town or township</li> <li>3 Other - Specify</li> <li>4 Do not know</li> <li>d. In what county is this establishment p</li> </ul>	hysically I	located		Paint, glass, Hardware st Retail lumbe Home cente Metal storm Other retail cabinets to blocks, fenc	, wallpaper store	070	☐ 525 ☐ 521	
Item 3. OPERATIONAL STATUS a. How many months during 1992 was this establishment actively operated?	Numb 002	ber of m	onths	Construction	paint and wallpaper distributor n contractor (painting, glass etc.) – <i>Describe</i>		☐ 519 ☐ 917	
b. Which of the following best describes establishment's status at the end of 1 Mark (X) only ONE box.	this 992?			Other kind c	of business – <i>Describe</i>		- 777	777
<ul> <li>1 In operation</li> <li>2 Temporarily or seasonally ina</li> <li>3 Ceased operation - Give date</li> <li>4 Sold or leased to another ope Give date at right AND enter etc., below</li> </ul>	<i>at right</i> rator –	Figures Month	s only Year	What was method of ONE box.	IETHOD OF SELLING this establishment's PRINCIPAL selling in 1992? Mark (X) only is establishment	235	1 🗌	
Name of new owner or operator		I		shopping vi	include catalog selling and home a television or computer) ng		2 🗌 3 🗌	
City S	tate ZIP	' Code		house and r	g (include selling from house-to- nonfixed or temporary locations) nerchandise vending machines		4 🛄 5 🔲	
PENALTY FOR FAILURE TO REPORT				-		ONTINU		

					Iten	n 10. MERCHANDISE LINES -	Cont	inued		Page 2			
Item 9. CLASS OF CUSTOMER Report the percentage of this			ole perco of sales		iten	TO. MERCHANDISE LINES		ESTIMATES are acceptable.					
establishment's total sales in 19 (item 4) to each class of custom		237				Merchandise lines	Cen- sus use	Report dol Mil. The	lars OR pe	Per-			
<ul> <li>General public (household const and individuals)</li> </ul>	umers	;								cent			
<b>b.</b> Builders and contractors		238				Kitchenware and homefurnishings (include cookware, dinnerware, alaaka piaturaa framaa							
c. Other, including retailers; whole	salers	239				clocks, pictures, frames, mirrors, bathroom accessories, etc.)	380		l I				
institutional, industrial, commer professional, and farm users (fo farm production); and governme	r use	in			7.	Furniture, sleep equipment	340						
Item 10. MERCHANDISE LINES						Carell electric englisheses		1					
Report sales for each merchand establishment, either as a dollar percent of total sales. (See HOW FIGURES on page 1 and HOW TO F	r figu TO R	re or as a who EPORT DOLLAR	le			Small electric appliances (include shavers; mixers; blenders; can openers; toasters; coffee makers; frypans; and personal care appliances, such as hair							
HOW TO If figure is <b>38.76%</b> total sales:	of	Mil.   Thou.	Dol.	Per- cent		dryers, curling irons, etc.)	310						
REPORT PERCENTS • Report whole percent	cents-		<b>→</b>	39		Curtains, draperies, blinds, slipcovers, bed and		i i					
Not acceptable —		ESTIMATES a	re acce	38.76 otable.		table coverings		1					
Merchandise lines	Cen- sus	Report dollars	OR pe	rcents.		a. Curtains and draperies	281		 				
1. Lumber, millwork, building	<b>use</b> 230	Mil.   Thou.	Dol.	Per- cent 232		b. Vertical and horizontal blinds and woven wood blinds	282						
materials, and home repair and modernization equipment and supplies (Report paint and related						<b>c.</b> Furniture coverings and domestics	285						
preservatives on line 2 and materials installed in construction, renovation, or						d. Sum of lines 9a through 9c	280						
repair on line 12) <b>a.</b> Wallpaper and other													
flexible wallcoverings (Report wallboard and paneling on line 1c)	658					Automotive tires, batteries, parts, accessories	740						
<b>b.</b> Glass (Report glassware on line 6)	661		   			All other merchandise (Report receipts for services on line 12)	890	l l	l				
<b>c.</b> Other lumber, millwork,						Specify principal lines and estimated sales below			I				
building materials, home repair and modernization equipment and supplies	662					a	891	1	1				
<b>d.</b> Sum of lines 1a through 1c						b	892		<u> </u>				
<ol> <li>Paint and related preservatives and supplies</li> </ol>	040					с.	893	!	<u> </u>				
	671					All nonmerchandise receipts (include receipts from rentals, storage, and			İ				
<ul> <li>Paint, varnish, and shellac</li> <li>b. Paint sundries (brushes,</li> </ul>	0/1					other services provided to customers) EXCLUDING SALES AND OTHER TAXES			I I				
thinners, compounds, spackling paste, etc.)	672					<b>a.</b> Construction receipts			I				
c. Sum of lines 2a and 2b	670					(Include material and labor charges for adding rooms, installing			l l				
3. Floor coverings						windows, building fences, rebuilding furnaces, reroofing, etc., for work			I I				
a. Soft-surface (textile) floor coverings and accessories	361					done by employees of this establishment. Report receipts for work done by			l I				
<ul> <li>b. Hard-surface floor coverings and accessories</li> </ul>			 			hired subcontractors on line 12c.)	901						
(include tile and sheet goods)	362		 			b. Repair and maintenance receipts (Include material receipts (Include material)							
<b>c.</b> Sum of lines 3a and 3b	360					and labor charges for property upkeep, such as painting, furnace cleaning,		I I	I				
<ol> <li>Hardware, tools, and plumbing and electrical</li> </ol>						furnace repair, roof repair, etc., for work done by employees of this			I				
supplies						establishment. Report receipts for work done by hired subcontractors on							
<b>a.</b> <u>Hardware</u>	601					line 12c.)	902						
<b>b.</b> Tools	602					c. All other nonmerchandise receipts (include charges			l I				
c. Plumbing supplies	603		 			for delivery, storage, rental or lease of tools and equipment, etc.)	946		l I				
d. Electrical supplies	d. Electrical supplies 604					<b>d.</b> Sum of lines 12a through 12c							
e. Sum of lines 4a through 4d	600		 			TOTAL (Should equal item 4	900		 	100%			
5. Lawn and garden equipment and supplies, cut flowers,						if reporting in dollars) <b>n 11.</b> Not applicable to this re	eport		I	100%			
plants, shrubs, fertilizers, etc. FORM CB-5202	620				Iten	<b>n 12.</b> Not applicable to this re	eport	CON	TINUE ON	PAGE 3			

							_					Page 3			
FORM CB-5202	U.S. D	EPARTMENT OF BUREAU OF	COMMERCE THE CENSUS	Ente	er the 11-dig	git									
1992 CE PAI	as s	SUS FILE N hown on th label on pa	nis report												
Item 13. LEGAL FORM				lten	<b>14.</b> OWN OPER	NERSHIP, C RATION -	CONT Conti	ROL, AND	LOCATI	ONS OI	F				
Which of the followin legal form of organiza				d. How many establishments operated under the Employer Identification Number shown in the label (or as corrected in item 1) AT THE END of 1992?											
2 🗌 Partnershij		•		T If		<b>1992?</b> one, provi	ide th	e physica	l locatio	on addr	ess and				
4 🗌 Cooperativ	e association (taxable) e association (tax-exe			h Io	eadquarters ocations. If mormat in REN	location s	should n is ne	d be first, f eeded, con	ollowed tinue in	by all o the san	other	5			
<sup>5</sup> ∐ Governme 0 □ Corporatio <i>cooperativ</i>	nt – Specity n (Do not mark if any i re association)	form of		E	<b>stimates ar</b> lame			-		not ava	ailable. <sup> </sup> Thou.	Dol.			
9 🗌 Other – <i>Sp</i>	pecify				lumber and s	street			Sales	081	1	1			
Item 14. OWNERSHIP	, CONTROL, AND LOC	ATIONS OF OP	PERATION		ity		State	ZIP Code	Annual payroll	082	1	 			
a. Is the FIRST DIGIT in the address labe	of your Census File I immediately after	Number (show "CFN") a zero?	yn 2	1	ind-of-busine				Paid	employ includ	yees for ing Ma	r pay rch 12			
1 □ Yes – <i>Com</i> 2 □ No – <i>Skip</i>									083						
b. Is this company	Enter name, address	, and El Numbe	r of the						Census use	088					
owned or controlled by another company?	owning or controlling	g company		N	lame				1992	Mil. 081	Thou.	Dol.			
097 1 □ Yes				N	lumber and s	street			Sales Annual	082	 	 			
c. Does this company	El No. (9 digits) Enter name, address	, and El Numbe	r of the	2 C	ity	5	State	ZIP Code	payroll Paid		 yees for				
own or control any other company or companies?	owned or controlled	company		к	ind-of-busine	ess descr	iption	I	perioc <sup>083</sup>	includ	ing Ma	rch 12			
098 1									Census	Census <sup>088</sup> use					
<b>REMARKS</b> – Please use	El No. (9 digits)								u30						
		hotopti-U	roto!	0 k - 1			n a -	(ith ::	tion-						
Period covered	ON – This report is su Mo.   Year M:	TO:			e of person t					Print or	type				
by this report         The           Telephone         Area code		Extension	ı	Title											
Signature of authorized	person									Date					

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	1992 CENS	ISUS OF RETAIL TRADE									
CB-5302		OMB No. 0607-0719: App	proval Expires 06/30/94								
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS		CE	3-5302								
1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136 Please read the accompanying instructions before answering the questions.											
this questionnaire to answer the questions a IS CONFIDENTIAL. It may be seen only by retained in respondents' files are immune for	<b>V.</b> Title 13, United State and return the report to / Census Bureau emplo rom legal process.	ise correct any errors in name, address, and ZIP Construction of the consustance of the consustance of the consus Bureau. By the same law, <b>YOUR CEN</b> yees and may be used only for statistical purposes	ns that receive								
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number a label the same as the one used for this esta on its latest 1992 Employer's Quarterly Fed Return, Treasury Form 941? 094 1 Yes 2 No - Report curren (9 digits)	shown in the ablishment leral Tax	HOW TO       Dollar figures should be rounded to thousands of dollars.         REPORT       DolLAR         DOLLAR       is \$1,125,628.79 • Preferred report         Acceptable       Item 4.         DOLLAR VOLUME OF BUSINESS       .         Sales of merchandise and other operating receipts for 1992 (Exclude	Mill         Incu-         Dol-           lions         Isands         Iars           (000)         (000)         (000)           1         126         -           1         125         629           Mill.         Thou.         Dol.           010         Image: 100 million         Image: 100 million								
<ul> <li>a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)</li> <li>093 1 Yes 2 No - Report physical Number and street</li> </ul>	and rural route	sales or other taxes collected) Item 5. PAYROLL Payroll in 1992, BEFORE DEDUCTIONS a. Annual b. First quarter (January-March)	Mil.         Thou.         Dol.           030                               1                               031								
City, town, village, etc. Stat b. Is this establishment physically located boundaries of the city, town, village, etc 095 1 Yes 3 No legal boundaries 2 No 4 Do not know	inside the legal ?	Item 6. EMPLOYMENT Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees) Item 7. KIND OF BUSINESS What was this establishment's PRINCIPAL	Number <sup>032</sup>								
c. In what type of municipality is this estal physically located? 096 1 City, village, or borough 2 Town or township 3 Other - Specify		kind of business in 1992? Mark (X) only ONE box.         Variety store, five and dime store         Limited price variety store         Conventional department store         Discount or mass merchandising department store         General merchandise store         Catalog showroom (inventory at location)         Catalog store (including telephone order	070 533101 533102 531111 531121 539911 539921								
<ul> <li>Item 3. OPERATIONAL STATUS</li> <li>a. How many months during 1992 was this establishment actively operated?</li> <li>b. Which of the following best describes the establishment's status at the end of 199 Mark (X) only ONE box.</li> <li>201 1 □ In operation</li> </ul>	iis 2? Figures only	offices)	596111 596121 594521								
1       In operation         2       Temporarily or seasonally inacti         3       Ceased operation - Give date at         4       Sold or leased to another operat         Give date at right AND enter nate         etc., below         Name of new owner or operator         Number and street	ve Month Year right or -	What was this establishment's PRINCIPAL method of selling in 1992? Mark (X) only ONE box.         Selling at this establishment	235 1 2 3								
City Stat	e ZIP Code	house and nonfixed or temporary locations) Operating merchandise vending machines	4 🛄 5 🛄								

	LASS OF CUSTOMER				ole perc of sales		Item 10. MERCHANDISE LINES -	- Cont				
establishm	percentage of this nent's total sales in 19 each class of custom			237			Merchandise lines	Cen- sus	Report	ATES a t dollars	OR pe	
a. General and indiv	public (household cons viduals)	umers	:					use	Mil.	Thou.	Dol.	cen
<ul> <li>Other, in institutio professio farm pro</li> </ul>	cluding retailers; whole nal, industrial, commer onal, and farm users (fo duction); and governme MERCHANDISE LINES	cial, r use		239			8. Audio equipment, musical instruments, and supplies (Include radios, stereos, compact discs, records, tapes, sheet music, accessories. Report parts installed in repair on line 44 and rental receipts					
Report sale	es for each merchand	ise lir	ne sold	by this			on line 44.)	330			1	
percent of	nent, either as a dollar total sales. (See HOW n page 1 and HOW TO F	' TỔ R	EPORT	DOLLAF	7		<ol> <li>Small electric appliances (include shavers; mixers; blenders; can openers; tractora coffee modes);</li> </ol>			   		
HOW TO REPORT	If figure is <b>38.76%</b> total sales:		Mil.	Thou.	Dol.	Per- cent <b>39</b>	toasters; coffee makers; frypans; and personal care appliances, such as hair dryers, curling irons, etc.)	310				
PERCENTS	Report whole perevent     Not acceptable —	cents-		1		38.76	<b>10.</b> TV's, video recorders,			I	1	
		0		1ATES a		ptable.	video cameras, video tapes, etc. (include parts			I		
Mer	chandise lines	Cen- sus use		t dollars	-	Per-	and accessories)					
I. Women'	s, juniors', and	230	231	1		cent 232	a. <u>Televisions</u>	321		 	 	
misses' v and infai	wear (Report girls' nts' and toddlers' line 3 and footwear	220		   	   		<ul> <li>b. Video recorders, cameras, and tapes (Report receipts from video tape rental on line 44)</li> </ul>	324				
2. Men's w wear on	ear (Report boys' line 3 and						c. Sum of lines 10a and 10b	320				
footwear	r on line 4)	200		<u> </u>	 		<b>11.</b> Furniture, sleep equipment	340				
(sizes 2 t (sizes 4 t infants' a and acce	's wear (Include boys' to 7 and 8 to 20), girls' to 6x and 7 to 14), and and toddlers' clothing essories. Report r on line 4.)	240		   	   		<ol> <li>Major household appliances (include refrigerators, ranges, microwave ovens, room air-conditioners, etc.)</li> </ol>	300		   		
<b>4.</b> Footwea	r (include accessories)	260		1			<b>13.</b> Floor coverings			l		
slipcove	, draperies, blinds, rs, bed and table						a. Soft-surface (textile) floor coverings and accessories	361		 	 	
covering <b>a.</b> Curta	ins and draperies	281		   	   		<ul> <li>b. Hard-surface floor coverings and accessories (include tile and sheet goods)</li> </ul>	362		 		
blinds	al and horizontal and woven wood	202		 			c. Sum of lines 13a and 13b	360				
(read	s ture coverings y-made and m-made)	282 283		   	   		14. Computer hardware, software, and supplies (Report computer-related furniture on line 11. Report			   	   	
sheet	estics (include towels, s, blankets, table s and coverings, etc.)	284		   	   		calculators and office equipment, such as adding machines, copiers, fax machines, etc., on line 15. Report office supplies on line 43.)	370				
	of lines 5a through 5d	280		1			<b>15.</b> Office equipment (Include	570				
patterns,	knitting, needlework nclude fabrics, notions, , yarns, laces, gs, needlework	270		   	 		fax machines, dictaphones, copying machines, calculating machines, etc. Report office supplies on line 43.)	854		   		
cookward pictures, bathroon	vare and nishings (include e, dinnerware, clocks, frames, mirrors, n accessories, etc.) ware and cooking			     	     		16. Toys, hobby goods, and games (Include video and electronic games, and wheel goods, except bicycles. Report bicycles on line 29.)			   	     	
access	sories (include strainers, s, grinders, cutlery, ng supplies, etc.)	381		   	'   		<b>a.</b> Toys (include wheel goods)	461		   	 	
glass giftwa	erware, china, ware, tableware, are (include all are and holloware)	382		   	   		<ul> <li>Games (include video and electronic games)</li> </ul>	462		   	   	
(inclu mirro	rative accessories de lamps, lampshades, rs, pictures, clocks, izine racks, spice racks,			 	   		<ul> <li>c. Hobby goods and craft kits</li> <li>d. Sum of lines 16a through 16c</li> </ul>	463 460		 	 	
	sets, etc.)	383		- 			<b>17.</b> Craft supplies	881				
home	her kitchenware and furnishings (include t and bathroom sories, etc.)	384		   	   		<ul> <li>18. Meals, snacks, sandwiches, nonalcoholic beverages generally served for</li> </ul>					
-				i			immediate consumption	120				
	of lines 7a through 7d	380				1	ITEM 10 CONTIN		ON PAG	F.3		

							Pa	age 3							
FORM	CB-5302 1992 CENSUS OF GENERAL ME	RET		RADE	U OF THE	MERCE CENSUS	ERCE INSUS Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)								
							Item 10. MERCHANDISE LINES – Continued								
Iter	n 10. MERCHANDISE LINES – (			IATES a	re acce	otable.	ESTIMATES are acceptal	S are acceptable							
	Merchandise lines	Cen- sus	Repor	t dollars	OR pe	rcents.	Merchandise lines								
		use	Mil.	   Thou.	Dol.	Per- cent	use Mil Thou Dol P	Per-							
19.	Groceries and other food items for human						42. Paint and related preservatives and supplies   670								
	consumption off the premises (Include candy, gum, etc. Report vitamins on line 33 and pet food on			1	,   		<b>43.</b> All other merchandise (Report receipts for services on line 44)       I <b>890</b> I								
	line 40.)	100		 	 		Specify principal lines and estimated sales below								
20.	Stationery	851					a. 891								
21.	School supplies	852		 	 		b 892								
22.	Greeting cards	855		1			c. 893								
23.	Luggage and leather goods (Report men's and women's small leather apparel accessories on line 2 or 1)	859		     	     		44. All nonmerchandise                 receipts (include receipts                 from rentals, storage, and                 other services provided to                 customers) EXCLUDING								
24.	Books (Report audio tape books on line 8)	420		l	l		SALES AND OTHER TAXES 900								
	books on line of						45. TOTAL (Should equal item 4 if reporting in dollars)       10	00%							
25.	Magazines and newspapers	856		ļ	ļ		Item 11. SPECIAL INQUIRIES								
26.	Hardware, tools, and plumbing and electrical supplies	600		   	   <del> </del>		a. Floor space as of December 31, 1992 INCLUDE:								
27.	Lawn and garden equipment and supplies, cut flowers, plants, shrubs, fertilizers, etc.	620		     	   		<ul> <li>Only the floor space used/controlled by this company.</li> <li>All space occupied by this establishment on every floor of multi-story buildings.</li> <li>EXAMPLE: How to compute floor space in square feet</li> </ul>								
28.	Lumber, building materials, and home improvement equipment and supplies (Report paint and related preservatives on line 42)	640		     	     		<ul> <li>(1) Under-roof selling space is: 200 ft. x 80 ft. = 16,000 sq. ft.</li> <li>(2) Total under-roof floor space is: 200 ft. x 100 ft. = 20,000 sq. ft.</li> </ul>	_							
29.	Sporting goods	500		1			Selling space 80 ft.								
	Jewelry (Include watches, watch attachments, novelty jewelry, etc. Report flatware and holloware on line 7b and receipts from watch, clock, and jewelry repair and engraving on line 44.)	400		       	       		100  ft. $00  ft.$ $0  office$ $0  ft.$ $0  office$ $0  ft.$ $0  office$ $0  ft.$	- -							
31.	Optical goods (include eyeglasses, contact lenses, sunglasses, telescopes, microscopes, etc.)	490		     	     		(1) Under-roof selling space – Enter the square feet of in-store selling space at the end of 1992. Include all store areas open to customers, including aisles, elevators, etc. Do not include display windows fronting onto streets or walks, outdoor entrance ways, or other outdoor								
32.	Tobacco products and accessories (exclude sales from vending machines operated by others)	150		     	     		<ul> <li>space.</li> <li>252</li> <li>(2) Total under-roof floor space – Enter the total square footage of all under-roof selling space plus all other space available at the end</li> </ul>								
33.	Drugs, health aids, beauty aids	160		1	 		of 1992. Include dry storage, refrigerated space, offices, workrooms, display windows, and enclosed entrance ways. Do not include	I							
34.	Paper and related products (include paper towels, toilet tissue, wraps, bags, foils, etc.)	190		   	   		outdoor space, even if covered.         b. Did this establishment have a CENTRALIZED check-out area with MULTIPLE cash registers	-							
35.	Soaps, detergents, and household cleaners	180		I	: 		111 1992:								
36.	Automotive fuels	720		 	 		Item 12.         Not applicable to this report           Item 13.         LEGAL FORM OF ORGANIZATION								
	Automotive lubricants (oil, greases, etc.)	730			 		Which of the following best describes this establishment's legal form of organization during 1992? <i>Mark (X) only ONE box.</i>								
38.	Automotive tires, batteries, parts, accessories	740		 			003 1 □ Individual owner (sole proprietorship)								
39.	Packaged liquor, wine, and				 		2								
40.	beer Pets, pet foods, and pet	140		† 			4  Cooperative association (tax-exempt) 5  Government – Specify								
├──	supplies	800			i		0 Corporation ( <i>Do not mark if any form of cooperative association</i> )								
41.	Photographic equipment and supplies (Report photofinishing on line 44)	440			 	s D Other – Specify									

																Page 4
lt	em 14. OWNE	ERSHIP,	CONTR	ROL, AND	LOCATIO	ONS OF	OPERAT	TION								
a.			-	Census F	ile Num	ber (sh	own in 1	the add	dre	ss label immediately a	after "	'CFN") a ze	ero?			
		o – Skip	•													
Ь.	Is this compa or controlled company?	ny own by ano	ned ther	Enter na	ame, add	ress, aı	nd El Nur	mber of	fthe	e owning or controlling	comp	any				
	097 1 ☐ Ye 2 ☐ No	es → D										-				
	Dese this see			Enter n	ame ado	tress a	and El Nu	umber o	f th	EI N		· (9 digits)				
С.	Does this cor or control an company or c	y other compan			anie, aut	iie33, a					compa	y				
	098 1 ∐ Ye 2 ∐ No											(a. II. )				
										EIN	umber	· (9 digits)			Numb	er
d	. How many es label (or as c							ldenti <sup>.</sup>	fica	ation Number shown	in the	•		079		
	each establish	ment. Tl d, contir	he hea nue in	dquarters the same	location format i	should າ REMA	l be first, ARKS or o	followe	ed b	mation indicated belov by all other locations. If ate sheet of paper.						
	Name				1992	Mil.	Thou.	Dol.		Name			1992	Mil. 081	l Thou	. Dol.
	Number and st	reet			Sales	081		   		Number and street			Sales	081	'   	i 1
1	City		State	ZIP Code			vees for		3	City	State	ZIP Code	Annual payroll Paid	employ		   
	Kind-of-busines	s descri	iption		period 083	d incluc	ding Marc	ch 12		Kind-of-business desc	ription	1	perioc 083	l includ	ing Ma	irch 12
					Censu	s <sup>088</sup>							Census	088		
	Name				<b>use</b> 1992	Mil.	Thou.	Dol.		Name			<b>use</b> 1992	Mil.	Thou	. Dol.
	Number and st	reet			Sales	081		 		Number and street		Sales	081	 	 	
	City		State	ZIP Code		082		I		City	State	ZIP Code	Annual payroll	082		1
2	Kind-of-busines	s descri	iption		Paid period	emplo d incluc	yees for ding Marc	pay ch 12	4	Kind-of-business desc	ription		Paid perioc	employ I includ	rees fo ing Ma	r pay arch 12
					Census use	s <sup>088</sup>							Census use	<sup>088</sup>		
										al in understanding you			tions.			
P	eriod covered y this report	FROM	Mo	-	<sup>'ear</sup> TO:	M		Year		ame of person to contac				Print or	type	
		Area coo		Number			xtension		Tit	le						
	gnature of auth	orized p	erson	1									Date			
FOR	M CB-5302				PLEAS	E PHO	тосору		FO	RM FOR YOUR RECO	RDS					

U.S. DEPARTMENT OF COMMER BUREAU OF THE CENSUS	<sup>CE</sup>   1992 CENS   FOOD	SUS OF RETAIL TRADE	
<b>CB-5400</b>		OMB No. 0607-0719: App	oroval Expires 06/30/94
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:		CE	-5400
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m. eastern time, Monday through Friday:	,		
Please read the accompanying	_		
instructions before answering the questions.			
Census use			
	(Plea	se correct any errors in name, address, and ZIP Co	ode.)
this questionnaire to answer the question <b>IS CONFIDENTIAL</b> . It may be seen online trained in respondents' files are immunities and the second	ns and return the report to y by Census Bureau emplo te from legal process. IBER	s Code, requires businesses and other organization the Census Bureau. By the same law, <b>YOUR CEN</b> yees and may be used only for statistical purposes HOW TO Dollar figures should be <b>rounded</b> to <b>thousands</b> of dollars.	ISUS REPORT
Is the Employer Identification (EI) Numb label the same as the one used for this o on its latest 1992 Employer's Quarterly Return, Treasury Form 941?	establishment	REPORT       Example: If a figure         DOLLAR       is \$1,125,628.79 • Preferred         FIGURES       report         Acceptable	(000)         (000)         (000)           1         126         1           1         125         629
094 1 🗌 Yes 2 🛄 No – <i>Report cu</i>	rrent El No. below	Item 4. DOLLAR VOLUME OF BUSINESS	Mil. Thou. Dol.
(9 digits)		Sales of merchandise and other	
Item 2. PHYSICAL LOCATION a. Is this establishment's physical locat		operating receipts for 1992 (Exclude sales or other taxes collected)	
the address shown in the label? (P.O. addresses are not physical locations)	box and rural route	Item 5. PAYROLL	Mil.   Thou.   Dol.
093 1 Yes 2 No – Report ph	ysical location below	Payroll in 1992, BEFORE DEDUCTIONS a. <u>Annual</u>	
Number and street			031
City, town, village, etc.	State ZIP Code	b. First quarter (January–March)	
b. Is this establishment physically locat	ad incide the legal	Item 6. EMPLOYMENT	Number 032
boundaries of the city, town, village, 095 1 Yes 3 No legal bound 2 No 4 Do not know	etc.?	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)	
c. In what type of municipality is this e physically located?	stablishment	Item 7. KIND OF BUSINESS What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only ONE box.	
096 1  ☐ City, village, or borough 2  ☐ Town or township		Grocery store	070
3 Other – Specify		Food supermarket	541112
4 🛄 Do not know		Convenience food store	541121 541131
d. In what county is this establishment	physically located?	Food warehouse store	541131
Item 3. OPERATIONAL STATUS	Number of months		541141 546111
a. How many months during 1992 was	002	Bakery (baking on premises)	546121
this establishment actively operated		Doughnut shop	546112
b. Which of the following best describe establishment's status at the end of Mark (X) only ONE box.		Meat market	542101 542102
		Freezer and locker meat provisioner	542103
001 1 🛄 In operation 2 🛄 Temporarily or seasonally in	Figures only active Month Year	Dairy products store (no pasteurizing or bottling on the premises)	545102
3 Ceased operation – Give dat	e at right	Ice cream/soft serve shop	581261
4 Sold or leased to another op <i>Give date at right AND enter</i>		Candy, nut, confectionery store	544101 543101
etc., below		Health food and vitamin store	549901
Name of new owner or operator		Coffee, tea, spice store	549902
Number and street		Egg, poultry dealer	549903
City	State ZIP Code	Dairy plant (pasteurizing or bottling on the premises)	9202000
		ITEM 7 CONTINUED ON PAGE	2

Mail order food								use	Mil.	Thou.	Dol.	cent
Frozen food plan (door-to-door deli Soft drink distributor (route delivery Bottled water distributor	//no b	ottling) .	☐ 596 ☐ 596 ☐ 596	6343	1.		oceries and other foods – ntinued				1	
Other kind of business – <i>Describe</i> (If manufacturing, name products m	nanufa	actured).	777	7777			Bakery products not baked on the premises, except frozen	106		 	 	
Item 8. METHOD OF SELLING What was this establishment's I method of selling in 1992? <i>Marl</i>							Delicatessen items (Include service delicatessen items only. Report prepared sandwiches on line 2b.)	107			   	
ONE box.			235				Bottled, canned, or packaged soft drinks	108				
Selling at this establishment Mail order (include catalog selling a			1 🛄				·			 	1	
shopping via television or compute	r)		2 🗌 3 🗌				Candy All other foods (include dry	109			<u>                                     </u>	
Telemarketing			3 <u> </u>			J.	groceries, canned and bottled foods, and other			I I	I	
house and nonfixed or temporary lo Operating merchandise vending ma	ocatio	ns)	4 🗔 5 🗔				food items not covered by lines 1a through 1i)	111		 	ı 	
Item 9. CLASS OF CUSTOMER			Whole perc of sales			k.	Sum of lines 1a through 1j	100		 	I   I	
Report the percentage of this establishment's total sales in 19			237		2.		eals, snacks, sandwiches, nalcoholic beverages			I	l	
<ul> <li>(item 4) to each class of custom</li> <li>a. General public (household const and individuals)</li> </ul>		5				čοι	nerally served for immediate nsumption (include sales m soup and salad bars,			 	l	
			239			pa	rty platters, and hand-dipped cream)			 	 	
b. Other, including retailers; whole institutional, industrial, commen- professional, and farm users (for	cial,					a.	Soup and salad bars	123		I	 	
farm production); and governme Item 10. MERCHANDISE LINES	ent					ь.	All other meals and snacks	124			1	
Report sales for each merchand establishment, either as a dollar						C.	Sum of lines 2a and 2b	120			i	
percent of total sales. (See HOW FIGURES on page 1 and HOW TO F	' TŌ R.	EPORT D	OLLAR		з.		ckaged liquor, wine, and				I	
If figure is <b>38.76%</b>	of	Mil	Thou. Dol.	Per-			Distilled spirits (include				j l	
HOW TO REPORT PERCENTS • Report whole percent	ents-			cent 39		a.	liquor, brandy, and liqueurs)	141				
Not acceptable —				38.76		b.	Wine	142		 	I	
Merchandise lines	Cen- sus		ATES are acce dollars OR pe	rcents.			Beer and ale	143		l	 	
	use	Mil.	Thou. Dol.	Per- cent								
<ol> <li>Groceries and other food items for human consumption off the</li> </ol>	230	231		232			Sum of lines 3a through 3c aps, detergents, and	140		I   I	, 	
premises (Include candy, gum, etc. Report vitamins on line 6c			1			ho	usehold cleaners	180		 	 	
and pet food on line 10.) NOTE: Please do NOT combine nonfood items with food items			I		5.	Pa (in	per and related products clude paper towels, toilet			 	]   	
1a through 1j below. Report nonfood items (e.g., soaps, detergents, and household			I			tis: etc	sue, wraps, bags, foils, .)	190		 	1	
cleaners; paper and related products; etc.) on the			I		6.	Dri aid	ugs, health aids, beauty Is			I   I	I	
appropriate lines 4 to 30 below. Estimates are acceptable.			I			a.	Prescriptions (Report here only if pharmacist			 	I   I	
<ul> <li><b>a.</b> Meat, fish, and poultry (Include canned meats</li> </ul>		1	Ì				engaged)	161				
requiring refrigeration on this line. Report meats sold in a frozen state on line 1c.)	101		I			b.	Nonprescription medicines	162			I	
<b>b.</b> Produce (fresh fruits and	101					C.	Vitamins, minerals, and other dietary supplements	163		 	ı I	
vegetables) (Report floral items on line 20 and soup and salad bar sales on			I			d.	Health aids (Include first aid			 	 	
line 2a)	102						products, foot products, prescription accessories, and convalescent aids.			I I	1	
<ul> <li>c. Frozen foods (Include packaged foods sold in a</li> </ul>			I				Report first aid and footcare nonprescription medicines			 	r – – – – – – – – – – – – – – – – – – –	
frozen state such as vegetables, fruits, juices,			I				on line 6b.)	164				
prepared foods, etc. Report frozen dairy products such as ice cream on line 1d.)	103						Cosmetics (include face cream, make-up, perfumes and colognes, etc.)	165				
						f.	Other hygiene needs			I I		
<ul> <li>d. Dairy products and related foods (Include milk, cheese,</li> </ul>			I				(include deodorants; hair and shaving products; oral, feminine, and baby			 	i   I	
butter, yogurt, ice cream, eggs, etc. Report hand-dipped ice cream and			Ì				hygiene needs; hand products; etc.)	166		I I	1	
yogurt on line 2b.)	104		 			а.	Sum of lines 6a through 6f	160		 		
e. Bakery products baked on premises	105		1			3.	ITEM 10 CONTIN					
ORM CB-5400									CC	ONTINU	IE ON F	PAGE 3

ltem 10.

070

596342

596132

MERCHANDISE LINES – Continued

Merchandise lines

Cen

sus use

Per

ESTIMATES are acceptable. Report dollars OR percents.

Mil. | Thou. | Dol.

FORM CB-5400

Item 7. KIND OF BUSINESS - Continued

Dairy route (no pasteurizing or bottling on

. . . . . . . . . . . . . . . . . . . .

the premises) .

1.

FORM <b>CB-5400</b>	U.	S. DEPA	RTMENT BUREA	OF CON	MERCE CENSUS	Pa Enter the 11-digit CENSUS FILE NUMBER
1992 CENSUS O F0	F RET	AIL T	RADE	E		as shown on this report (See label on page 1)
Item 10. MERCHANDISE LINES -	- Contin					Item 10. MERCHANDISE LINES – Continued
Merchandise lines	Cen- sus	ESTIN Repor	IATES a t dollars	re acce s OR pe	rcents.	Merchandise lines
	use	Mil.	Thou.	Dol.	Per- cent	use Mil. Thou. Dol. P
<ol> <li>Cigars, cigarettes, tobacco, and smokers' accessories (exclude sales from vending machines operated by others)</li> </ol>	150		     	     		24. Photographic equipment and supplies (Report photofinishing on line 30c or 30d)     1       440     1
8. Automotive fuels	720		1	   		25. Toys, hobby goods, and games 460 460
<ol> <li>Automotive lubricants (oil, greases, etc.)</li> </ol>	730		   	   		26. Stationery         851         1
<b>10.</b> Pet foods and supplies	800		   	   		27. School supplies         852                               I
						28. Greeting cards 855
<b>11.</b> Books	420			   		29. All other merchandise (Report receipts for services on line 30) 890
<b>12.</b> Magazines and newspapers	856		 	 		Specify principal lines and estimated sales below
<ol> <li>Kitchenware and homefurnishings (include cookware, dinnerware, clocks, pictures, frames,</li> </ol>			   	     		a 891
mirrors, bathroom accessories, etc.)	380		 	 		b892
<ol> <li>Men's wear (Report boys' wear on line 16 and footwear on line 17)</li> </ol>	200		1	   		
15. Women's, juniors', and misses' wear (Report girls' and infants' and toddlers' wear on line 16 and footwear on line 17)	220		-     	'     		c. 893 30. All nonmerchandise receipts EXCLUDING SALES AND OTHER TAXES (Include rentals, storage and other services provided to customers. Exclude all
<b>16.</b> Children's wear (Include boys' (sizes 2 to 7 and 8 to 20), girls' (sizes 4 to 6x and 7 to 14), and infants' and todlers' clothing and accessories. Report footwear on line 17.)	240		       	       		receipts and commissions received from lottery ticket sales.)      a. Receipts from video tape
<b>17.</b> Footwear (include				   		and player/recorder rental 912
accessories) <b>18.</b> Small electric appliances (include mixers, toasters, coffee makers, personal care appliances, etc.)	310		     	     		b. Receipts from coin-operated amusement machines (exclude receipts from coin-operated machines operated by others) 913
<ol> <li>Hardware, tools, and plumbing and electrical supplies</li> </ol>	600		   	   		c. Receipts from photo- finishing performed by this establishment 917
20. Cut flowers, plants, shrubs, lawn and garden equipment and supplies, fertilizers, etc.	620					d. Receipts from photo- finishing contracted out to other establishments 918
<b>21.</b> Curtains, draperies, blinds, slipcovers, bed and table coverings	280			   		e. All other nonmerchandise     receipts (include receipts from customers for delivery, rental or lease of
<b>22.</b> Sewing and knitting materials and supplies	270		   	   		equipment, etc.) 969
23. Jewelry (include watches, watch attachments, novelty jewelry, etc.)	400		   	- — <del>-</del>   		f. Sum of lines 30a through 30e       900         31. TOTAL (Should equal item 4 if reporting in dollars)       990

											Page 4
Item 11. SPECIAL INQU			lt	em 14. OWNE	ERSHIP, ATION -	CONTR	OL, AND L	OCATIO	NS OF		
a. Floor space as of Dec INCLUDE:	cember 31, 1992			. How many e				dundar		Num	ber
	ice used/controlled by this est	ablishment.		the Employe	er Ident	ificatio	on Numbe	r showr	n (	079	
<ul> <li>All space occupied floor of multi-store</li> </ul>	d by this establishment on eve	əry		THE END of	1992?	onecte	in item	1/ A I	_		
	w to compute floor space in s	quare feet		lf more than other information	one, pro	vide th	e <b>physica</b>	I locatio	on addr	ess and	
(1)	Under-roof selling space is:			headquarters locations. If n	location	n shoul	d be first, f	followed	by all o	other	
	200 ft. x 80 ft. = 16,000 sq. ft.			format in REI							
	Total under-roof floor space is 200 ft. x 100 ft. = 20,000 sq. ft			Estimates a	re acce	ptable	if book fig	ures are	not av	ailable.	
	<u>-</u>			Name				1992	Mil.	Thou.	Dol.
<b>↑</b>	Selling space	↑ 80 ft.		Number and	street			Sales	081	1	1
100 ft.		↓						Annual	082	Ι	I
│¥	Office Storage	20 ft	1	City		State	ZIP Code				
	← 200 ft. →	I	Ľ	Kind-of-busin	less des	cription		Paid period	emplo i incluc	yees for ling Mar	pay ch 12
(1) Under roof colling a	space – Enter the square feet of	Square feet	1					083			
in-store selling space	at the end of 1992. Include all ustomers, including aisles, ele-	251						Census	088		
vators, etc. Do not inc	clude display windows fronting outdoor entrance ways, or							Census use	000		
other outdoor space.				Name				1992	Mil.	Thou.	Dol.
(2) Total under-roof flo	or space – Enter the total	252		Number and	street			Sales	081	1	1
other space available	under-roof selling space plus all at the end of 1992. Include dry			Number and	311661			Annual	082	T	l
play windows, and en	pace, offices, workrooms, dis- closed entrance ways. Do not			City		State	ZIP Code				I
include outdoor space		266	2	Kind-of-busin	occ doc	ription		Paid period	emplo incluc	yees for ling Mar	pay ch 12
b. Did sales of any ONE listed immediately be	elow account	1 🗌 Yes		Kind-of-busin	less des	Inpuon		083			
for more than half of (item 4) of this estab		2 🗌 No									
	ONE box which accounted							Census use	088		
for more than half of If "No," skip to item	-		F	Name				1992	Mil.	<sup> </sup> Thou.	Dol.
		267							081		1
	other bakery goods	1		Number and	street			Sales	082	1	1
	nery	2 🗌 3 🗌		City		State	ZIP Code	Annual payroll		I	I
	, fresh or frozen meat	4	3					Paid	emplo	yees for ling Mar	pay
	rd	5		Kind-of-busin	less des	cription		083	i incluc		
Milk, other dairy produ		6 🗀									
		7 🗔						Census use	088		
Vitamins, minerals, hea	alth foods, and ents	8 🗖	F	Name				1992	Mil.	<sup> </sup> Thou.	Dol.
			4						081		1
Item 12. Not applicable			•	Number and	street			Sales	082	1	1
Item 13. LEGAL FORM	OF ORGANIZATION best describes this establis	shment's		City		State	ZIP Code	Annual payroll		1	I
	ion during 1992? Mark (X) o		4							yees for ling Mar	
003 1 🗌 Individual o 2 🗌 Partnership	owner (sole proprietorship)			Kind-of-busin	iess des	cription		083		ing ma	
	e association (taxable)										
	e association (tax-exempt)							Census use	088		
5 Governmen	nt – Specify n (Do not mark if any form of			EMARKS – Ple	ase use	this sp	ace for an		ations t	hat mav	be
cooperative	e association)			es	sential i	n unde	standing y	our repo	orted da	ata.	
9 🗌 Other – <i>Spe</i>	ecify										
	CONTROL, AND LOCATIONS										
a. Is the FIRST DIGIT of in the address label i	f your Census File Number immediately after "CFN") a	(shown zero?									
1 🗌 Yes – <i>Comp</i>											
2 🗌 No – Skip to	item 15										
	Enter name, address, and EI N owning or controlling compar		L								
controlled by another company?	er sentroning compar	• /	F.	em 15. CER	ΓΙΕΙΟΑΤΙ	0N - T	his report i	is subeta	ntially	accurato	
			Ľ	and	has bee	n prepa	red in acco	ordance	with in	structior	is.
097 1 ☐ Yes —→				eriod covered / this report	FROM	Mo.	Ye	TO:	Mo	1	Year
2 🗌 No	El No. (9 digits)			ame of person	to conta	ct rega	rding this ı	report –	Print or	r type	
c. Does this company own or control any	Enter name, address, and EI N owned or controlled company	lumber of the									
other company or companies?	stated of controlled company		Tit	tle							
vonpanies:			<b>—</b>	lephone	Are	ea code	Numbe	r		Extensio	n
098 1 🗌 Yes →				•							
2 🗌 No	El No. (9 digits)			gnature of auth	iorized p	person			Date		
FORM CB-5400	÷ .					PDC					

					ISUS OF RETAIL TRADE									
CAD OF THE CE	CB-5504	1	<u> </u>			OMB No. 0607-0719: Ap	proval l	Expires (	06/30/9					
If you have this report, Census Bur be sure to r File Numbe to the right. completed i BUR 1201 Jeffe Toll-free as:	E: FEBRUARY questions about o please call or writ eau. In any comm refer to the 11-digi rr (CFN) printed in Please return you report to: EAU OF THE CEN Least 10th Street ersonville, IN 4713 sistance, 8:00 a.m. e, Monday throug 1–800–233–6136	completing e the unication, t Census the label ur SUS 4-0001 to 8:00 p.r h Friday:				c	B-5504	]						
instr	se read the accom uctions before ans questions.													
	Census use													
IS CONF	ESPONSE IS REQ tionnaire to answe IDENTIAL. It may n respondents' file	be seen o	nlv bv Cei	tle 13, United S return the repor nsus Bureau em	ates Code, requ t to the Census	y errors in name, address, and ZIP Co ires businesses and other organizatic Bureau. By the same law, <b>YOUR CE</b> y be used only for statistical purpose	ons that NSUS I es. Furth	receive <b>REPOR1</b> her, copi	r es					
ls the Emplo label the san on its latest	PLOYER IDENTIFIC yer Identificatio ne as the one us 1992 Employer's sury Form 941?	n (El) Num ed for this	nber shov s establis	shment	HOW TO REPORT DOLLAR FIGURES	Dollar figures should be <b>rounded</b> to <b>thousands</b> of dollars. <b>Example:</b> If a figure is <b>\$1,125,628.79</b> • <i>Preferred</i> report	lions (000) <b>1</b>	Thou-   sands (000)   <b>126</b>	lars (000)					
		– Report c	urrent El	No. below	Item 4.	OLLAR VOLUME OF BUSINESS	1 Mil.	125 Thou.	629 Dol.					
	(9	digits)				nerchandise and other	010		l					
	YSICAL LOCATION tablishment's ph				operating excise taxe	receipts for 1992 (Include			l I					
the addre addresses	are not physical lo	label? (P.C ocations)	D. box and	d rural route	Item 5. F Payroll in a. <u>Annual</u>	1992, BEFORE DEDUCTIONS	Mil. 030 031	Thou.       	Dol.     					
City, towr	n, village, etc.		State	ZIP Code	b. First qu	larter (January–March)			 					
<b>boundarie</b> 095 1			e, etc.?	de the legal	Number o period inc (Include bo employees	MPLOYMENT f paid employees for pay luding March 12, 1992 th full- and part-time (ND OF BUSINESS	032	Numbe	r					
physically	ype of municipal y located?	-	establisl	hment	What was	this establishment's PRINCIPAL Isiness in 1992? Mark (X) only								
2 [ 3 [ 4 [	Otty, vinage, or Town or townsh Other – <i>Specify</i> Do not know	iip	nt physic	ally located?	Gasoline st Truck stop Gasoline/co Self-service	ervice station	070	554 554 554 554 554 554	4112 4121 4131 4113					
Item 3. OPE	ERATIONAL STAT	US	1	Number of mon	hs Fuel oil dea	iler		598	301					
	y months during blishment active		S			y store		553 517						
establish	the following be ment's status at only ONE box.				Automotive	e repair, general		☐ 753 ☐ 753	3810					
2 [ 3 [ 4 [	<ul> <li>In operation</li> <li>Temporarily or s</li> <li>Ceased operatio</li> <li>Sold or leased trigit</li> <li><i>Give date at rigitetc., below</i></li> </ul>	n – Give da o another c ht AND ent	ate at righ		· ·	of business – <i>Describe</i>		☐ 777	7777					
Name of I	new owner or ope	rator			_									
r uniber u	ind street													
City			State	ZIP Code	_									

													Page 2	
Item 9. CLASS OF CUSTOMER Whole percer						Item 10. MERCHANDISE LINI			- Cont	1				
Item 9. CLASS OF CUSTOMER				ole perc of sales					Cen-		ATES a t dollars			
Report the percentage of this establishment's total sales in 19	992	-	237					Merchandise lines	sus			-	Per-	
(item 4) to each class of custom	er.								use	Mil.	Thou.	Dol.	cent	
a. General public (household cons	umers	6				з.	. Gro	oceries and other foods –						
and individuals)							Cor	ntinued						
			239											
<ul> <li>b. Other, including retailers; whole institutional, industrial, commercial</li> </ul>	cial,						a	Candy	109					
professional, and farm users (fo farm production); and governme		in					е.	All other foods (drv						
Item 10. MERCHANDISE LINES								groceries; canned, frozen, and bottled foods; produce,						
Report sales for each merchand	ieo li	ne eold	by this					etc.)	112					
establishment, either as a dollar	r fiau	re or as	a who	le			-							
percent of total sales. (See HOW FIGURES on page 1 and HOW TO F	REPOR	RT PERC	ENTS b	i elow)										
		1			_		т	Sum of lines 3a through 3e	100					
HOW TO If figure is <b>38.76%</b> total sales:	of	Mil.	Thou.	Dol.	Per- cent		<b>A</b>							
REPORT PERCENTS • Report whole percent	cents ·			<b>→</b>	39	-#.		tomotive lubricants (oil, ases, etc.)	730					
Not acceptable —				>	38.76									
		ESTIM	ATES a	re acce	ptable.	5.		als and snack items			I I			
Merchandise lines	Cen- sus	Report	t dollars	ь Ок ре	rcents.			nerally served for mediate consumption			I I			
	use	Mil.	Thou.	Dol.	Per- cent		(inc	clude restaurant sales of ck stops)	120		I I			
1. Automotive fuels	230	231			232		aut	5. Ctopo,	.20	<u> </u>				
			I I	I		6	Pac	kaged liquor, wine, and						
			I I	I		0.	bee		140					
				l										
<b>a.</b> Unleaded regular gasoline	721					7.	. Cig	ars, cigarettes, tobacco, 1 smokers' accessories						
				1			(exe	clude sales from vending	150		I			
<ul> <li>b. Unleaded mid-grade gasoline</li> </ul>	722			 			ma	chines operated by others)	150					
gasonne	/			I			Car				I I			
c. Unleaded premium gasoline	723					8.	and	s, trucks, motorcycles, d other powered vehicles	700					
				I										
d. Leaded gasoline	724			I		9.		usehold fuels (oil, LP gas,						
	705			I			wo	od, coal)	780					
e. Diesel fuel	725			l		10	Pet	foods and supplies	800					
f. Other automotive fuels	726			1					000					
						11.		other merchandise port receipts for services			I			
				' 				line 12)	890					
<b>g.</b> Sum of lines 1a through 1f	720							ecify principal lines and imated sales below						
<ol> <li>Automotive tires, tubes, batteries, parts, accessories</li> </ol>			I I	I			esti	iniated sales below						
(Report parts installed in		1	I I	I			a.		891					
repair on line 12a)				l			а.		031					
a. Automotive tires and tubes	741			1			ь.		892					
				1										
<b>b.</b> Automotive parts	744													
<b>c.</b> Storage batteries	749	l i	I İ	I		10	с.	nonmerchandise receipts	893					
	749					12.	EX	CLUDING SALES AND						
d. Automotive accessories and				I				HER TAXES (Include tals, storage, and other						
sundry supplies (include polishes, paint, decorative							ser	vices provided to tomers. Exclude all receipts						
items, etc.)	754						and	d commissions received m lottery ticket sales.)						
				1			TFO	in lottery ticket sales.)						
Sum of lines 2s through 2d	740			1							I			
<ul><li>e. Sum of lines 2a through 2d</li><li>3. Groceries and other food</li></ul>	740						a	Parts installed in repair	907					
items for human consumption				l										
off the premises (Include candy, gum, etc. Report			I	I				Labor charges for work performed by this						
vitamins on line 11 and pet food on line 10.)			I I	I				establishment	904					
				l			<b>c</b>	Rental or lease of						
							a	automobiles, trucks, or	~~~					
a. Dairy products and related				l I			-	utility trailers	923					
foods (Include milk, cheese, butter, yogurt, ice cream,				1 			d. (	Car wash receipts	934		I I			
eggs, etc. Report hand- dipped ice cream and yogurt				I										
on line 5.)	104			I			е.	All other nonmerchandise						
				I				receipts	954					
<b>b.</b> Bakery products not baked			I I	I										
on the premises, except frozen	106			l				Sum of lines 12s through 12-	900					
				l			r. 3	Sum of lines 12a through 12e	500					
<b>c.</b> Bottled, canned, or				I I		13	т <b>с</b>	TAL (Should equal item 4			I I			
packaged soft drinks	108			ı İ		13.	. 10	if reporting in dollars)	990		I I		100%	

FORM CB-5504

				Page
FORM CB-5504 1992 CENSUS OF GASOLINE SERVIO	RETAIL 1		OMMERCE HE CENSUS	Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)
Item 11. SPECIAL INQUIRIES				Item 11. SPECIAL INQUIRIES – Continued
a. Was this establishment a petrol bulk plant with ABOVE GROUN storage tanks having a capacity 10,000 gallons or more in 1992	D v of	288 1 🗌 ` 2 🗌 I		g. Did this establishment operate 24 311 1 ☐ Yes hours daily in 1992? 2 ☐ No
<ul> <li>b. Storage capacity</li> <li>(1) What was the TOTAL GALLO STORAGE CAPACITY of ALL automotive fuels combined diesel, etc.) AT THE END of</li> </ul>	_ (gasoline,	Gallo 289	ons	h. Did this establishment perform automotive repair work in 1992?       274       1 □ Yes         2 □ No
(2) How many of the following size storage tanks did this	Mark (X) if "0"	Number o	of tanks	i. Mechanics
establishment have at the end of 1992?	290 1	291		(1) Did this establishment employ any mechanics (full- and 275 1 ☐ Yes part-time) during the pay period 2 ☐ No
(a) <u>4,000 gallon</u>	292	293		including March 12, 1992? If "Yes," complete (2) If "No," skip to j
<b>(b)</b> 6,000 gallon	1			Number
(c) 8,000 gallon	294 1 🗌	295		(2) Enter the number of mechanics (full- and part-time) working in this establishment during the pay period including March 12, 1992.
	296	297		j. Automotive service bays
(d) <u>10,000 gallon</u>	1 🗌 298	299		(1) Did this establishment have any automotive service bays as of December 31, 1992?       277       1 □ Yes
(e) Other size	1 🗆			lf "Yes," complete (2) If "No," skip to item 13
		300		Number
(f) Total (Sum of (a) through	(e))			(2) How many automotive service 278 bays did this establishment have
c. Mark (X) the ONE box which be	st			in 1992?
describes the PRINCIPAL kind o supplier of this establishment in		301		k. Did this establishment offer 24-hour 312 1 🗌 Yes
(1) Refiner		1		truck repair?
(2) Single brand wholesaler		2		Item 12. Not applicable to this report
(3) Multi-brand wholesaler		з 🗌		Item 13. LEGAL FORM OF ORGANIZATION Which of the following best describes this establishment's
(4) Other – <i>Describe</i>		4 🗌		legal form of organization during 1992? <i>Mark (X) only ONE box.</i>
<b>NOTE</b> – In answering part d and (if as <b>gasoline</b> any fuels which are <b>p</b> gasohol), but exclude other fuels (e	imarily gas	(1) and (2), ro <b>soline</b> (e.g.,	eport	2
d. Did this establishment sell gaso 1992?	line in			5 Government – <i>Specify</i> 0 Corporation <i>(Do not mark if any form of</i>
If "Yes," complete (1) and (2) If "No," skip to e		302 1 🗌 Y 2 🗌 I		$\begin{array}{c} \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline $
		Num	ber	
(1) Number of GALLONS of gas sold during 1992.	oline	303		Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION
(2) How many gasoline PUMPS operated for sale of gasolin the end of 1992?	were e at	Num 304	ber	<ul> <li>a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero?</li> <li>1 Yes - Complete this item</li> </ul>
e. Did this establishment sell othe automotive fuels (include diese during 1992?		<sup>305</sup> 1 🗌 ` 2 🗌 I		2 🗌 No – Skip to item 15
If "Yes," complete (1) and (2) If "No," skip to f			h - 1	b. Is this company owned or controlled by another company?
(1) Number of GALLONS of oth automotive fuels (include di sold during 1992.	er iesel)	<u>Num</u> 306	ber	
(2) How many other automotive PUMPS (include diesel) wer operated at the end of 1992	e	Num 307	ber	$\begin{array}{ccc} 097 & 1 \square \text{ Yes} \longrightarrow \\ 2 \square \text{ No} \\ \end{array}$
f. Did this establishment offer		<sup>308</sup> 1 🗌 `	Yes	EI No. (9 digits) c. Does this company Enter name, address, and El Number of the
SELF-SERVICE sale of automotiv fuels in 1992? If "Yes," complete (1) and (2) If "No," skip to g	ve	2 🗌 I	No	own or control any other company or companies?
		Num	ber	
(1) Number of GALLONS of automotive fuels sold throu ELF-SERVICE pumps in 199	gh 92.	309 Nium	bar	098 1 □ Yes → 2 □ No
(2) How many automotive fuel PUMPS were SELF-SERVICE pumps at the end of 1992?	I	310 Num	Del	El No. (9 digits)

_															Page 4
	em 14. OWN . How many es label (or as c	stablishm	nents	operated un	der the	Emp	lover ident			r shown in	the		079	Numbe	r
	lf more than c each establish	one, provic ment. The	le the head	physical loc	ation ac	dres	s and other e first, follov	ed by a	Il other lo	cations. If m	or ore				
	room is neede Estimates ar							eparate	sheet of p	oaper.					
	Name											1992		<sup> </sup> Thou.	Dol.
	Number and st	reet										Sales	081	I I	I I
	City						5	tate	ZIP	Code		Annual bayroll	082	1	
1	Kind-of-busine	se descript	tion									Paid	employ d includ	yees for ling Ma	r pay rch 12
	Kind-or-busine.	as deacrip									(	083			
												Census	s <sup>088</sup>		
_	Name											<b>use</b> 1992	Mil.	<sup>†</sup> Thou.	Dol.
	Number and st	reet										Sales	081	1	l I
	City							tate	ZIP	Code		Annual bayroll	082		
2								lute	2.1	Cout		Paid	employ	yees for ing Ma	pay
	Kind-of-busine:	ss descrip	tion								(	083			
												Census use	s <sup>088</sup>		
	Name											1992		<sup> </sup> Thou.	Dol.
	Number and st	treet										Sales	081	 	
	City						5	tate	ZIP	Code		Annual payroll	082	1	1
3	Kind-of-busine	ss descrip	tion									Paid period	employ d includ	yees for ling Ma	r pay rch 12
											(	083			
												Census use	s <sup>088</sup>		
	Name											1992	Mil.	<sup>†</sup> Thou.	Dol.
	Number and st	reet										Sales		 	
	City						5	tate	ZIP	Code		Annual bayroll	082	 	
4	Kind-of-busine	ss descrip	tion									Paid period	employ d includ	yees for ling Ma	rch 12
											(	083			
												Census use	s <sup>088</sup>		
R	EMARKS – Ple	ase use th	is spa	ace for any ex	planatior	ns tha	at may be es	sential i	in underst	anding your	reported data.				
		IFICATION									ce with instructi		Deini		
b	eriod covered y this report	FROM:	Mo.	1	TO:	Mo.   			ot person	i to contact r	egarding this re	port –	Print or	type	
	elephone	Area code		Number		Exte	nsion	Title							
s	ignature of auth	orized per	rson									Date			
FOR	M CB-5504						00 PV TU	5004	FOR YOU						

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

U.S. DEPARTMENT OF COMMERCE	<sup>™</sup> <b>1992 CEN</b>	SUS OF DISTRIBUTI	VE TRADE	S
<b>CB-5001</b>		OMB No. 0	0607-0726: Approval	Expires 06/30/9
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:			CB-500 —	<b>1</b>
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001				
Toll-free assistance, 8:00 a.m. to 8:00 p.m. eastern time, Monday through Friday: 1–800–233–6136				
Please read the accompanying instructions before answering the questions.				
Census use				
	(Ple	ase correct any errors in name, addre	ess. and ZIP Code.)	
YOUR RESPONSE IS REQUIRED BY L this questionnaire to answer the question IS CONFIDENTIAL. It may be seen only retained in respondents' files are immun	bv Census Bureau empl	es Code, requires businesses and oth o the Census Bureau. By the same lay oyees and may be used only for statis	stical purposes. Fur	ther, copies
Item 1. EMPLOYER IDENTIFICATION NUM Is the Employer Identification (EI) Number		Item 4. PAYROLL	Mil. 030	Thou. Dol.
label the same as the one used for this e on its latest 1992 Employer's Quarterly I	stablishment	Payroll in 1992, BEFORE DEDU	CTIONS	
Return, Treasury Form 941?		a. Annual	031	· ·
094 1 🗌 Yes 2 🗌 No – <i>Report cur</i>	rent El No. below	_	031	
(9 digits)		b. First quarter (January–March	a)	
Item 2. PHYSICAL LOCATION	41	Item 5. EMPLOYMENT	032	Number
<ul> <li>a. Is this establishment's physical locati the address shown in the label? (P.O. I addresses are not physical locations)</li> <li>1 Yes 2 No - Report phy</li> </ul>	box and rural route	Number of paid employees for p period including March 12, 199 (Include both full- and part-time employees)	pay 2	
· · · ·		Item 6. OPERATING EXPENSES	Mil.	Thou. Dol.
Number and street           City, town, village, etc.	tate ZIP Code	<b>Operating expenses for 1992</b> (In payroll, but exclude cost of goods s and interest expense)	nclude	
		Item 7. INVENTORIES		
<ul> <li>b. Is this establishment physically locate boundaries of the city, town, village, and a second</li></ul>	etc.? Iries	a. Did you have inventories at 1 105 1 □ Yes - Complete the 2 □ No - Skip to item 8	e remainder of the i	tem
<ul> <li>c. In what type of municipality is this esphysically located?</li> <li>096 1 City, village, or borough</li> <li>2 Town or township</li> <li>3 Other - Specify</li> <li>4 Do not know</li> </ul>	tablishment	2 🗌 No – Complete only	ethod of valuation of the LIFO amount nes c and c(2) / line c	<b>17</b> T plus the LIFO
d. In what county is this establishment <b>j</b>	physically located?		l of 1992 I Thou. <sup> </sup> Dol. Mil.	End of 1991 Thou. Dol.
HOW TO Dollar figures should be <b>rounded</b> bit to <b>thousands</b> of dollars.	I- <sup> </sup> Mil- <sup> </sup> Thou- <sup> </sup> Dol- ns   lions   sands   lars	046	047	
REPORT     It information of utilities.     1000000000000000000000000000000000000		c. Total inventories	112	
Item 3. DOLLAR VOLUME OF Bi			113	<u> </u>
BUSINESS 010 a. Sales and operating receipts for 1992 (Include the gross selling value of business conducted for every of business conducted for		(2) Amount subject to LIFO costing (gross)		
others) 121	1 🗌 Yes – <i>Go to</i>	(a) Amount of the		
b. Did this establishment earn commissions for the sale of merchandise?	$2 \square No - Skip to$ <i>item 4</i>	(b) LIFO value of the line c(2)	115	
c. Gross selling value of business conducted on a commission basis (Include in item 3a)	I.   Mil.   Thou.   Dol.         	(net) NOTE – The sum of lines	s c(1) and c(2) shou	ld equal line c
d. Commissions received (On <sup>123</sup> transactions reported in item 3c)		The sum of lines line c(2)	s c(2a) and c(2b) sh	ould equal
PENALTY FOR FAILURE TO REPORT	· · ·		CONTIN	NUE ON PAGE

	Page 2
Item 8. TOTAL PURCHASES OF MERCHANDISE IN 1992 Bil. Mil. Thou. Dol.	Item 11. KIND OF BUSINESS
Purchases of merchandise for resale     Bit.     Mit.     Thou.     Doi.       (Net of returns, allowances, and trade and cash discounts but including amounts allowed for trade-ins)     160     160     160	What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only ONE box. If none applies, mark box h and enter the description by which your business is known to the trade or public.
NOTE – If purchases are greater than sales, please provide an explanation in the REMARKS section	070 a. Furniture and homefurnishings (1) Household and lawn furniture
Item 9.       SALES BY CLASS OF CUSTOMER       Whole percent of sales         Report the percentage of this establishment's total sales in 1992 (item 3a) to each class of customer.       141	(2) Office and business infinities for the second secon
a. Export sales	<ul> <li>b. Lumber, plywood, millwork, and wood panels – wholesale</li> </ul>
<ul> <li>B. Restaurants, food services, and for contract feeding</li> </ul>	<ul> <li>(1) Lumber without yard (excluding hewn posts, poles, and ties)</li></ul>
143 c. Retailers and repair shops	(3) Plywood, millwork, and wood panels
d. Other wholesale establishments	(4) Forest products, except lumber
145 e. Industrial users (manufacturing and mining)	(1) Brick, block, tile, clay/cement sewer pipe       □ 503210         (2) Sand, gravel, and stone       □ 503220         (3) Cement, lime, and related products       □ 503230
146 f. Institutional, commercial, and professional users	<ul> <li>(3) Cement, lime, and related products</li></ul>
147 g. Farmers (for farm use)	(7) Paints, varnishes, wallpaper, and supplies
148 h. Household consumers and individual users	(1) Lumber yard.       521119         (2) Building materials       521139         (3) Paint, glass and wallpaper store       523109
i. Builders and contractors	e. Electrical goods
150 j. Governmental bodies (Federal, State, and local)	<ul> <li>(1) Electrical apparatus and equipment, wiring supplies, and electrical construction materials (including industrial controls).</li> <li>(including industrial controls).</li> </ul>
k. TOTAL (Sum of lines a through j 100%)	<ul> <li>(2) Electrical appliances and television and radio sets</li></ul>
Item 10. TYPE OF OPERATION	(4) Other electronic parts and equipment (including blank audio and video tapes)
What was this establishment's PRINCIPAL type of operation in 1992? <i>Mark (X) only</i> <i>ONE box.</i> 060	<ul> <li>f. Hardware</li></ul>
a. Merchant (buying and selling on own account)	reingeration equipment and supplies
(1) Merchant, jobber, distributor	(1) Plumbing and heating equipment and supplies (hydronics)
(2) Importer	<ul> <li>(2) Warm air heating and air-conditioning equipment and supplies.</li> <li>(3) Refrigeration equipment and supplies</li> </ul>
(3) Exporter	<b>h.</b> Other kind of business – <i>Specify</i>
(4) Farm-product assembler	
<b>b.</b> Manufacturers' sales branches and offices	REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.
c. Agent, broker, and commission merchant	
(1) Auction company	
(2) Broker (representing buyers and sellers)	
(3) Commission merchant	
(4) Import agent	Item 12. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions.
(5) Export agent	Period covered FROM: Mo. Year TO: Mo. Year
(6) Manufacturers' agent	Name of person to contact regarding this report – <i>Print or type</i>
<b>d.</b> Other broker or agent – <i>Specify type</i>	Title
	Telephone Area code Number Extension
	Signature of authorized person Date
	FORM FOR YOUR RECORDS

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

U.S. DEPARTMENT OF CO BUREAU OF THE CENSUS		1992 CENS		DISTRIBUTIVE	TRAD	ES	
CB-5012				OMB No. 0607-0	726: Approv	al Expires	06/30/94
DUE DATE: FEBRUARY 15, If you have questions about complet Census Bureau. In any communicat be sure to refer to the 11-digit Cens File Number (CFN) printed in the lat to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-000 Toll-free assistance, 8:00 a.m. to 8:0 eastern time, Monday through Frid. 1–800–233–6136	eting cion, sus bel 1 00 p.m.,				CB-50 -	12	
Please read the accompanying instructions before answering the questions.							
Census use							
		(Plea	ase correct anv	errors in name, address, ar	nd ZIP Code.	)	
YOUR RESPONSE IS REQUIRED this questionnaire to answer the of IS CONFIDENTIAL. It may be see retained in respondents' files are Item 1. EMPLOYER IDENTIFICATION Is the Employer Identification (EI) label the same as the one used for	uestions and en only by C immune fron N NUMBER Number sho	I return the report to ensus Bureau emplo n legal process.	HOW TO	ureau. By the same law, <b>YO</b> be used only for statistical collar figures should be <b>rounded</b> o <b>thousands</b> of dollars. Example: If a figure	Bil- Mi lions   lion (000) (00	S REPOR arther, cop I- <sup> </sup> Thou- ns   sands 0) <sub> </sub> (000)	T ies
on its latest 1992 Employer's Quar Return, Treasury Form 941?	rterly Feder	al Tax		eport • Preferred Acceptable	1	_	629
094 1 ☐ Yes 2 ☐ No – <i>Rep</i> (9 digits		l No. below	BU - a. Sales and for 1992	LLAR VOLUME OF SINESS I operating receipts (Include the gross selling	Bil. M		Dol.
Item 2. PHYSICAL LOCATION			others)	usiness conducted for			1
<ul> <li>a. Is this establishment's physical the address shown in the label? addresses are not physical location</li> <li>093 1 Yes 2 No - Rep</li> <li>Number and street</li> </ul>	is)	e same as nd rural route location below	commiss merchane c. Gross sel conducte	establishment earn ions for the sale of dise? lling value of business of on a commission lude in item 4a)	2 [	_ Yes – Go <i>line c</i> _ No – Ski <i>line e</i> il. <sup>†</sup> Thou. ↓	ip to
City, town, village, etc.	State	ZIP Code	d. Commiss	ions received (On ns reported in item 4c)	123		1
b. Is this establishment physically	located ins	ide the legal	NOTE – If	this is the only establishme	ent of this fir	m skip to i	item 5
boundaries of the city, town, vi ₀95 1 ☐ Yes 3 ☐ No legal 2 ☐ No 4 ☐ Do not kr	boundaries		establish mined in	of products sold by this ment manufactured or the United States by pany or subsidiaries	124	Percen	t %
<ul> <li>c. In what type of municipality is physically located?</li> <li>096 1          City, village, or borouge</li> </ul>		shment	establish	transfers to other ments within your (DO NOT include in	M 152	il. Thou.	Dol.   
2 🗌 Town or township 3 🛄 Other – <i>Specify</i>	JII		Item 5. PA Payroll in 19 a. Annual	YROLL 992, BEFORE DEDUCTION	NS 030	il.   Thou.   	Dol.   
4 Do not know					031		
d. In what county is this establish	ment physic	carry located?	b. First qua	rter (January-March)		Numbe	r
Item 3. OPERATIONAL STATUS a. How many months during 1992 this establishment actively oper	was	Number of months	a. Number o period in	of paid employees for pay cluding March 12, 1992 oth full- and part-time	032		
b. Which of the following best des establishment's status at the en Mark (X) only ONE box.			b. How man were inve (1) Selling		<b>131</b>	Numbe	r
001 1 ☐ In operation 2 ☐ Temporarily or season 3 ☐ Ceased operation – <i>Gi</i> 4 ☐ Sold or leased to anot <i>Give date at right ANL</i> <i>etc., below</i>	<i>ve date at rig</i> her operator	-	(3) Suppo establi (i.e., ci	support (including office an I, warehousing, customer e, and maintenance employ rting functions of other ishments in your company entral administrative, pting, research, etc.)			
Name of new owner or operator				nting, research, etc.)	134		
Number and street			(4) Manut (5) Other	•	135		
City	State	ZIP Code	- NOTE – The	e sum of lines 1 through 5 shou	ld equal total	emplovmen	nt
PENALTY FOR FAILURE TO REPORT		1			-	INUE ON	

			Page 2
Item 7. OPERATING EXPENSES	Mil. Thou. Dol	Lem 11. KIND OF BUSINESS	
<b>Operating expenses for 1992</b> (Include payroll, but exclude cost of goods sold and interest expense)		a. What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only ONE box.	
Item 8. INVENTORIES			070
a. Did you have inventories at the end of 1		I. Automobiles and other motor venicles	
105 1 ∐ Yes – Complete the remainder o 2 □ No – Skip to item 9	f the item	(a) Automobiles and motorcycles (new and used)	501211
b. Were inventories of this establishment s the last-in, first-out (LIFO) method of valu		(b) Buses and recreational vehicles (including snowmobiles and mopeds)	501212
111 1 ☐ Yes – Use the sum of the LIFO an reserve for lines c and c(2)	mount plus the LIFO	(c) Light trucks and vans (14,000 lb. or less)	501213
$2 \square No - Complete only line c$		(d) Medium trucks (14,001 to 26,000 lb.)	501222
End of 1992	End of 1991	(e) Heavy trucks and tractors (over 26,000 lb.) .	501223
<u>Mil.</u>   Thou.   Dol. 046	Mil. <sup> </sup> Thou. <sup> </sup> Dol		
c. Total inventories		<ol> <li>Motor vehicle parts, accessories, and supplies</li> </ol>	
(1) Amount not subject to LIFO costing		(a) New parts warehouse distributor (selling primarily to jobbers or other wholesalers)	501310
107     (2) Amount subject to LIFO costing			
(gross)		(b) New parts jobbers (selling primarily to retailers and repair shops)	501320
(a) Amount of the LIFO reserve		(c) Used parts dealer	501500
(b) LIFO value of 109     the line c(2)     (net)	115     	<b>3.</b> Other kind of business – <i>Specify</i>	
<b>NOTE –</b> The sum of lines c(1) and c(2) The sum of lines c(2a) and c(2 line c(2)	-	b. Did you operate a machine shop at this location in 1992?	<sup>155</sup> 1 🗌 Yes 2 🗌 No
Item 9. TOTAL PURCHASES OF PURCH MERCHANDISE IN 1992 Bil.	HASES AT COST VALUE	o. Hus over oo percent or your business	<sup>157</sup> 1 🗌 Yes 2 🗌 No
Purchases of merchandise for resale 160 (Net of returns, allowances, and trade and cash discounts; but including		rental agreements?	2 🗆 NO
	1 1 1	Item 12. TYPE OF OPERATION	
amounts allowed for trade-ins)		Item 12. TYPE OF OPERATION	
	se provide an	Item 12. TYPE OF OPERATION What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.	
amounts allowed for trade-ins) <b>NOTE</b> – If purchases are greater than sales, plea explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? <i>Mark (X) only</i> <i>ONE box.</i>	060
amounts allowed for trade-ins) <b>NOTE</b> – If purchases are greater than sales, plea explanation in the REMARKS section	Whole percent	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.	
amounts allowed for trade-ins) NOTE – If purchases are greater than sales, plead explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? <i>Mark (X) only</i> <i>ONE box.</i>	060
amounts allowed for trade-ins) NOTE – If purchases are greater than sales, plea explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box. a. Merchant (buying and selling on own account)	
amounts allowed for trade-ins) NOTE – If purchases are greater than sales, plead explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer	12
amounts allowed for trade-ins) NOTE – If purchases are greater than sales, plea explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer. a. Export sales b. Restaurants, food services, and contract	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant	☐ 12 ☐ 13 ☐ 11
amounts allowed for trade-ins) NOTE – If purchases are greater than sales, plead explanation in the REMARKS section Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer. a. Export sales b. Restaurants, food services, and contract feeding	Whole percent of sales	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter	☐ 12 ☐ 13
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE – If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing</li> </ul>	Whole percent of sales 141 142	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant	☐ 12 ☐ 13 ☐ 11
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> </ul>	Whole percent of sales 141 142 143 144	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer	☐ 12 ☐ 13 ☐ 11
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing</li> </ul>	Whole percent of sales           141           142           143           144           145           146	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer	☐ 12 ☐ 13 ☐ 11 ☐ 20
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER</li> <li>Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional</li> </ul>	Whole percent of sales           141           142           143           144           145	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant         b. Manufacturers' sales branches and offices         c. Agent, broker, and commission merchant         (1) Auction company	☐ 12 ☐ 13 ☐ 11 ☐ 20 ☐ 41
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional users</li> <li>g. Farmers (for farm use)</li> <li>h. Household consumers and individual</li> </ul>	Whole percent of sales           141           142           143           144           145           146	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer	<ul> <li>12</li> <li>13</li> <li>11</li> <li>20</li> <li>41</li> <li>42</li> </ul>
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional users</li> <li>g. Farmers (for farm use)</li> </ul>	Whole percent of sales           141           142           143           144           145           146           147	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant         b. Manufacturers' sales branches and offices         c. Agent, broker, and commission merchant         (1) Auction company         (2) Broker (representing buyers and sellers)         (3) Commission merchant	<ul> <li>12</li> <li>13</li> <li>11</li> <li>20</li> <li>41</li> <li>42</li> <li>43</li> </ul>
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional users</li> <li>g. Farmers (for farm use)</li> <li>h. Household consumers and individual</li> </ul>	Whole percent of sales           141           142           143           144           145           146           147           148	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant         b. Manufacturers' sales branches and offices         c. Agent, broker, and commission merchant         (1) Auction company         (2) Broker (representing buyers and sellers)         (3) Commission merchant         (4) Import agent	<ul> <li>12</li> <li>13</li> <li>11</li> <li>20</li> <li>41</li> <li>42</li> <li>43</li> <li>44</li> </ul>
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER</li> <li>Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional users</li> <li>g. Farmers (for farm use)</li> <li>h. Household consumers and individual users</li> </ul>	Whole percent of sales           141           142           143           144           145           146           147           148           149	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant         (3) Merchant         (1) Auction company         (2) Broker (representing buyers and sellers)         (3) Commission merchant         (1) Auction agent         (3) Commission merchant	<ul> <li>12</li> <li>13</li> <li>11</li> <li>20</li> <li>41</li> <li>42</li> <li>43</li> <li>44</li> <li>45</li> </ul>
<ul> <li>amounts allowed for trade-ins)</li> <li>NOTE - If purchases are greater than sales, plead explanation in the REMARKS section</li> <li>Item 10. SALES BY CLASS OF CUSTOMER Report the percentage of this establishment's total sales in 1992 (item 4a) to each class of customer.</li> <li>a. Export sales</li> <li>b. Restaurants, food services, and contract feeding</li> <li>c. Retailers and repair shops</li> <li>d. Other wholesale establishments</li> <li>e. Industrial users (manufacturing and mining)</li> <li>f. Institutional, commercial, and professional users</li> <li>g. Farmers (for farm use)</li> <li>h. Household consumers and individual users</li> <li>i. Builders and contractors</li> <li>j. Governmental bodies (Federal, State,</li> </ul>	Whole percent of sales           141           142           143           144           145           146           147           148           149	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.         a. Merchant (buying and selling on own account)         (1) Importer         (2) Exporter         (3) Merchant         (3) Merchant         b. Manufacturers' sales branches and offices         c. Agent, broker, and commission merchant         (1) Auction company         (2) Broker (representing buyers and sellers)         (3) Commission merchant         (4) Import agent         (5) Export agent         (6) Manufacturers' agent	<ul> <li>12</li> <li>13</li> <li>11</li> <li>20</li> <li>41</li> <li>42</li> <li>43</li> <li>44</li> <li>45</li> <li>46</li> </ul>

FORM CB-5012

							Pa	age 3
FORM CB-5012 1992 CENSUS ( MC			Βυτι	ARTMENT BUREA			Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)	
Item 13. COMMODITY LIN							Item 13. COMMODITY LINES – Continued	
Report sales by commodit	y grou	up eith	er as a	dollar f	figure	or as	ESTIMATES are acceptable.	
a whole percent of total sa marketed under capital, finar receipts derived from mercha	ales (In nce, or	nclude 1 full pay	the valu out lea	ie of mei ses and	rchandi rental	se		· Per- cent
HOW TO BEFORT	% of	Bil.	Mil.	   Thou.	Dol.	Per- cent	7. Used automotive	
• Report whole p						<b>39</b> 38.76	and equipment 0240	
Not acceptable				ES are a		ble.	8. Tires and tubes 0300	
Commodity lines	Cen- sus use	Bil.	1	ollars OF	1	Per-	9. Construction and mining machinery and equipment	
	100	101	1	1	1	cent 102	(including parts and attachments) 2100	
<ol> <li>New and used automobiles, motorcycles, etc.</li> </ol>			 	1	 		10. Farm machinery, equipment, and parts 2200	
<b>a.</b> New automobiles	0111			 	 	<u> </u>	11. Marine machinery, equipment, and supplies 2620	
<b>b.</b> Used automobiles	0112			<u> </u>	' 		12. Petroleum products –	
c. Motorcycles	0113		 	 	 		refined (exclude liquefied petroleum) 5400	
<b>d.</b> Motor scooters,			l I				13. Sporting and recreational goods and supplies	
mopeds, golfcarts, snowmobiles, and utility trailers	0114		 	 	 		14. Miscellaneous         commodities – Specify	
<b>e. Total</b> (Sum of lines 1a through 1d)	0100		 		 		a. 9811	
2. Buses, campers, and motor homes					<u> </u> 		b9812	
			I I		l l		c. 9813	
a. Buses	0121			- <u> </u>	↓ I		15. Rental and leasing receipts 9940	
<b>b.</b> Motor homes, car trailers, campers, and van conversions	0122		·   	·   	 		16. Service receipts and labor charges (including installed parts)	
<b>c. Total</b> (Sum of lines 2a and 2b)	0120		   		   		a. Labor charges for repair work 9711	
<b>3.</b> Light trucks and vans (14,000 lb. or less)			'   	 	'   		b. Parts installed in repair work 9712	
<b>a.</b> New light trucks	0131		 	 	 <del> </del>		c. Other service receipts and labor charges – Specify	
<b>b.</b> Used light trucks	0132		1	 	 +	<u> </u>		
<b>c.</b> Vans and cargo vans (new and used)	0133		1		 <del> </del>	<u> </u>	9713 9713	
<b>d. Total</b> (Sum of lines 3a through 3c)	0130		 				d. Total (Sum of lines 16a through 16c) 9700	
<ol> <li>Medium trucks and tractors (14,001 to 26,000 lb.)</li> </ol>	0140		,     	; ; ;			17. Receipts for machine shop job work (include receipts for custom	
<ol> <li>Heavy trucks and tractors (more than 26,000 lb.)</li> </ol>			 	I	 		built, rebuilt, or repaired parts) 9980	
<b>a.</b> New heavy trucks	0151		 		1		18. Receipts for service contracts     9720     1     1	
<b>b.</b> New heavy truck tractors	0152						19. TOTAL (Should equal item 4a if reporting in	
<b>c.</b> New truck trailers	0153						dollars) 9990 1 10 10	00%
<b>d.</b> New truck bodies	0154						Which of the following best describes this establishment's	
e. Used heavy trucks, tractors, and trailers	0155						<ul> <li>legal form of organization during 1992? Mark (X) only ONE box</li> <li>003 1  Individual owner (sole proprietorship)</li> </ul>	x.
<b>f. Total</b> (Sum of lines 5a through 5e)	0150		   				<ul> <li>2 Partnership</li> <li>3 Cooperative association (taxable)</li> <li>4 Cooperative association (tax-exempt)</li> </ul>	
6. New and rebuilt automotive parts and supplies (Report parts installed in repair work on line 16b)	0200		     	     	       		<ul> <li>4 Cooperative association (tax-exempt)</li> <li>5 Government - Specify</li></ul>	_

												Page 4
	em 15. OWNE											
а.	Is the FIRST D	DIGIT of your	Census File I	Vumber	(shown in the a	ad	dress label	immediately after "CFN")	a zero?			
		es – Complete i o – Skip to iten										
ь.	Is this compa	ny	Enter name, a	ddress,	and El Number o	of t	he owning o	or controlling company				
	owned or con by another co	trolled mpany?										
	097 1 🗌 Ye	s>										
	2 🗌 No	0						El No. (9 digits)				
c.	Does this con		Enter name, a	ddress,	and El Number o	of t	he owned o	r controlled company				
	or control any company or c											
		s>										
	2 🗌 No	D I						El No. (9 digits)				
			_							079	Numbe	r
d.	How many es label (or as co					tif	ication Nu	mber shown in the		079		
	each establishr	ment. The head	dquarters loca	tion sho	uld be first, follo	we	d by all oth	ndicated below for er locations. If more				
	room is needed Estimates are				MARKS or on a available.	sel	parate shee	of paper.				
$\vdash$	Name	-	5						1992	Mil.	<sup>†</sup> Thou.	Dol.
										081	1	
	Number and str	reet							Sales	. 082	 	1
	City					Sta	ate	ZIP Code	Annu payro	31	Ι	
1	Kind-of-busines	s description							Pa peri	d emplo od includ	yees for ding Ma	rch 12
									083			
									_	088		
	Type of operation	on (choose fro	m item 12)						Cen- sus	089		
									use	089		
	Name								1992	Mil.	Thou.	Dol.
	Number and str	reet							Sales	001	İ	Ì
	City					St	ate	ZIP Code	Annu payro		1	1
	City						ate		Pa	d emplo	yees for	pay
2	Kind-of-busines	s description							083	od includ	aing wai	rch 12
									-			
	Type of operation	on (choose fro	m item 12)						Cen	088		
									sus use	089		
	Name								1992	Mil.	<sup> </sup> Thou.	Dol.
	Number and str	aat							Sales	081	1	1
	Number und str								Annu		1	1
	City					Sta	ate	ZIP Code	payro	ll d emplo		 . nav
3	Kind-of-busines	s description			I				peri	od includ	ding Ma	rch 12
									083			
	Type of operation	on (choose fro	m item 12)						Cen	088		
									sus	089		
R	EMARKS – Plea	ise use this sp	ace for any ex	planatio	ns that may be e	ss	ential in un	derstanding your reported da	ta.			
				bstantial				ared in accordance with instru		<u> </u>		
	eriod covered y this report	FROM: Mo.	Year	то:	Mo.   Yea	ar	Name of pe	erson to contact regarding thi	s report ·	- Print o	r type	
Те	elephone	Area code	Number		Extension		Title					
	gnature of autho	orized person							Da	te		
	M CB-5012				10700051							
. 56	00-0012		PLE	ASE PH	1010COPY ΤΗΙ	51	⊦OKM FOR	YOUR RECORDS				

		SUS OF DISTRIBUTIVE TRADES LES PARTS AND SUPPLIES	
CB-5013		OMB No. 0607-0726: Approval Expires 0	06/30/9
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136	Γ	CB-5013	
Please read the accompanying instructions before answering the questions.			
Census use			
	(Ple	ase correct any errors in name, address, and ZIP Code.)	
this questionnaire to answer the question	s and return the report t by Census Bureau empl- from legal process. ER r shown in the tablishment	es Code, requires businesses and other organizations that receive o the Census Bureau. By the same law, <b>YOUR CENSUS REPORT</b> ovees and may be used only for statistical purposes. Further, copie HOW TO REPORT DOLLAR FIGURES Reample: If a figure is \$1,125,628.79 • Preferred report Acceptable	- es Dol-
		Item 4. DOLLAR VOLUME OF Bil. Mil. Thou.	Dol.
094 1 🗌 Yes 2 🗌 No – <i>Report curr</i>	ent El No. below	BUSINESS 010 a. Sales and operating receipts	
(9 digits)		for 1992 (Include the gross selling value of business conducted for	
<ul> <li>a. Is this establishment's physical locatic the address shown in the label? (P.O. b addresses are not physical locations)</li> <li>093 1 Yes 2 No - Report physical Number and street</li> </ul>		b. Did this establishment earn commissions for the sale of merchandise? c. Gross selling value of business conducted on a commission basis (Include in item 4a)	o to
City, town, village, etc. St	ate ZIP Code	d. Commissions received (On <sup>123</sup> transactions reported in item 4c)	
b. Is this establishment physically locate boundaries of the city, town, village, e	d inside the legal	<b>NOTE</b> – If this is the only establishment of this firm skip to it	tem 5
boundaries of the city, town, village, e ₀₀₅ 1 ☐ Yes 3 ☐ No legal bounda 2 ☐ No 4 ☐ Do not know		e. Percent of products sold by this establishment manufactured or mined in the United States by your company or subsidiaries	9
<ul> <li>In what type of municipality is this est physically located?</li> </ul>	ablishment	f. Value of transfers to other Mil. Thou.	Dol.
096 1 City, village, or borough		company (DO NOT include in item 4a)	D-/
2 ☐ Town or township 3 ☐ Other – <i>Specify</i> 4 ☐ Do not know		Item 5. PAYROLL     Mil.   Thou.         Payroll in 1992, BEFORE DEDUCTIONS     030         a. Annual	
d. In what county is this establishment p	hysically located?	b. First quarter (January–March)	
		Item 6. EMPLOYMENT Number	
Item 3. OPERATIONAL STATUS a. How many months during 1992 was this establishment actively operated?	Number of months	a. Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)	
b. Which of the following best describes establishment's status at the end of 19 Mark (X) only ONE box.		b. How many of the above employees Number were involved in: 131 (1) Selling	
<ul> <li>1 In operation</li> <li>2 Temporarily or seasonally ina</li> <li>3 Ceased operation - Give date</li> <li>4 Sold or leased to another ope Give date at right AND enter r etc., below</li> </ul>	at right ator –	<ul> <li>(2) Sales support (including office and clerical, warehousing, customer service, and maintenance employees)</li> <li>(3) Supporting functions of other stablishments in your company (i.e., central administrative, accounting, research, etc.)</li> </ul>	
Name of new owner or operator		134	
Number and street		(4) Manufacturing (5) Other - Specify 135	
City St	ate ZIP Code	·	
		<b>NOTE</b> – The sum of lines 1 through 5 should equal total employment	

			Page 2
Item 7. OPERATING EXPENSES	Mil. Thou.	ttem 11. KIND OF BUSINESS	
<b>Operating expenses for 1992</b> (Include payroll, but exclude cost of goods sold and interest expense)		a. What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only	
Item 8. INVENTORIES		ONE box.	70
a. Did you have inventories at the end of 1	991 or 1992?	<b>1.</b> Motor vehicle parts and supplies	
105 1 ☐ Yes – <i>Complete the remainder o</i> 2 ☐ No – <i>Skip to item 9</i>	f the item	<ul> <li>(a) New parts – warehouse distributor (selling primarily to jobbers or other wholesalers)</li> </ul>	501310
b. Were inventories of this establishment s the last-in, first-out (LIFO) method of val	ubject to uation?	(b) New parts – jobbers (selling primarily to retailers and repairshops)	501320
111 1 □ Yes – Use the sum of the LIFO a reserve for lines c and c(2) 2 □ No – Complete only line c		0 (c) Used parts dealer	501500
End of 1992	End of 199	(d) Petroleum products marketing equipment	
Mil. Thou. Dol.	Mil. Thou.	(equipment used by gasoline service stations and bulk plants)	501340
046	047		
c. Total inventories	i i	<b>2.</b> Tires and tubes	501400
106     (1) Amount not subject to LIFO			_
$\frac{\text{costing}}{107}   $	113	<b>3.</b> Auto repair shop	753000
(2) Amount subject to LIFO costing (gross)			_
108	114	<b>4.</b> Other kind of business – <i>Specify</i>	777777
(a) Amount of the			
( <b>b</b> ) LIFO value of	115		
(net)		b. Did you operate a machine shop at this	<sup>55</sup> 1 🗌 Yes
<b>NOTE</b> – The sum of lines c(1) and c(2, The sum of lines c(2a) and c(. line c(2)	-	location in 1992?	2 🗌 No
Item 9. TOTAL PURCHASES OFPURCH	HASES AT COST V	c. Was over 50 percent of your business UE accounted for through operating leases or	<sup>57</sup> 1 ☐ Yes 2 ☐ No
MERCHANDISE IN 1992 Bil.	Mil. Thou.	rental agreements?	2 🗆 100
Purchases of merchandise for resale 160 (Net of returns, allowances, and trade and cash discounts; but including amounts allowed for trade-ins)		Item 12. TYPE OF OPERATION	
<b>NOTE</b> – If purchases are greater than sales, plea explanation in the REMARKS section	se provide an	What was this establishment's PRINCIPAL type of operation in 1992? Mark (X) only ONE box.	
Item 10. SALES BY CLASS OF CUSTOMER	Whole perce	t of	30
Report the percentage of this establishment's total sales in 1992	of sales	<b>a.</b> Merchant (buying and selling on own account)	
(item 4a) to each class of customer.		(1) Importer	□ 12
a. Export sales			
	142	(2) Exporter	13
<b>b.</b> Restaurants, food services, and contract feeding		(3) Merchant	11
c. Retailers and repair shops	143	<b>b.</b> Manufacturers' sales branches and offices	20
d. Other wholesale establishments			
<ul> <li>e. Industrial users (manufacturing and mining)</li> </ul>	145	<b>c.</b> Agent, broker, and commission merchant	_
f. Institutional, commercial, and professional	146	(1) Auction company	41
users	147	(2) Broker (representing buyers and sellers) (3) Commission merchant	☐ 42 □ 43
g. Farmers (for farm use)	148	(3) commission merchant	☐ 43 □ 44
<ul> <li>Household consumers and individual users</li> </ul>		(4) Import agent	☐ 44 □ 45
i. Builders and contractors	149	(6) Manufacturers' agent	☐ 43 ☐ 46
j. Governmental bodies (Federal, State, and local)	150	<b>d.</b> Other broker or agent – <i>Specify type</i>	77
k. TOTAL (Sum of lines a through j	100%		-
should total 100%)	100 /0	CONTINU	IE ON PAGE 3

FORM CB-5013

огм <b>СВ-5</b> ( 199	D13 2 CENSUS O MOTOR VEHICI		STRI	Βυτιν		DES	IMERCE CENSUS	CE as	ter the 11-digit NSUS FILE NUMBER shown on this report te label on page 1)						
tem 13. (	COMMODITY LINE	s						Iter	m 13. COMMODITY LIN	ES – C	ontinue	d			
a whole pe	es by commodity rcent of total sa	les (Ir	nclude 1	he valu	e of me	rchandi	or as se		Commodity lines	Cen-			ES are a ollars OF		
	nder capital, finand ived from mercha								Commodity lines	sus use	Bil.	l   Mil.	   Thou.	l   Dol.	Per cen
OW TO EPORT	If figure is <b>38.769</b> total sales • Report whole pe		Bil.	   Mil.	   Thou.	   Dol.	Per- cent <b>39</b>	8.	Medium trucks and tractors (14,001 to 26,000 lb.)	0140		   	   	   	
ERCENTS	Not acceptable -			ļ			38.76	9.	Heavy trucks and			1	1		
Comm	odity lines	Cen- sus			ES are a ollars OF		nts.	10.	tractors (over 26,000 lb.) Construction and mining machinery	0150		   	   	   	
		use	Bil.	Mil.	Thou.	Dol.	Per- cent		and equipment (include parts and	2100			i I		
1. New an automo	tive parts and	100	101	l	l	I	102	11.	attachments) Farm machinery,	2100		 	1		
installed on line	s (Report parts d in repair work 24b)			 	1	 		12	equipment, and parts Garden machinery,	2200		 	<u> </u>	<u> </u>	
a. Batte		0211		<u> </u>	1	<u> </u>		12.	equipment, and parts	2220		I	 	 	
	nes (complete)	0212		 	 	   		13.	General-purpose industrial machinery, equipment, and parts	2320		   	   	   	
parts	rical engine s (including ion parts)	0213				 		14.	Petroleum products – refined (exclude liquefied petroleum)	E400		   		 	
d. Brak fluid	e parts (including and all disk and			1	1	 		15.	Electrical apparatus	5400		I I		I	
	n parts)	0214		1	1	l		16	and equipment	1400				ļ	
e. Exha	ust system parts	0215		 	 	   			Electrical appliances, household	1500		   	 	   	
f. Glas		0216		<u> </u>	<u> </u>			17.	Electronic parts and equipment, except communication	1600			İ	l	
g. Hose	es, belts, gaskets, wiper blades	0217		 	 	 		18.	Hardware, except			 	 	 	
h. Filter and t	rs (oil, air, gas transmission)	0218		1	1	 		19.	automotive Flat iron and steel	1700					
i. Engi elect	ne parts, except rical	0219		1	1	 			products	1120			+	 	
j. Body mate	/ parts and repair erials	0221		   	   	   		20.	Flat glass and other construction glass (excluding automotive)	0730		   	   	   	
(sho	pension parts cks, struts, pints, etc.)	0222		   	   	   <del> </del>		21.	Chemicals and allied products (excluding agricultural, plastics, gases and petroleum)	5330		   	   	   	
I. Parts	s, n.e.c.	0223		 	 	 		22.	Miscellaneous commodities – <i>Specify</i>			1	1	i I	
m. Acce	essories	0224		 	 	 			a	9811			1	1	
n. Tota	al (Sum of lines 1a through 1m)	0200		1	1	 							1		
accesso	itomotive parts, ries, and			Ì	i				b	9812			1		
equipm				1	1	 		22	<b>c.</b> Rental and operating	9813		 		 	
a. Engli parts	nes and engine	0241			1	 			lease receipts	9940			1		
<b>b.</b> Body	/ parts	0242		i T	   	'   		24.	Service receipts and labor charges (including installed parts)			   	   	1	
c. Parts		0243		 	1	 			<b>a.</b> Labor charges for repair work	9711		l I	1	1	
	al (Sum of lines 2a through 2c)	0240			1				<b>b.</b> Parts installed in				<u>.</u> 		
	tires and tubes	0311		 	 	   			<ul> <li>repair work</li> <li>Other service receipts and labor charges –</li> </ul>	9712		<u>                                      </u>	<u> </u>   	   	
<b>b.</b> Reca tires mate	pped and used and repair erials	0312		 	 	 			Specify			 	 	 	
c. Tota	al (Sum of lines 3a and 3b)	0300		 	1	 			d Total (Sum of ling-	9713		I	1	I	
	um products ng equipment	0250		 	 	 		25.	d. Total (Sum of lines 24a through 24c) Receipts for machine	9700		, <u> </u> 	 	 	
<ol> <li>New an automo motorcy</li> </ol>		0100							shop job work (include receipts for custom built, rebuilt, or repaired parts)	9980		1		1	
	campers, and	0120		   	   	   		26.	TOTAL (Should equal			   	   	   	
	ucks and vans lb. or less)	0130			1				item 4a if reporting in dollars)	9990			1	1	100

													Page 4
Item 14. LEGAL FORM	I OF OR	GANIZATION			It	lter	m 15. OWNERSHIP, OPERATION -	CONT Conti	ROL, AND	LOCATI	ONS OI	=	
Which of the following legal form of organiza	g best o tion du	lescribes this ring 1992? A	s establi Mark (X) c	shment's only ONE box.	d	1	How many establish the Employer Identi	ficatio	on Numbe	er show	n -	Num 079	ber
<sup>003</sup> 1 ☐ Individual owr	ner (sole	proprietorshi	p)			٦	in the label (or as co THE END of 1992? If more than one, prov			-	on addı	ess and	
2 🗌 Partnership						ł	other information indi headquarters location locations. If more roor	cated shoul	below for a d be first, f	each est followed	ablishm by all (	ent. The other	9
3 🗌 Cooperative as	ssociatio	on (taxable)				f	format in REMARKS o Estimates are accep	or on a	separate s	sheet of	paper.		
4 🗌 Cooperative as	ssociatio	on (tax-exempt	t)			ſ	Name			1992	Mil. 081	Thou.	Dol.
5 🗌 Government –	Specify					ſ	Number and street			Sales Annual	082	1	 
0 Corporation (L cooperative as			n of		1			State	ZIP Code	payroll Paid		 yees for ling Mar	
9 🗌 Other – <i>Specit</i>	ſγ				ľ	'   '	Kind-of-business desc	ription		083			
Item 15. OWNERSHIP	CONT		PATIONS		_	1	Type of operation (cho	ose fro	m item 12)	Cen-	088		
a. Is the FIRST DIGIT	of your	Census File	Number	(shown						sus use	089		
in the address labe		-	"CFN") a	zero?		ſ	Name			1992	Mil. 081	Thou.	Dol.
1 ∐ Yes – <i>Com</i> 2 ∏ No – <i>Skip t</i>						ſ	Number and street			Sales Annual	082	1	 
b. Is this company owned or	Enter i ownin	name, address g or controllin	s, and El N g compai	Number of the		(	City	State	ZIP Code	payroll	L		
controlled by another company?					2	2	Kind-of-business desc	ription	1	perio	d incluc	yees for ling Mar	ch 12
											088		
097 1 □ Yes →						٦	Type of operation (cho	ose fro	om item 12)	Cen- sus	089		
2 🗌 No							Name			<b>use</b> 1992	Mil.	<sup>†</sup> Thou.	Dol.
Dese this server		(9 digits)			_						081	 	
c. Does this company own or control any other company or	owned	l or controlled	company	Number of the /			Number and street			Sales Annual	082	1	 
companies?								State		Paid	emplo	vees for	pay
					3	3   1	Kind-of-business desc	ription		083		ling Mar	cn 12
098 1 ☐ Yes —→ 2 ☐ No						-	Type of operation (cho	ose fro	m item 12)	<b>6</b>	088		
					_		,		,	Cen- sus use	089		
<b>REMARKS</b> – Please use		(9 digits) ace for any ex	cplanatior	ns that may be	essen	ntia	l in understanding yo	ur rep	orted data.				
Item 16. CERTIFICATIO	ON – Th	is report is su	bstantiall	y accurate and	has b	bee	en prepared in accorda	ance v	/ith instruc	tions.			
Period covered by this report FRO	M: Mo.	Year	то:	Mo.   Ye	ar Na	lam	ne of person to contac	ct rega	rding this i	report –	Print o	type	
Telephone Area co	ode	Number		Extension	Tit	itle	3						
Signature of authorized	person									Date	,		
FORM CB-5013		PI				<b>N</b> PI	M FOR YOUR RECOI	Pne					

	U.S. DEPARTMENT OF COMMI BUREAU OF THE CENSUS		992 CENS		<b>DISTRIBUTIVE</b>	TRA	DE	S	
COF THE CENTRE	CB-5099				OMB No. 0607-	0726: App	oroval I	Expires (	06/30/94
If you have this report, Census Bur be sure to r File Numbe to the right completed BUR 1201 Jeff Toll-free as:	<b>TE: FEBRUARY 15, 199</b> questions about completing please call or write the reau. In any communication, refer to the 11-digit Census rr (CFN) printed in the label . Please return your report to: EAU OF THE CENSUS I East 10th Street ersonville, IN 47134-0001 sistance, 8:00 a.m. to 8:00 p. e, Monday through Friday: 1–800–233–6136					CI	3-5099 	)	
instru	e read the accompanying ctions before answering Jestions.								
	Census use								
			(Plea	ase correct a	ny errors in name, address, a	nd ZIP Co	ode.)		
this quest IS CONFI retained in Item 1. EMF	ionnaire to answer the quest	tions and nly by Cer une from JMBER	return the report to nsus Bureau emplo legal process.	the Census	uires businesses and other or Bureau. By the same law, Y ay be used only for statistical Dollar figures should be <b>rounded</b> to <b>thousands</b> of dollars.	purpose	ISUS I s. Furth Mil-	REPORT	r es Dol-
label the san	ne as the one used for this 1992 Employer's Quarterl	s establis	hment	DOLLAR FIGURES	Example: If a figure is \$1,125,628.79 • Preferred report	(000)	(000) <b>1</b>	126	(000)
Return, Treas	sury Form 941?	,			Acceptable	Bil.	1 Mil.	125 Thou.	629 Dol.
094 1	Yes 2 🗌 No – Report d	current El	No. below	Item 4.	DOLLAR VOLUME OF BUSINESS	010	IVIII.	1110u. 	D01. 
	(9 digits)			for 199	and operating receipts 92 (Include the gross selling	I		Ì	l
Item 2. PHY	SICAL LOCATION			value o others)	f business conducted for				 
addresses	ablishment's physical loca ss shown in the label? (P.C are not physical locations)			commi	s establishment earn ssions for the sale of andise?	121	2 🗌 I	Yes – Go line c No – Ski line e	
Number a				conduc	selling value of business cted on a commission Include in item 4a)	Bil. 122	Mil.	Thou.   	Dol.
City, town	, village, etc.	State	ZIP Code	d. Commi	issions received (On tions reported in item 4c)	123			 
	ablishment physically locals of the city, town, village		de the legal	NOTE -	- If this is the only establishm	ent of thi	s firm	skip to i	tem 5
095 1	Yes 3 I No legal bour			establi mined	t of products sold by this shment manufactured or in the United States by ompany or subsidiaries		124	Percent	%
physically	_	establish	nment	establi	of transfers to other shments within your ny (DO NOT include in	-	Mil. 152	Thou.	Dol.
2 [3 [	☐ City, village, or borough ☐ Town or township ] Other – <i>Specify</i> ] Do not know			Item 5.	PAYROLL 1992, BEFORE DEDUCTIO	NS	Mil. 030	Thou.   	Dol.   
	ounty is this establishmen	t physics	ally located?	b. First a	uarter (January–March)		031	1	
	-,				EMPLOYMENT			Numbe	r
a. How many	RATIONAL STATUS y months during 1992 was lishment actively operated	00	Number of months	a. Numbe period	er of paid employees for pa including March 12, 1992 both full- and part-time	У	032		
establishn	the following best describ nent's status at the end o nly ONE box.				aany of the above employe nvolved in: <sup>ing</sup>	es	131	Numbe	r
2 [ 3 [	] In operation ] Temporarily or seasonally ] Ceased operation – <i>Give d</i> . ] Sold or leased to another o	<i>ate at righ</i> operator –		(2) Sale cler serv (3) Sup	es support (including office a ical, warehousing, customer vice, and maintenance emplor oporting functions of other		132 133		
	Give date at right AND ent etc., below			(i.e.	blishments in your company , central administrative, ounting, research, etc.)		134		
ivane of r	iew owner or operator			( <b>4</b> ) Mar	nufacturing				
Number a	nd street	C+-+-		(5) Oth	er – <i>Specify</i>		135		
City		State	ZIP Code	NOTE -	The sum of lines 1 through 5 sho	uld equal t	otal em	ploymen	t
PENALTY FOR	FAILURE TO REPORT			-				UE ON I	

Item 7. OPERATING EXPENSES Mil. Thou. Dol.	Item 11. KIND OF BUSINESS
Operating expenses for 1992 (Include payroll, but exclude cost of goods sold and interest expense)	What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only ONE box.
Item 8. INVENTORIES	a. Musical instruments and supplies
a. Did you have inventories at the end of 1991 or 1992?	<ul> <li>Forest products, except lumber (logs, piles, pulpwood, cordwood, hewn posts, poles,</li> </ul>
$_{105}$ 1 $\square$ Yes – Complete the remainder of the item	and ties, etc.)
2 🛄 No – Skip to item 9	c. Lumber yard       503120         d. Luggage       509990
<ul> <li>b. Were inventories of this establishment subject to the last-in, first-out (LIFO) method of valuation?</li> </ul>	<b>e.</b> Works of art
111 1 $\Box$ Yes – Use the sum of the LIFO amount plus the LIFO	f. Compact disks, prerecorded audio tapes, and phonograph records
reserve for lines c and c(2) 2 🗆 No – Complete only line c	g. Prerecorded videotapes, videocassettes, and videodisks to retailers
	h. Fire extinguishers and fire safety
End of 1992 End of 1991 Mil. <sup>†</sup> Thou. <sup>†</sup> Dol. <sup>†</sup> Mil. <sup>†</sup> Thou. <sup>†</sup> Dol.	equipment
046 047	(1) Primarily – durable goods
c. Total inventories	(2) Primarily – nondurable goods
106   112	<b>k.</b> Other kind of business – <i>Specify</i>
(1) Amount not subject to LIFO	
costing   107                   113	
(2) Amount subject to	
LIFO costing (gross)	Item 12. TYPE OF OPERATION What was this establishment's PRINCIPAL
108     114	type of operation in 1992? Mark (X) only ONE box.
(a) Amount of the LIFO reserve	060 <b>a.</b> Merchant (buying and selling on own account)
109     115	(1) Importer
(b) LIFO value of the line c(2)	(2) Exporter
(net)	<b>b.</b> Manufacturers' sales branches and offices
The sum of lines c(2a) and c(2b) should equal line c(2)	
	c. Agent, broker, and commission merchant
Item 9. TOTAL PURCHASES OFPURCHASES AT COST VALUE	(1) Auction company
MERCHANDISE IN 1992 Bil. Mil. Thou. Dol.	(2) Broker (representing buyers and sellers)
MERCHANDISE IN 1992 Purchases of merchandise for resale	
MERCHANDISE IN 1992 <u>Bil. Mil. Thou. Dol.</u> 160	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45
Bil.       Mil.       Thou.       Dol.         Bil.       Mil.       Thou.       Dol.         160       1       160       1         Purchases of merchandise for resale (Net of returns, allowances, and trade and cash discounts; but including amounts allowed for trade-ins)       1       1         NOTE – If purchases are greater than sales, please provide an       1       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46
Bil.       Mil.       Thou.       Dol.         Bil.       Mil.       Thou.       Dol.         160       1       160       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1         160       1       1       1       1         160       1       1       1       1         160       1       1       1       1         160       1       1       1       1         170       1       1       1       1         170       1       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       160       1       160       1       160       1       160       1       160       1       160       1       1       160       1       1       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160 <td< td=""><td>(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46</td></td<>	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46
Bil.       Mil.       Thou.       Dol.         160	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160 <td< td=""><td>(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46</td></td<>	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       160       1 <td>(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise</td>	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       160       1       160       1       160       1       160       1       160       1       160       1       160       1       160       1       160       1       160       1       160       1       1       160       1       1       160       1       1       160       1       1       160       1       1       160       1       1       1       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         If figure is 38.76% of       put       httl       Time Det Lease
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         Purchases of merchandise for resale and cash discounts; but including amounts allowed for trade-ins)       Image: Comparison of the trade in t	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO       If figure is 38.76% of total sales         Bill.       Mill.       Thou.       Dol.       Percent of total sales
Memory Indext of the percentage of this establishment's total sales of customer.       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO       If figure is 38.76% of total sales         Bil.       Mil.       Thou.       Dol.       Percent
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       Bil.       Mil.       Thou.         Dol.       Percent of total sales       39         Not acceptable       38.76         Cen-       Report dollars OR percents.
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         Purchases of merchandise for resale and cash discounts; but including amounts allowed for trade-ins)       I       I       I       I         NOTE - If purchases are greater than sales, please provide an explanation in the REMARKS section       I       I       I         Item 10. SALES BY CLASS OF CUSTOMER establishment's total sales in 1992 (item 4a) to each class of customer.       Whole percent of sales         a. Export sales       I41         c. Retailers and repair shops       I42         d. Other wholesale establishments       I44         d. Other wholesale establishments       I45         e. Industrial users (manufacturing and mining)       I46         f. Institutional, commercial, and professional users       I46	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       38.76         Commodity lines       ESTIMATES are acceptable. Report dollars OR percents. Bil Mil Thou Dol Percents. Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Bil Mil Thou Dol Percents Bil Bil Mil Thou Dol Percents Bil Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents Bil Mil Thou Dol Percents
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         Purchases of merchandise for resale and cash discounts; but including amounts allowed for trade-ins)       I       I       I       I         NOTE - If purchases are greater than sales, please provide an explanation in the REMARKS section       I       I       I         Item 10.       SALES BY CLASS OF CUSTOMER establishment's total sales in 1992 (item 4a) to each class of customer.       Whole percent of sales         a.       Export sales       I41         b.       Restaurants, food services, and contract feeding       I42         b.       Restaurants, food services, and contract feeding       I43         c.       Retailers and repair shops       I44         d.       Other wholesale establishments       I45         e.       Industrial users (manufacturing and mining)       I46	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       Bil.       Mil.       Thou.       Dol.       Percent cent         Commodity lines       Use       ESTIMATES are acceptable.       38.76
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       Bil.         Mull.       Thou.         Dol.       Percent of total sales         Not acceptable       38.76         Bil.       Mil.         Thou.       Dol.         Percents.       38.76         It figure is 38.76% of Bil.       Bil.         Mull.       Thou.       Dol.         Percents.       38.76         It figure is use Bil.       Bil.       Mil.         It on 101       102         100       101       102
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent - Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       38.76         Commodity lines       ESTIMATES are acceptable.         Bil.       Mil.       Thou.       Dol.       Percent cent         100       101       102
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       1       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       45         (6) Manufacturers' agent       46         d. Other broker or agent - Specify type       77         Item 13. COMMODITY LINES       Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       38.76         Commodity lines       EstIMATES are acceptable. Report dollars OR percents.         Not acceptable       38.76         I. Musical instruments and supplies       100       101       102         1. Musical instruments and supplies       100       101       102         2. Forest products, except lumber (including       100       101       102
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES       Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       Bil.       Mil.       Thou.         Commodity lines       Census       39         Not acceptable       Bil.       Mil.       Thou.       Dol.         Percents       100       101       102       102         1. Musical instruments and supplies       3100       1       1       1         2. Forest products, except       1       1       1       1       1
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         160       160       1	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent - Specify type       77         Item 13. COMMODITY LINES         Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REFORT       If figure is 38.76% of total sales         Not acceptable       Bil.         Not acceptable       38.76         Bil.       Mil.         Thou.       Dol.         Percents       38.76         Not acceptable       38.76         Bil.       Mil.       Thou.         Dol.       Percents.         Report whole percents.       Bil.         Not acceptable       38.76         I.       Musical instruments and supplies       3100         I.       Index of total sales       Index of total sales         S. Compact disks, poles, and ties)       3120       Index of total sales         S. Compact disks, poles, and ties)       3120 <td< td=""></td<>
Memory of the product of the produc	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         (a. Other broker or agent – Specify type       77         Item 13. COMMODITY LINES       Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO REPORT PERCENTS       If figure is 38.76% of total sales         Not acceptable       Bil.         Musical instruments and supplies       3100         I. Musical instruments and supplies       3100         2. Forest products, except lumber (including cordwood, hewn posts, poles, and ties)       3120         3. Compact disks, prerecorded audo tapes, and phonograph records (Report percorded audo tapes, and phonograph records (Report precords audo tapes, and phonograph records (Report precords audo tapes, and phonograph records (Report precords audo tapes, and phonograph records (Report precords audo tapes, and phonograph records (Report precords audo tapes, and phonograph records (Report precords
MERCHANDISE IN 1992       Bil.       Mil.       Thou.       Dol.         Purchases of merchandise for resale (Net of returns, allowances, and trade and cash discounts; but including amounts allowed for trade-ins)       Image: Comparison of Comparison	(2) Broker (representing buyers and sellers)       42         (3) Commission merchant       43         (4) Import agent       44         (5) Export agent       44         (6) Manufacturers' agent       46         d. Other broker or agent - Specify type       77         Item 13. COMMODITY LINES       Report sales by commodity group either as a dollar figure or as a whole percent of total sales (Include the value of merchandise marketed under capital, finance, or full payout leases and rental receipts derived from merchandise under operating leases)         HOW TO       If figure is 38.76% of total sales       Bil.       Mil.       Thou.       Dol.       Percent cent         REPORT PERCENTS       • Report whole percents       39       Not acceptable       38.76         Commodity lines       Census       Bil.       Mil.       Thou.       Dol.       Percents.         100       101       102       101       102       102         1. Musical instruments and supplies       3100       1       102       1         2. Forest products, except lumber (including cordwood, hewn posts, poles, and ties)       3120       1       1       1         3. Compact disks, prerecorded audio tapes, an dhonograph records       1       1       1       1       1

Page 2

DRM CB-5099 1992 CENSUS O	FDI			RTMENT BUREA	Enter the 11-digit CENSUS FILE NUMBER as shown on this report									
MISCELLAN							(Se	e label on page 1)						
tem 13. COMMODITY LINE	Item 13. COMMODITY LINES – Continued													
	Cen-	ESTIMATES are acceptable. Report dollars OR percents.						Cen-	ESTIMATES are acceptable. Report dollars OR percents.					
Commodity lines	sus use	Bil.	Mil.	   Thou.	   Dol.	Per- cent		Commodity lines	sus use	Bil.	Mil.	   Thou.	   Dol.	Per cer
4. Other durable goods					 		26.	Frozen foods (packaged)	4100			1	l I	
<ul> <li>a. Coin-operated games (including arcade games)</li> </ul>	3141			 	 			Dairy products (excluding dried or				1	 	
<b>b.</b> Luggage	3142						28.	canned) Poultry and poultry	4200			1	 	
<b>c.</b> Works of art	3143			 	 			products	4300			<u> </u> 	 	
d. Other durable goods, n.e.c.	3144				 			Confectionery	4400		 	<u> </u>	 	
e. Total (Sum of lines 4a through 4d)	3140				   			Fish and seafoods (excluding canned and frozen packaged)	4500			 	 	
<ol> <li>Fire extinguishers and fire safety equipment</li> </ol>	3150			<u> </u>   	   			Meat and meat products (fresh and unpackaged)	4600			 	1 	
<ol> <li>6. Lumber: rough, dressed, and finished</li> </ol>	0600				I		32.	Fresh fruits and vegetables	4700			 	I 	
<b>7.</b> Plywood and millwork	0620				 		33.	Coffee, tea, and spices	4800			 	 	
8. Wire fences, mobile					! 			Canned foods	4830		 	 	 	
homes, building and construction paper, and prefabricated buildings					 		35.	Soft drinks and bottled water	4850		 	 	 	
and structural assemblies	0740				 		36.	Refined sugar, flour, pickles, preserves, sauces, cooking oils,				l I	 	
<b>9.</b> Printing and writing paper	3200			 	 			cereals, pet foods, and other grocery specialties	4860		 	 	 	
<ol> <li>Stationery, office supplies, and greeting cards</li> </ol>	3300			l I	l I			Flat iron and steel products	1120			 	 	
<b>11.</b> Industrial and personal								Iron and steel wire and wire products	1140			 	 	
service paper and plastics	3400			 	 		39.	tubing	1150			 	 	
<ol> <li>Books, periodicals, newspapers, and miscellaneous</li> </ol>				 	 			Copper and brass Aluminum shapes,	1200			1	 	
printed materials	6100			1	 			forms, etc.	1220			1	 	
13. Office equipment (exclude computers)	0900			 	 		42.	Coal and coke	1300			1	 	
14. Computer software (off-the-shelf)	0950			 	 			Hardware	1700			1	I T	
<ol> <li>Electrical apparatus and equipment</li> </ol>	1400	1		1	 		44.	Farm machinery, equipment, and parts	2200			1	I I	
<ol> <li>Electrical appliances, household</li> </ol>	1500	i		   	 		45.	General-purpose industrial machinery, equipment, and parts	2320		 	i I	 	
<ol> <li>Electronic parts and equipment, except communication</li> </ol>	1600	 		   	 		46.	Metalworking machinery, equipment,			 	 	 	
18. Sporting and recreational goods and supplies	2700			   	   		47.	and parts Industrial containers and supplies	2330 2450			<u> </u>   	   	
19. Toys and hobby goods and supplies	2800	I					48.	Aircraft and aeronautical equipment and supplies	2600		 	 		
<b>20.</b> Photographic equipment and supplies							49.	Drugs, pharmaceuticals, cosmetics, and toiletries	3500					
(excluding video)	0800	<u> </u>		<u> </u>	 		50.	Jewelry, diamonds, gem stones, and watches	3000					
<ol> <li>New and used automobiles, motorcycles, etc.</li> </ol>	0100			 	 		51.	Advertising specialties (paper novelties, etc.)	6140			1		
22. New and rebuilt automotive parts and supplies (Report parts							52.	Piece goods, knit and woven	3600					
installed in repair work on line 68b)	0200			 	I I		53.	Notions (buttons, ribbons, lace, sewing				1	I I	
23. Tires and tubes	0300			 	 			accessories, zippers, bindings, etc.)	3700			 	 	
<ol> <li>Linens, domestics, curtains, and draperies</li> </ol>	0520			 	 			Men's and boys' wear	3800			 	 	
<ol> <li>Kitchen utensils, mirrors, lamps, and</li> </ol>		1		1	l		55.	Women's and children's wear	3900		l	1	I	

														Page 4			
Item 13. COMMODITY LINES – Continued								lt	em 15. OWNERSHIP,	CONTROL, AND	LOCATI	ONS O	F OPER	ATION			
Commodity lines		Cen-						a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero?									
		sus use	Bil.	   Mil.	   Thou.	Dol.	Per- cent		1								
56.	Grain and beans	4900		   	 	   		ь.	. Is this company owned or	ress, and El Number of the olling company							
57.	Hides, skins, and pelts	5100		 	 	 			controlled by another company?		Ū						
58.	Plastics materials and basic shapes	5300		 	 	I I			097 1 🗌 Yes								
59.	Chemicals and allied products (excluding			1	1	 			2 🛄 No								
	agricultural, plastics, gases and petroleum)	5330		 	 			c.	Does this company own or control any	El No. (9 digits) Figure Controlled Company Enter name, address, and El Number of the Controlled Company							
60.	Petroleum products – refined (exclude liquefied petroleum)	5400		   	   	   			other company or companies?								
61.	Liquefied petroleum gases (excluding natural gas)	5420		   	   	   			098 1								
62.	Crude oil	5500		1	l I	 			How many establish	El No. (9 digits) shments operated underNumber							
63.	Farm supplies	5800		1				]	the Employer Identi	Employer Identification Number shown 079 the label (or as corrected in item 1) AT							
64.	Tobacco and tobacco products	5900		1	1				If more than one, provide the <b>physical location</b> address and other information indicated below for each establishment. The								
65.	Wigs, yarns, and leather products	6150		 	 	 			locations. If more room	tion should be first, followed by all other room is needed, continue in the same KS or on a separate sheet of paper.							
66.	Miscellaneous commodities – <i>Specify</i>			İ	ļ	I		_	Estimates are accep	<b>stable</b> if book fig	ures are 1992		ailable. <sup>†</sup> Thou.	Dol.			
				l I	 	 			Number and street		Sales	081	1	1			
	a	9811		 	 	 			City	State ZIP Code	Annual	082	1	1			
						 		1	Kind-of-business desc		Paid	emplo d includ	yees for	pay ch 12			
	b	9812		 	 	 					083						
	с.	9813		l l	1	I I			Type of operation (cho	ose from item 12)	Cen-	088					
67.	Rental and operating lease receipts	9940		 	<del> </del> 	i I				sus use <sup>089</sup>							
68.	Service receipts and labor charges (including	3340		1	<del> </del>	i I		┢	Name		1992	Mil.	<sup> </sup> Thou.	Dol.			
	installed parts)			i I	i I	 			Number and street		Sales		 	1			
	a. Labor charges for repair work	9711			 	 			City	State ZIP Code	Annual payroll	082		1			
	<b>b.</b> Parts installed in repair work	9712		 	 	 		2	Kind-of-business desc	ription	period		yees for ing Mar				
	<ul> <li>C. Other service receipts and labor charges – Specify</li> </ul>			1	1	1					083						
				1	l I	 			Type of operation (cho	ose from item 12)	Cen- sus	088					
		9713		1	 	 					use	089					
	d. Total (Sum of lines							R	EMARKS – Please use essential ir	this space for any n understanding y	/ explan our repo	tions th orted da	at may i ata.	be			
69	68a through 68c) Prerecorded video	9700		<u> </u>	<u> </u>	 		-									
	tapes	9820		<u> </u>	<u> </u>	 		-									
	<b>TOTAL</b> (Should equal item 4a if reporting in dollars)	9990		 	   	   	100%										
lte	m 14. LEGAL FORM OF	ORGA	NIZATI	ION				lt.	em 16. CERTIFICATIO	DN – This report i	s substa	ntially	accurate	•			
Which of the following best describes this establishment's legal form of organization during 1992? <i>Mark (X) only ONE box.</i>								and has been prepared in accordance with instructions.									
003 1 ☐ Individual owner (sole proprietorship) 2 ☐ Partnership							by	this report FROM:	ا t regarding this r	TO: report –	Print or	l type					
<ul> <li>3 Cooperative association (taxable)</li> <li>4 Cooperative association (tax-exempt)</li> </ul>								Title									
5 Government – Specify									r		Extensio	n					
<ul> <li>O Corporation (Do not mark if any form of cooperative association)</li> </ul>									lephone			Date		,,,,			
	9 🗌 Other – Specify 🔛							510	gnature of authorized p	615011		Date					

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

FORM CB-5099

	U.S. DEPARTMENT OF COMM BUREAU OF THE CENSUS		1992 CENSUS OF SERVICE INDUSTRIES HOTELS AND MOTELS							
OF THE	CB-7001	<u> </u>		OMB No. 0607-0729: App	proval Expires 06/30/94					
If you have this report, Census Bur be sure to r File Numbe to the right. completed i BUR 1201 Jeffe Toll-free as eastern time	E: FEBRUARY 15, 1993 questions about completing please call or write the eau. In any communication, refer to the 11-digit Census r (CFN) printed in the label . Please return your report to: EAU OF THE CENSUS East 10th Street brsonville, IN 47134-0001 sistance, 8:00 a.m. to 8:00 p. e, Monday through Friday: 1–800–233–6136		<b>[</b>	C	3-7001					
instr	uctions before answering juestions.									
	Census use									
			(Place	ase correct any errors in name, address, and ZIP Co	ada I					
this quest	tionnaire to answer the ques	tions and r nlv bv Cer	eturn the report to sus Bureau emplo	is Code, requires businesses and other organizatio o the Census Bureau. By the same law, <b>YOUR CEN</b> byees and may be used only for statistical purpose:	ISUS REPORT					
Item 1. EMI	PLOYER IDENTIFICATION NU	IMBER		Item 4. LEGAL FORM OF ORGANIZATION						
label the san on its latest	yer Identification (EI) Nun ne as the one used for thi 1992 Employer's Quarter sury Form 941?	nber shov s establis y Federal	vn in the hment Tax	Which of the following best describes this ex legal form of organization during 1992? Mark (X) only ONE box.						
094 1	⊇Yes 2 ⊇ No – <i>Report o</i> (9 digits)	current El I	No. below	2	-					
	SICAL LOCATION			9 🗌 Other – <i>Specify</i>						
the addre	tablishment's physical loc ss shown in the label? (P. are not physical locations)	ation the O. box and	same as I rural route	HOW TO REPORT Example: If a figure	Mil- <sup> </sup> Thou- <sup> </sup> Dol- lions   sands   lars (000) <sub> </sub> (000) <sub> </sub> (000)					
093 1	Yes 2 No - Report )	ohysical lo	cation below	DOLLAR     is \$1,125,628.79     • Preferred       FIGURES     report     Acceptable	<b>1 126</b> 1 125 629					
Number a	ind street			Item 5. DOLLAR VOLUME	Mil. Thou. Dol.					
City, towr	n, village, etc.	State	ZIP Code	OPERATING RECEIPTS of this establishment in 1992						
b. Is this est	tablishment physically loc	ated insid	le the legal	Item 6. PAYROLL	Mil. Thou. Dol.					
	es of the city, town, villag ☐ Yes   3			Payroll in 1992, BEFORE DEDUCTIONS	030					
	$\square$ No $4 \square$ Do not know			a. Annual						
c. In what t	ype of municipality is this	establish	iment		031					
physically	located?			b. First quarter (January–March)						
	☐ City, village, or borough ☐ Town or township			Item 7. EMPLOYMENT	Number 032					
	Other – <i>Specify</i>			Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)						
d. In what c	ounty is this establishme	nt physica	ally located?							
a. How man this estab	ERATIONAL STATUS y months during 1992 was Jishment actively operate the following best descril	s 002 d?	lumber of months 2							
establish	ment's status at the end o only ONE box.	f 1992?								
2 [ 3 [ 4 [	<ul> <li>In operation</li> <li>Temporarily or seasonally</li> <li>Ceased operation - <i>Give d</i></li> <li>Sold or leased to another of <i>Give date at right AND entertc., below</i></li> </ul>	<i>ate at righ</i> operator –	t Figures only Month Year	CONTINUE ON PAGE 2						
Name of	new owner or operator									
Number a	and street									
City		State	ZIP Code							

						Page
Item 8. KIND OF BUSINESS OR A Mark (X) the ONE box which best d			busines	s or acti	ivity tha	t accounted for the MAJOR portion of this
establishment's receipts in 1992.						
Hotels, motels, and tourist cour Hotel with 25 or more guestroom Hotel with less than 25 guestroom	s ns		070 [ [		1	Other kinds of activity or operation     070       Bar or restaurant (operated by membership organization) limited to members only     864106       Bar or restaurant (open to the public)     581009
Motel or tourist court				70113 70114		Bar or restaurant (open to the public)
Hotel or lodging house operated I membership organization: With rooms open to the general	publi		[	70111		Casino (gambling) <b>without</b> guestrooms for
With rooms limited to members	only		L	70410	13	Ski area or resort <b>with</b> guestrooms for lodging
<b>Other lodging places</b> Rooming and boarding house			Γ	70210	13	Ski area or resort <b>without</b> guestrooms for lodging 2799997 Hotel/motel real estate owner (owning land
Sporting or recreational camp (fis dude ranch, etc.)	hing o	camp,	Ľ	70320	14	or building but not the lodging business)
Trailer park, recreational vehicle p campground for transients	oark, c	or	Γ	70330	12	Apartment, cooperative, or condominium         operator $\Box$ 651000         Other kind of activity – Describe $\Box$ 777777
Item 9. SOURCES OF RECEIPTS						Item 10. NUMBER AND TYPE OF ACCOMMODATIONS
Report receipts by source either in do or as percentages (in whole percents) Please do <b>not</b> combine data for two	of the o or m	total – s ore rec	see exan eipts lin	nple bel es.	em 5) ow.	DECEMBER 31, 1992 The number of guestrooms, units, or quarters consists of the number which can be rented as single units. Suites of rooms which
Do not include sales, occupancy, or customers. Do not include the total, receipts from coin-operated machin Line a(1) – Report receipts from gu	, or th les op	is estab erated l	lishmer by other	nt's shai rs in pai	rta.	cannot be subdivided should be counted as a single unit. Number of rooms, units, or quarters, by type Number as of December 31, 1992
receipts from rentals of public room halls) on line a(9), and store rental r Lines a(1) and a(2) – Establishmer	ns (e.g receipt nts wh	i., ballro ts on lir ich incl	ooms, co ne b. ude mea	onventio als and	on rooms	a. Primarily rented as residential quarters or units (occupied as one's primary residence)
in a single rate should estimate the Line a(8) – Report this establishme operations (e.g., casino games, slot Line a(10) – Report receipts from v	value nt's sh mach	s for lin hare fro hines).	ies a(1) m gami	and a(2 ng	).	b. Primarily rented as transient guestrooms or units
other guest services.						462 c. TOTAL (Sum of lines a and b)
Line b – Receipts from "other source receipts from operators of leased du and coin-operated machines.	epartn					Item 11. FRANCHISE OPERATIONS a. Does this establishment use a 463 1 Yes - Skip to trade name which is authorized item 12
HOW TO REPORT PERCENTS • Report whole percent		Mil.	Thou.	∣ Dol.	cent <b>39</b>	by ANOTHER company (franchisor) for a fee, 2 No – Continue royalty payment, and/or other with line b contract agreement?
Not acceptable —		ECTIN	IATES a	<u>↓ →</u>	38.76	
Sources of receipts	Cen- sus use	Repor	t dollars	s OR pe		b. Does this establishment use a trade name which this establishment's OWN company (franchisor) authorizes others 2  No (franchises) to use for a fee,
a. Receipts from customers	400	401	1	 	402	royalty payment, and/or other contract agreement?
(1) Guestroom or unit rentals	121					Item 12. FOOD SERVICE 465
<ul> <li>(2) Sales of meals and nonalcoholic beverages</li> <li>(2) Sales of electrolic</li> </ul>	122		   	 		a. Is there a restaurant, coffee 1 ☐ Yes shop, or other food service 2 ☐ No - Skip to (excluding vending machines) item 13
(3) Sales of alcoholic beverages for consumption on premises	123		 	 		b. If "Yes," 466
<ul> <li>(4) Sales of packaged liquor, wine, or beer</li> <li>(5) Sales of other</li> </ul>	124		 	   		(1) Does this establishment own       1 □ Yes         and operate the food       2 □ No         service(s)?       2 □ No
merchandise	575			 		(2) Does this establishment 467 contract with, or lease 1 _ Yes space to, another company 1 _ Yes
<ul><li>(6) <u>Camp tuitions or fees</u></li><li>(7) Telephone service charges</li></ul>	125 126		 	 		to operate the food service(s)? 2 U No
(7) Telephone service charges	120			 		Item 13. HOTELS, BY TYPE
<ul> <li>(8) Gaming receipts</li> <li>(9) Rental of public rooms (e.g., conference/</li> </ul>	127		 	   		(To be completed by hotels only) Mark (X) the ONE box which best describes this hotel.
(10) Other receipts from	128		 	 		468 1 ☐ Transient hotel: full service (providing food and beverage service(s), convenience shop, laundry service,
customers – Describe in REMARKS if more than 10 percent of total receipts.	585		 	 		banquet/meeting facilities, and limited recreational amenities on the premises) 2
(11) TOTAL (Should equal item 5 if reporting			   	   		<ul> <li>2 Infansion note: Imited service (providing some or none of the services available from full-service establishments)</li> </ul>
in dollars)	990				100%	3 All-suite hotel
<ul> <li>B. Receipts from other sources</li> <li>Were any receipts OTHER that</li> </ul>	n		1	1		4 L Resort hotel 5 Conference center/convention hotel
from customers received by t establishment in its business operations?			1	1		6 🔲 Inn (including bed-and-breakfast inn)
operations? 455 1 □ Yes →		456	I	I		7 🗌 Other – <i>Describe</i>
2 🗌 No			 	 		

FORM CB-7001

CONTINUE ON PAGE 3

											Page 3
FOR			E INDUSTRIES	ERCE	Enter the 11- CENSUS FILE as shown on <i>(See label on</i>	NUME this re	port				
lte	em 14. OWNERSHIP,	CONTROL, AND L	OCATIONS OF OPERATI	ON	•						
a.	Is the FIRST DIGIT o	f your Census Fil	e Number (shown in th	ne ad	dress label im	nediat	ely after "CFN") a	zero?			
	1 🗌 Yes – <i>Com</i> j 2 🗌 No – <i>Skip t</i>										
ь.	Is this company owned or controlled by another company?	Enter name, addre	ess, and El Number of the	e owi	ning or controllir	ng com	bany				
	097 1 ☐ Yes → 2 ☐ No						El No. (9 digits)				
c.	own or control any other company or companies?	Enter name, addre	ess, and El Number of the	e owi	ned or controllec	l compa	any				
	098 1 ☐ Yes → 2 ☐ No						El No. (9 digits)				
		_							079	Numbe	er
d.	How many establisi (or as corrected in i		under the Employer Id ND of 1992?	entil	fication Numbe	er shov	n in the label		075		
	establishment. The he	eadquarters location ne same format in l	<b>ocation</b> address and oth n should be first, followe REMARKS or on a separa res are not available.	d by	all other location	ited bel ns. If mo	ow for each ore room is				
	Name							1992	Mil.	<sup> </sup> Thou.	Dol.
	Number and street							Receipts			1
1	City					State	ZIP Code	Annual payroll	082		
'	Kind-of-business desc	ription						perio	l employ d includ	ing Ma	r pay rch 12
	Hotels and motels – n	umber of guestroo	ms ———		>	084 		Census use	<sup>088</sup>		
	Name							1992		Thou.	Dol.
	Number and street							Receipts		 	 
2	City					State	ZIP Code	Annual payroll	082	   	
	Kind-of-business desc	ription				1	1	perio	d includ	ing Ma	rch 12
						084			088		
	Hotels and motels – n	umber of guestroo	ms ———					Census use	<b>3</b> 088		
RE	EMARKS – Please use	this space for any	explanations that may b	e ess	sential in unders	tanding	your reported data	1.			
1+4	m 15. CERTIFICATIO	)N – This report is	substantially accurate ar	nd he	s been prepared	l in acc	ordance with instru	ctions			
Pe	eriod covered this report	Mo Ve		Year			ntact regarding this		Print or	type	
	lephone Area code	Number	Extension		Title						
Si	gnature of authorized p	person	I		Ι				Date		

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

	U.S. DEPARTMENT OF COMM BUREAU OF THE CENSUS FORM	■ 3				ISUS OF SERVICE INDUSTRIES OUS LODGING PLACES						
OF THE COM	CB-7002						OMB No. 0607-0729: A	pproval	Expires	06/30/9		
If you have this report, Census Bur be sure to r File Numbe to the right. completed to BUR 1201 Jeffe Toll-free as:	<b>TE: FEBRUARY 15, 199</b> questions about completing please call or write the eau. In any communication, refer to the 11-digit Census r (CFN) printed in the label . Please return your report to: EAU OF THE CENSUS East 10th Street ersonville, IN 47134-0001 sistance, 8:00 a.m. to 8:00 p. e, Monday through Friday: 1–800–233–6136		[					CB-7002	2			
instr	se read the accompanying uctions before answering questions.											
	Census use											
				(	Pleas	se correct any	errors in name, address, and ZIP	Code.)				
Item 1. EMP Is the Emplo	ionnaire to answer the ques	tions and r nly by Cer une from I JMBER nber show s establis	return ti nsus Bu legal pr vn in ti hment	he repo reau en ocess.	rt to	the Census Bo yees and may Item 4. LEC a. LEGAL FO Which of	es businesses and other organizat ureau. By the same law, <b>YOUR C</b> be used only for statistical purpos GAL FORM OF ORGANIZATION AN <b>DRM OF ORGANIZATION</b> the following best describes th n of organization during 1992?	ENSUS Ses. Furti	REPOR her, copi	T ies		
Return, Trea	sury Form 941?	ly rederai	Тал			-	only ONE box.					
094 1	Yes 2 No – Report of	current El l	No. bel	5W		003	1 🔲 Individual owner (sole prop	ietorship	<b>c</b> )			
	(9 digits)						2					
a. Is this est the addre addresses 093 1	<ul> <li>Item 2. PHYSICAL LOCATION</li> <li>a. Is this establishment's physical location the same as the address shown in the label? (P.O. box and rural route addresses are not physical locations)</li> <li>1 Yes 2 No - Report physical location below</li> </ul>					<ul> <li>0 ☐ Corporation</li> <li>9 ☐ Other - Specify</li> <li>b. TAX STATUS</li> <li>(1) Is this establishment operated on a not-for-profit basis?</li> </ul>						
Number a	and street					005	1 🗌 Yes 2 🗌 No – <i>Skip to item 5</i>					
City, towr	n, village, etc.	State	ZIP Co	de								
<b>boundarie</b> 095 1	tablishment physically loc       es of the city, town, villag       Yes     3       No     legal bou       No     4       Do not know	e, etc.?	de the	legal		<ul> <li>(2) Was all or part of the income of this establishment or organization exempt from Federal income taxes under section 501 of the Internal Revenue Code?</li> <li>004 1  Ves         2  No</li> </ul>						
	ype of municipality is this / located?	establish	ment			ноw то	Dollar figures should be <b>rounde</b> to <b>thousands</b> of dollars.		Thou-			
	City, village, or borough					REPORT DOLLAR	Example: If a figure is \$1,125,628.79 • Preferred	(000)	(000)	(000)		
2 [	Town or township					FIGURES	report Acceptable	<b>1</b> ⇒ 1	126 125	629		
	☐ Other – <i>Specify</i> ☐ Do not know				ſ			Mil.	Thou.	Dol.		
d. In what c	ounty is this establishme	nt physica	ally loc	ated?		to part b; oth skip to item 6	: to item 4b(2) was "Yes," skip erwise, complete part a and 5. NG RECEIPTS of this	010	   	   		
	ERATIONAL STATUS		lumber 2	of mor	ths	(taxable) e	establishment in 1992	010		<u> </u>		
	y months during 1992 wa lishment actively operate	S					<b>E AND EXPENSES</b> of this pt) establishment in 1992	510		1		
establish	the following best descril ment's status at the end o only ONE box.					(1) <u>REVE</u>	NUE	040	   	 		
001 1	In operation		Fi	gures c	only	(2) EXPE	NSES (including payroll)			-		
	Temporarily or seasonally			onth Y	ear	Item 6. PA		Mil. 030	Thou.	Dol.		
	☐ Ceased operation – <i>Give d</i> ☐ Sold or leased to another of <i>Give date at right AND</i> and	operator -	۲.			Payroll in 1 a. Annual	992, BEFORE DEDUCTIONS			l		
	Give date at right AND en etc., below	ter name,						031	<u> </u>	<u> </u>		
Name of I	new owner or operator					h Eiret qua			I	I		
										1		
Number a	and street				Ē	Item 7. EN	rter (January–March) 1PLOYMENT		Numbe	ər		
Number a	and street	State	ZIP Co	de		Item 7. EN Number of period inclu		032	Numbe	er		

PENALTY FOR FAILURE TO REPORT

#### Item 8. KIND OF BUSINESS OR ACTIVITY

Mark (X) the ONE box which best describes the business or activity that accounted for the MAJOR portion of this establishment's receipts or revenue in 1992.

703203

Residential lodging places 0	70
Rooming or boarding house or tourist home	. 🗌 702101
Dormitory (commercially operated) or hostel	. 🗌 702102
Fraternity or sorority boarding house	. 🗌 704101
Residential care facility (providing room and board for children, the aged, and others with some limits for self-care, but with health care incidental)	. 🗌 836102
Residential mobile home park	. 🗌 651500
Apartment building or residential complex (providing housing facilities only)	_
Management of cooperative or condominium	653100
Sporting camps, recreational camps, and transient trailer parks	
Trailer park, recreational vehicle park, or campground (except residential)	. 🗌 703301
Children's day camp	. 799998
Children's camp (except day camp)	. 🗌 703201
Fishing or hunting camp	703202

Other sporting and recreational camp . . . . . .

Hotels, motels, and motor hotels								
Hotel with 25 or <b>more</b> guestrooms for transients								
Hotel with <b>less</b> than 25 guestrooms for transients								
Motel								
Hotel or lodging house (operated by membership organization) with rooms limited to members only								
Bar or restaurant (open to the public)								
Civic, social, veterans', fraternal, or youth association (except residential)								
Other kind of activity – Describe								

Item 9. SOURCES OF RECEIPTS OR REVENUE	Sources of receipts or revenue	Cen- sus	ESTIMATES are acceptable
Report receipts or revenue by source in dollar figures (see example for item 5).		use	Mil. Thou. Dol.
Please do <b>not</b> combine data for two or more	a. Receipts from customers	400	401
receipts or revenue lines.	(1) Guestroom or unit rentals	121	i i
Establishments which are subject to Federal income tax should complete items b(1) and			
b(2). Do not include these values in item 5a.	(2) Sales of meals and nonalcoholic beverages	122	
	<ul><li>(3) Sales of alcoholic beverages for consumption on premises</li></ul>	123	
Exclude all sales, occupancy, or other taxes collected from customers.			
	(4) Sales of packaged liquor, wine, or beer	124	
Neither the total, nor this establishment's share of, receipts from coin-operated machines	(5) Sales of other merchandise	575	
operated by others is to be included in item 9a.		1	
Line a(1) - Report receipts from guestroom or	(6) Camp tuitions or fees	125	
unit rentals. Report receipts from rentals of public rooms (e.g., ballrooms, convention	(7) Telephone service charges	126	
halls) on line a(9), and store rental receipts on line b(2).		120	
	(8) Gaming receipts	127	
Lines a(1) and a(2) - Establishments which include meals and rooms in a single rate should estimate the values for lines a(1)	(9) Rental of public rooms (e.g., conference/ convention meeting rooms)	128	
and a(2).	(10) Membership dues and fees	444	
<b>Line a(8)</b> - Report this establishment's share of receipts from gaming operations (e.g., casino games, slot machines).	(11) Other receipts from customers – <i>Describe in</i> <i>REMARKS if more than 10 percent of total</i> <i>receipts or revenue.</i>	585	
Line a(11) - Report receipts from valet,		585	
laundry, parking, and other guest services.	(12) TOTAL RECEIPTS OF TAXABLE ESTABLISH- MENTS (Sum of lines a(1) through a(11) should		
Line b(2) - Include rental and commission	equal item 5a) Tax-exempt establishments - leave blank	990	i i
receipts from operators of leased departments, concessions, stores, and coin-operated machines.	b. Other sources of revenue	330	
	(1) Gifts, grants, contributions	701	
	(2) All other sources – Describe in REMARKS if more than 10 percent of total revenue.	785	
			1 1
	c. TOTAL REVENUE OF TAX-EXEMPT ESTABLISHMENTS (Sum of lines a(1) through a(11) and b(1) and b(2) should		
	equal item 5b(1))  Taxable establishments - leave blank	995	
Item 10. NUMBER AND TYPE OF ACCOMMOD/ DECEMBER 31, 1992	ATIONS		
(To be completed by hotels/motels and other lodg	ing facilities)		
The number of guestrooms, units, or quarters con single units. A suite of rooms which cannot be sul			
- Number of rooms, units, or quarters, by type		Number as of December 31, 1992	
a. Primarily rented as residential quarters or units	460		
<b>b.</b> Primarily rented as transient guestrooms or un	its		461
			462
c. TOTAL (Sum of lines a and b)			

FORM CB-7002

# CONTINUE ON PAGE 3

									•				Page 3
FOR		2 CENSUS O MISCELLANE	F SERVIC			SUS Ent CE	ter the 11- NSUS FILE shown on se label on	NUMBER					
Ite	em 11. OW	NERSHIP, CON	TROL, AND I	OCATIONS	OF OPERATIO	N .			•				
a.	Is the FIRS	T DIGIT of you	ır Census Fi	ile Numbe	r (shown in th	e addres	ss label im	mediately	after "CFN") a :	zero?			
		es – Complete i o – Skip to iterr											
ь.	ls this com or controlle company?	pany owned ed by another	Enter nar	ne, address	, and El Numbe	r of the d	owning or c	ontrolling c	ompany				
	097 1 🗌 Y 2 🗌 N								El No. (9 digits)				
c.	or control a	company own any other r companies?	Enter nar	ne, address	, and El Numbe	r of the o	owned or co	ontrolled co	mpany				
	098 1 🗌 Y 2 🗌 N								El No. (9 digits)				
d.	How many	establishmen	ts operated	under the	Employer Ide	ntificat	ion Numbe	r shown ir	n the			Numbe	er
	Iabel (or as corrected in item 1) AT THE END of 1992?       079         If more than one, provide the physical location address and other information indicated below for each establishment. The headquarters location should be first, followed by all other locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.       079												
	Estimates a Name	are acceptable	if book figu	res are not	available.					1992	Mil.	<sup> </sup> Thou	. Dol.
	Number and	street								Receipts or or revenue			
	City					State	ZIP	Code		Annual payroll	52	I	
1	1     Paid employees for pay period including March 1       Kind-of-business description     083										r pay rch 12		
	Hotels/motel	s and other lod	aina facilitie	s – number	of guestrooms			084		Census <sup>03</sup>	88		
	Name				of guestioonis					1992	Mil.	<sup> </sup> Thou	. Dol.
											81		T
	Number and	street								revenue	82		
2	City					State	ZIP	Code	-	Annual payroll		 	1
	Kind-of-busi	ness description	ı							Paid er period ir <sup>083</sup>	nploy ncludi	ees foi ng Ma	r pay rch 12
	Hotels/motel	s and other lod	ging facilitie	s – number	of guestrooms			084		Census <sup>03</sup> use	88		
	Name								-	1992 Receipts 0		Thou	. Dol.
	Number and	street								or revenue		I	İ
	City					State	ZIP	Code		Annual payroll	82	 	
3										Paid er period in	nploy	ees fo	r pay
	Kind-of-busii	ness descriptior	ו						-	083	leiuui	ng ivia	
	Hotels/motel	s and other lod	ging facilitie	s – number	of guestrooms		>	084		Census <sup>0:</sup> use	88		
RE	MARKS – Ple	ease use this sp	ace for any	explanation	s that may be e	ssential	in understa	nding your					
Ite	Item 12. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions.												
Per	Period covered FROM Mo. Year Mo. Year Name of person to contact regarding this report - Print or type												
by	this report	Area code	Number		Extension	Title							
	ephone									-			
Sig	nature of aut	horized person								Date			
				PLEASE P	нотосору т	HIS FOR	M FOR YO	UR RECOR	DS				

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS		1992 CENSUS OF SERVICE INDUSTRIES LAUNDRY, CLEANING, AND RELATED SERVICES						
<b>CB-7201</b>		OMB No. 0607-0729: Approval Expires: 06/30/94						
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136		CB-7201						
Please read the accompanying instructions before answering the questions.								
Census use								
	(Plea	ase correct any errors in name, address, and ZIP C	Code.)					
this questionnaire to answer the questions a	and return the report to / Census Bureau emplo rom legal process.	the Code, requires businesses and other organizatic the Census Bureau. By the same law, <b>YOUR CE</b> yees and may be used only for statistical purpose Item 4. LEGAL FORM OF ORGANIZATION	NSUS REPORT					
Is the Employer Identification (EI) Number s label the same as the one used for this esta on its latest 1992 Employer's Quarterly Fed Return, Treasury Form 941?	shown in the ablishment	Which of the following best describes this e legal form of organization during 1992? Mark (X) only ONE box.	establishment's					
094 1 □ Yes 2 □ No – <i>Report curren</i> (9 digits)	t El No. below	003 1 ☐ Individual owner (sole proprieto 2 ☐ Partnership 5 ☐ Government – <i>Specify</i>						
Item 2. PHYSICAL LOCATION a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)	the same as and rural route	0 Corporation 9 Other - Specify						
093 1 ☐ Yes 2 ☐ No – <i>Report physic</i>	al location below	HOW TO REPORT DOLLAR HOW TO REPORT DOLLAR HOUSE	Mil- Thou- Dol- lions   sands   lars (000) (000) (000) 1 126					
City, town, village, etc. State	e ZIP Code	FIGURES report Acceptable Item 5. DOLLAR VOLUME	1 125 629 Mil. Thou. Dol.					
b. Is this establishment physically located boundaries of the city, town, village, etc 095 1 Yes 3 No legal boundarie 2 No 4 Do not know	.?	OPERATING RECEIPTS of this establishment in 1992 Item 6. PAYROLL	<u>Mil.</u> Thou. Dol.					
c. In what type of municipality is this estal	blishment	Payroll in 1992, BEFORE DEDUCTIONS a. Annual	031					
096 1 ☐ City, village, or borough 2 ☐ Town or township		b. First quarter (January–March)	Number					
3 □ Other – <i>Specify</i> 4 □ Do not know		Item 7. EMPLOYMENT	032					
d. In what county is this establishment phy	vsically located?	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)						
Item 3. OPERATIONAL STATUS	Number of months							
a. How many months during 1992 was this establishment actively operated?								
b. Which of the following best describes th establishment's status at the end of 199 Mark (X) only ONE box.								
001 1 ☐ In operation 2 ☐ Temporarily or seasonally inactiv 3 ☐ Ceased operation – <i>Give date at</i> 4 ☐ Sold or leased to another operat <i>Give date at right AND enter nar</i> <i>etc., below</i>	right cor –							
Name of new owner or operator								
Number and street City State	e ZIP Code							

						1						Page 2
Item 8. KIND OF BUSINESS OR							m 9. SOURCES OF RECEIPTS		ESTIN	ATES a	re acce	otable.
a. Mark (X) the ONE box which be that accounted for the MAJOR p receipts in 1992.							Sources of receipts	Cen- sus use	Repor	t dollars	OR pe	r <b>cents</b> . Per-
Coin-operated (or other self-servand/or drycleaning "store"	vice) la	aundry		721	1511	f.	Laundry work, family and bachelor, including shirts, for					cent
Coin-operated laundry washing route (apartments, dormitories, Drycleaning plant	etc.)			☐ 721 ☐ 721			<b>resellers</b> (press shops, other drycleaners and laundries, "bobtailers," etc.)	138		 I I		
Power laundry (family or comm Linen supply service	ercial)			☐ 721 ☐ 721	1101	-	Laundry work, commercial (other than industrial or linen					
Industrial laundry service Diaper service				☐ 721 ☐ 721	1901		supply) Laundry/drycleaning work and	139				
Rug cleaning plant	on loc	ation .		☐ 721 ☐ 721			garments (gowns, coats, aprons, etc.)	141		, , , , , , , , , , , , , , , , , , ,		
Pressing or valet shop (laundry done by others)				721	1201		Laundry work and rental receipts for linen supply flatwork and full dry linens	142				
Retail agent (including "bobtaile laundries and drycleaners (work by others)	done			721	1202	j.	Laundry/drycleaning work and rental receipts for industrial	142		 		
Laundry, except commercial por coin-operated (hand, Chinese, o laundries)	r Fren	ch 		☐ 721			garments (uniforms, gloves, etc.), except those for "clean room" operations	143		 		
Garment repair or alteration Fur repair and storage				☐ 721 ☐ 721			Laundry/drycleaning work and rental receipts for industrial "clean room" operations	144		 		
Seamstress and dressmaking se (material owned by customer) . Other kind of activity – <i>Describe</i>				☐ 721 ☐ 777			Laundry work and rental receipts for industrial wiping cloths	145				
			470	. 🗖			Laundry/drycleaning work and rental receipts for industrial/ commercial mats (launderable or unlaunderable)	146				
<ul> <li>b. Is laundry work (other than f done at this location?</li> </ul>	inish	work)		1 🗌 Ye: 2 🗌 No		n.	Laundry/drycleaning work and rental receipts for industrial/ commercial mops, cloths, and	140		 		
c. Is drycleaning work (other th work) done at this location?	nan fii	nish	471	1 🗌 Ye: 2 🗌 No			miscellaneous dust control items	147				
Item 9. SOURCES OF RECEIPTS						<b>°</b> .	Laundry work and rental receipts for diapers	148				
Report receipts by source either in (see example for item 5) or as perc	dollar entag	figures es (in wl	nole				Rug/carpet and upholstery cleaning			, , 		
percents) of the total – see example	e belo	w.					(1) In plant	149		 		
Please do <b>not</b> combine data for tw Line q – Include receipts for alterat	tion ar	nd garm	ent con	structio	n		(2) On customers' premises	151		 		
services on material owned by the receipts for alteration and garment by this company on line t.					ned		Alterations and garment construction	152				
NOTE – Receipts from wholesale w laundries, "bobtailers," etc.) should below.					d g	r.	All other laundry, cleaning, and garment services receipts (including hand laundry work)	153		 		
HOW TO REPORT	_	Mil.	Thou.	Dol.	Per- cent	s.	Shoe repair	157		 		
PERCENTS • Report whole per Not acceptable —	cents				<b>39</b> 38.76	t.	Sales of disposables and other			 		
Sources of receipts	Cen- sus	ESTIM Report	ATES a	are acce s OR pe	ptable. rcents.		merchandise – Describe in REMARKS if more than 10 percent of total receipts.	575		 		
a. Coin-operated laundry and/or	400	Mil.	Thou.	Dol.	Per- cent	u.	All other receipts – <i>Describe in</i> REMARKS if more than 10 percent of total receipts.	585		 		
<ul> <li>a. Comoperated laundry and/or drycleaning store</li> <li>(1) Washer receipts</li> </ul>	131		 			v.	<b>TOTAL</b> (Should equal item 5 if reporting in dollars)	990		 		100%
(2) Dryer receipts	132		 	 			m 10. OWNERSHIP, CONTROL					
(3) Drycleaning machine receipts	133					a.	Is the FIRST DIGIT of your Co in the address label immedia 1		ifter "C	SFN") a :	zero?	
<ul> <li>b. Coin-operated laundry washing machine route (apartments, etc.)</li> </ul>	134		   	   		ь.	2	ie, ado	dress, a	nd El Nu	mber o	f the
<ul> <li>C. Drycleaning (except coin-operated, industrial, linen supply, and rug) for direct consumers</li> </ul>	135		   				owned or controlled by another company? 097 1  Yes -> 2  No	contr	olling c	ompany		
d. Drycleaning (except coin-operated, industrial, linen supply, and rug) for resellers (press shops, other drycleaners and			•     	-     			El No. (9 d Does this company own or control any other company or companies?	ie, add	dress, a olled co	nd El Nu mpany	mber o	f the
laundries, "bobtailers," etc.) e. Laundry work, family and bachelor, including shirts,	136		 	 			098 1 □ Yes → 2 □ No	igite)				
for <b>direct consumers</b> (excludes diapers)	137		 	1			El No. (9 d ITEM 10 CONTIN	-				
FORM CB-7201									C	ONTINU		PAGE 3

FOF	км <b>СВ-720</b>	1	U.	S. DEPARTME. BU	INT OF COMMERC	JS   Enter	the 11-digit US FILE NUMBER				
		CENSUS O					own on this report abel on page 1)				
	How many		ts operated	l under the	OF OPERATION Employer Iden 1992?		ed Number shown in the		079	Numbe	)r
	headquarter	one, provide th s location shoul r on a separate	ld be first, fol	lowed by all	Iress and other other locations	informatior . If more ro	n indicated below for eac oom is needed, continue	ch establishment. T in the same forma	he t in		
	NOTE – Do providing pi	not consider br	anch locatior bution of fini	ns of laundri shed work a	es and dryclean s separate estab	ers (includi lishments.	ng industrial, linen, and Data for these locations	diaper supply) tha should be include	t are <b>onl</b> d with th	Y	
	Estimates a	are acceptable	if book figur	res are not a	vailable.						
	Name							1992	Mil.	Thou.	. Dol.
	Number an	d street						Receipt		1	1
1	City				5	State	ZIP Code	Annual payroll			
	Kind-of-bus	iness descriptio	n						d employ d includ	ing Mar	rch 12
								083			
								Censu use	s <sup>088</sup>		
	Name							1992	Mil.	<sup> </sup> Thou.	. Dol.
	Number an	d street						Receipt	s	i	i
	City				5	State	ZIP Code	Annual payroll	082		
2	Kind-of-bus	iness descriptio	n					Paie perio	d employ d includ	vees for	rch 12
								083			
								Censu	s <sup>088</sup>		
	Name							1992	Mil.	<sup>†</sup> Thou.	. Dol.
	Number an	d street						Receipt	081 S	1	
	City				5	State	ZIP Code	Annual payroll	082		I I
3	Kind-of-bus	iness descriptio	n					Paio	d employ	vees for	rch 12
								083			
								Censu	s <sup>088</sup>		
BE	MARKS - P	lease use this sr	pace for any	explanations	that may be es	sential in u	nderstanding your repo	use			
				·							
Ite	em 11. CE	RTIFICATION - 1	This report is	substantiall	y accurate and h	nas been pr	repared in accordance w	ith instructions.			
	riod covered this report	FROM: Mo.	Year	то: Мо	o. Year	Name of p	erson to contact regardi	ng this report – Pr	int or ty	pe	
F-	ephone	Area code	Number		Extension	Title					
Sig	nature of au	thorized person	1					Dat	e		
				PI FASE PH			OR YOUR RECORDS				

U.S. DEPARTMENT OF COM BUREAU OF THE CENSUS		1992 CENSUS OF SERVICE INDUSTRIES COMPUTER AND DATA PROCESSING SERVICES						
<b>CB-7307</b>			OMB No. 0607-0729: Ap	proval Expires 06/30/94				
DUE DATE: FEBRUARY 15, 15 If you have questions about completing this report, please call or write the Census Bureau. In any communication be sure to refer to the 11-digit Census File Number (CFN) printed in the laber to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 eastern time, Monday through Friday: 1–800–233–6136 Please read the accompanying	ng n, p.m.,		c	B-7307				
the questions.								
Census use								
		(Plea	ase correct any errors in name, address, and ZIP (	Code.)				
YOUR RESPONSE IS REQUIRED this questionnaire to answer the que IS CONFIDENTIAL. It may be seen retained in respondents' files are im-	only by Cer	nsus Bureau emplo	es Code, requires businesses and other organization of the Census Bureau. By the same law, <b>YOUR CE</b> byees and may be used only for statistical purpose	ons that receive <b>NSUS REPORT</b> es. Further, copies				
Item 1. EMPLOYER IDENTIFICATION I Is the Employer Identification (EI) No label the same as the one used for t on its latest 1992 Employer's Quarte Return, Treasury Form 941?	umber shov his establis	hment	Item 4. LEGAL FORM OF ORGANIZATION Which of the following best describes this of legal form of organization during 1992? Mark (X) only ONE box.	establishment's				
094 1 □ Yes 2 □ No – <i>Repor</i> (9 digits)	t current El .	No. below	003 1 □ Individual owner (sole proprieto 2 □ Partnership 5 □ Government – <i>Specify</i>	• •				
Item 2. PHYSICAL LOCATION a. Is this establishment's physical le the address shown in the label? ( addresses are not physical locations)	P.O. box and	<b>same as</b> d rural route	0 Corporation 9 Other – <i>Specify</i>					
093 1 ☐ Yes 2 ☐ No - <i>Repor</i>	t physical lo	cation below	HOW TO REPORT DOLLAR ENTRY Example: If a figure is \$1,125,628.79 • Preferred	Mil- Thou- Dol- lions   sands   lars (000) (000) (000) 1 126				
City, town, village, etc.	State	ZIP Code	FIGURES report Acceptable	1 125 629 Mil. Thou. Dol.				
City, town, vinage, etc.	State		Item 5. DOLLAR VOLUME	010				
b. Is this establishment physically la boundaries of the city, town, villa	ocated insid	de the legal	OPERATING RECEIPTS of this establishment in 1992	i i				
095 1 🗌 Yes 3 🗌 No legal bo			Item 6. PAYROLL	Mil. Thou. Dol.				
2 🗌 No 🛛 4 🗌 Do not kno	N		Payroll in 1992, BEFORE DEDUCTIONS	030				
c. In what type of municipality is th	is establish	nment	a. Annual					
physically located?				031				
2 🗌 Town or township			b. First quarter (January–March)	Numerica				
3			Item 7. EMPLOYMENT	Number 032				
d. In what county is this establishm	ent physica	ally located?	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)					
Item 3. OPERATIONAL STATUS	00	lumber of months						
a. How many months during 1992 w this establishment actively opera	as		]					
b. Which of the following best desc establishment's status at the end Mark (X) only ONE box.	ribes this of 1992?							
001 1 In operation 2 Temporarily or seasonal 3 Ceased operation – Give 4 Sold or leased to anothe Give date at right AND e etc., below	<i>date at righ</i> r operator –	Figures only Month Year						
			1					
Number and street								
City	State	ZIP Code						

	Page 2							
Item 8. KIND OF BUSINESS OR ACTIVITY	Item 9. SOURCES OF RECEIPTS							
a. Mark (X) the ONE box which best describes the kind of business or activity that accounted for the MAJOR portion of this establishment's receipts in 1992. 070	Report receipts by source either in dollar figures (see example for item 5) or as percentages (in whole percents) of the total – see example below.							
Computer software design and related services	Please do <b>not</b> combine data for two or more receipts lines.							
Custom computer programming services (including software systems analysis and design)	Receipts should include amounts received for work subcontracted to others.							
Prepackaged computer software (development and marketing of prepackaged computer software)	Line a – Include receipts from developing and marketing software for nonspecialized use, such as for payroll and tax accounting, data base systems, etc. Such software may require minor modifications for individual customer needs. Receipts from the sale of software <b>not</b> developed by this firm (resales) should be reported on line j(2).							
the development or modification of software and the "bundling" of software with computers and peripheral equipment to create an integrated system designed for specific applications)	Line b(1) – Include receipts for the development (analysis, design, and programming) of software tailored to customer specifications. Free-lance computer software writers should include receipts from the sale of their software here.							
Other integrated systems design or value added reseller – <i>Describe type of system</i>	<b>Line b(2)</b> – Include receipts from providing systems analysts and/or programmers to participate in the development or maintenance of software systems.							
Computer processing and data preparation	<b>Line c(1)</b> – Include receipts from providing advice related to the management of clients' computer resources. This advice typically consists of assessing the needs of the organization and planning or consulting on the purchase of hardware and software.							
services	Line c(2) Include receipte from providing advice on technical							
Data preparation services (e.g., data entry)	Line c(2) – Include receipts from providing advice on technical matters related to computer systems, such as conducting feasibility studies on the implementation of a system, providing specifications for data base design, and providing technical expertise for the integration of software and hardware.							
Computer facilities management services (management or operation of customers' computer facilities)	<b>Line d</b> – Include receipts from the development or modification of software and the "bundling" of the software with hardware to create an integrated system designed for specific applications.							
Rental and leasing of computers and peripheral equipment	Receipts should represent the combined charges from software development, hardware sales, and other services provided in developing and installing the systems. Receipts from the sale of computer systems comprised entirely of purchased hardware and software should be reported on line j.							
Finance (equity) leasing of computers and related data processing equipment	Line f – Include amounts received for the contract management							
Rental and leasing of computers and related data processing equipment by the manufacturer (or its sales branches)	and operations of government and other data processing facilities. Include operation of computer and data processing facilities at customers' location. <b>Line g</b> – Include receipts from providing computer resources							
Rental and leasing of computers and related data processing equipment, except finance (equity) leasing or leasing by the manufacturer (or its sales branches)	(hardware and software) for the storage and on-line retrieval of information. Line h(1) – Include the fair sales value of merchandise marketed							
Other computer services	in 1992 by your firm under capital, finance, or full payout leases. <b>Do not</b> include installment payments received from any capital, finance, or full payout leases.							
	Line h(2) - Include receipts from rental and leasing (operating							
"On-line" information retrieval services (providing computer resources for the storage and retrieval of information)	leases only) of computers and other equipment. Total receipts should be reported here whether or not the lease includes maintenance.							
Repair and maintenance of computers and related data processing equipment	Line I – Report receipts from providing telecommunications services (e.g., data transmission services, leased networks) here.							
Computer or data processing consulting (software and/or hardware), except programming services								
Computer education and training – other	PERCENTS     • Report whole percents     39       Not acceptable     38.76							
than consulting (software and/or hardware) $\ldots$ 224304	ESTIMATES are acceptable.							
Other computer related services – <i>Describe</i>	Sources of receipts Cen- Report dollars OR percents. use Mil - Thou - Dol Per-							
Other kinds of business	a. Prepackaged computer     400     401     402       software     400     401     402							
Computer hardware or software "store" selling: Primarily to individuals for personal use	(1) Systems and user tools software 221							
Primarily to businesses, government, etc., for business use	(2) Applications software 222							
software) wholesaler								
Research and development of computers and related hardware	(4) Sum a(1) through a(3) 220							
Manufacturer – Describe type of equipment manufactured	b. Custom computer programming, systems design, and related custom software services							
Other – Describe	(1) Custom software development services 231							
b. Was this establishment primarily	(2) All other (e.g., systems analysis and design							
engaged in providing support services <sup>504</sup> (e.g., data processing, research and 1 Yes development) to other establishments	services, including systems maintenance)  232							
of the same company (rather than for $2 \square NO$ the general public or other business	(3) Sum b(1) and b(2) 230							
firms) in 1992? FORM CB-7307	ITEM 9 CONTINUED ON PAGE 3 CONTINUE ON PAGE 3							
	CONTINUE ON PAGE 3							

						Page
FORM CB-7307 1992 CENSUS COMPUTER AND	OF SERVIC	CE INC		RIES	IMERCE CENSUS	Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)
Item 9. SOURCES OF RE	ECEIPTS – Conti	nued				Item 10. INTEGRATED SYSTEMS DESIGN
HOW TO total sales	s <b>38.76%</b> of	Mil.	   Thou.	Dol.	Per- cent	(To be completed by establishments engaged in integrated systems design)
REPORT	whole percents		1	<b>→</b>	39	a. Did this establishment perform any of the following functions or activities in developing integrated systems?
Not acce	eptable ———	ESTIN	IATES a	<u>→</u>	38.76	(1) Write or modify software (custom or 493 prepackaged) 1 Yes 2 No
Sources of receipt	s Cen-		t dollars			prepackaged) 1 1 Yes 2 No (2) Develop systems which include primarily
	use	Mil.	Thou.	Dol.	Per- cent	494
c. Consulting services	400	401			402	(b) Other than computers and peripheral 495
(computer related) (1) Related to the install	ation of		1			equipment 1 Yes 2 No
hardware	241		1			
(2) Systems and other to	echnical		l	l		b. Estimate the percentage of the value of Report in
computer related co	nsulting 242		 	 		the integrated systems sold or leased whole percents (reported on line d of item 9) for the following categories –
(3) Sum c(1) and c(2)	240		1			
d. Computer integrated			1	 		(1) Software 497
systems (sale or lease	-		<u> </u>	<u> </u>		(2) Hardware and other equipment
e. Computer processing s	Services		i I	i I		(3) Other (e.g., consulting, training, engineering)
(1) Data processing and tabulation services	261		 	 		(4) TOTAL 100%
(2) Data entry services	262		 	 		c. Was any of the equipment/hardware included in the systems sold or leased by this establishment either
(3) Other computer proc	essing 263			 		manufactured or assembled – (Mark (X) all that apply)
(4) Sum e(1) through e(3	3) 260		1	l		Manufactured Assembled
				 		(1) <u>At this location?</u> 1 Yes 2 No 1 Yes 2 No
f. Computer facilities management services	271		 <del> </del>	 <del> </del>		(2) At other locations of trianguages and the second secon
g. On-line information re	trieval		1	1		this company? 1 ∐Yes 2 No 1 ∐Yes 2 No "Manufacturing" includes making computers and other equipment
services	272		+	 		from parts that this company built or fabricated.
h. Rental and leasing			1	 		"Assembly" includes making computers and other equipment from parts that were purchased; final assembly; and testing. Do not consider linking computers to peripheral devices, networks,
(1) Finance (equity) leas (2) All other rental and I	easing,		I	I		etc., as "assembly."
except finance leasir	g		1	 		Item 11. RECEIPTS, BY CLASS OF CUSTOMER Report in whole percent of receipts
(a) Computers and peripheral equip	ment <b>274</b>		i i	I		Estimate the percentage of receipts (reported in item 5) by class of client.
(b) Other equipment	_		1	 		a. Individuals
Describe in REM. more than 10 pe	ARKS if rcent of		1	1		b. Trade, farming, industrial, transportation, financial, and other business firms
i. Maintenance and repa	275			 		443 c. Federal Government
(1) Computers and perip			1	 		d. State and local governments
equipment (2) All other equipment –	Describe		1			445
in REMARKS if more percent of total receip	than 10		1	 		e. All other
j. Sales of merchandise equipment	and					f. TOTAL 100% Item 12. EXPORTED SERVICES
(1) Computers and perip	oheral		I	I		<b>NOTE</b> – An exported service is a service performed for a customer
equipment (2) Prepackaged softwar	279 .e		<u> </u>	 		or client (individual, government, business establishment, etc.) located <b>outside</b> the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S.
(resales)	281		1	I		possessions). Services performed for unaffiliated and affiliated foreign firms (i.e., foreign parent firms, subsidiaries, branches, etc.)
(3) All other – Describe i REMARKS if more th	an 10		i I			are included. Services provided to domestic subsidiaries of foreign firms are excluded.
percent of total recei	pts. 575		I	ļ		a. Did the receipts reported in item 5 include any amounts received 406 406
k. Other computer relate services – Describe in R	EMARKS		i i	I		for exported services?
if more than 10 percent or receipts.	of total 282			 		$\begin{array}{c} 405 \ 1 \ \Box \ Yes - Amount \longrightarrow \\ 2 \ \Box \ No \end{array}$
				. <u> </u>		b. Did this establishment receive any
I. All other receipts – De REMARKS if more than	10		1	 		amounts for exported services which were NOT included in item 5? 408
percent of total receipts.	585		+			407 1 ☐ Yes – Describe type of service in REMARKS and report amount here →
m. TOTAL (Should equal it if reporting in d			1	 	100%	2 🗌 No

CONTINUE ON PAGE 4

												Page 4
lte	em 13. O\	WNERSHIP, C	ONTROL, AND LOCA	TIONS OF OPERA	TION							
a.	Is the FIRS	ST DIGIT of	your Census File N	lumber (shown in	n the ad	dress lab	el immediat	ely after "CFN"	) a zero?	•		
		Yes – Comple No – Skip to l										
ь.	Is this cor or control company?	npany owne lled by anoti ?	ed Enter name, a her	ddress, and El Nur	mber of	the ownir	ig or controlli	ng company				
	097 1 🗌 2 🗌	Yes <del>→</del> No						El No. (9 digits)				
c.	Does this	company o	wn Enter name, a	ddress, and El Nur	mber of	the owne	d or controlle	-				
	company	l any other or companie Yes —>	es?									
	2							El No. (9 digits)				
								ET NO. (9 digits)		1	Number	-
d.	label (or a	s corrected	nents operated und in item 1) AT THE	END of 1992?						079		
	establishm needed, co	ent. The head ontinue in the	de the <b>physical loca</b> dquarters location sh same format in REM	ould be first, follow ARKS or on a sepa	wed by a	all other lo	ocations. If me					
		are accepta	able if book figures a	are not available.					1000			
	Name								1992	Mil. 081	Thou.	Dol.
	Number ar	nd street							Receipts			1
	City				State		ZIP Code		Annual payroll	082		1
1	City				State		ZIF Code			employ	ees for	pav
	Kind-of-bu	siness descrij	ption						perioc 083	includi	ng Mar	ch 12
									Census use	088		
	Name								1992	Mil. 081	Thou.	Dol.
	Number ar	nd street							Receipts	081		
	City				State		ZIP Code		Annual payroll	082		
2		siness descrij	ption						Paid perioc	employ i includi	ees for ng Mar	pay ch 12
									083			
									Census use	088		
RE	MARKS - /	Please use th	is space for any expl	anations that may	be esse	ntial in ur	derstanding y	our reported dat	a.			
lte	em 14. CE	RTIFICATION	Ŋ – This report is sub	ostantially accurate	and ha	s been pr	epared in acc	ordance with ins	tructions			
	riod cover this repo	rt Thom.	, I	TO: Mo.	Year		person to co	ntact regarding t	his repor	t – Print	t or type	9
Те	lephone	Area code	Number	Extension		Title						
Sig	gnature of a	authorized pe	rson							Dat	e	
FORM	1 CB-7307		PLEA	SE PHOTOCOPY	THIS F	ORM FOR	YOUR REC	ORDS				

	U.S. DEPARTMENT OF COMMI BUREAU OF THE CENSUS		992 CENS		F SERVICE INDUST	RIES	
OF THE COM	CB-7802				OMB No. 0607-0729: A	Approval	Expires 06/30/9
If you have this report, Census Burd be sure to r File Numbe to the right. completed r BUR 1201 Jeffe Toll-free ass	E: FEBRUARY 15, 199 questions about completing please call or write the eau. In any communication, efer to the 11-digit Census r (CFN) printed in the label Please return your report to: EAU OF THE CENSUS East 10th Street prsonville, IN 47134-0001 sistance, 8:00 a.m. to 8:00 p.1 e, Monday through Friday: 1–800–233–6136					CB-7802 	2
instru	e read the accompanying uctions before answering uestions.						
	Census use						
			(Plea	ise correct a	any errors in name, address, and ZIP	Code.)	
this quest IS CONFI retained in	SPONSE IS REQUIRED BY ionnaire to answer the quesi DENTIAL. It may be seen o n respondents' files are imm PLOYER IDENTIFICATION NU	tions and nly by Cer une from	return the report to nsus Bureau emplo	o the Census yees and m	uires businesses and other organiza s Bureau. By the same law, <b>YOUR C</b> hay be used only for statistical purpo LEGAL FORM OF ORGANIZATION	tions that E <b>NSUS</b> ses. Furtl	receive REPORT her, copies
label the san on its latest Return, Trea	yer Identification (EI) Nun ne as the one used for thi 1992 Employer's Quarterl sury Form 941?	s establis ly Federal	shment I Tax	legal form	the following best describes this m of organization during 1992? only ONE box. 1		shment's
094 1	Yes 2 No – <i>Report o</i>	current El	No. below		2 Partnership 5 Government – <i>Specify</i> 0 Corporation		
Item 2. PHY	SICAL LOCATION				9 $\Box$ Other – Specify		
a. Is this est the addre	ablishment's physical loc ss shown in the label? (P.(	<b>ation the</b> O. box and	e <b>same as</b> d rural route				
093 1	are not physical locations)	physical Ic	ocation below	<i>HOW TO REPORT DOLLAR FIGURES</i>	Dollar figures should be <b>rounde</b> to <b>thousands</b> of dollars. <b>Example:</b> If a figure is <b>\$1,125,628.79</b> • <b>Preferred</b> report	lions (000) <b>1</b>	Thou- Dol- sands lars (000) (000) <b>126</b>
Number a	ind street			ltem 5.	DOLLAR VOLUME	le 1 Mil.	125 629 Thou. Dol.
City, town	n, village, etc.	State	ZIP Code	OPERATI	ING RECEIPTS of this	010	· · · · · ·
b. Is this est boundarie	ablishment physically loc as of the city, town, villag	ated insi e, etc.?	de the legal	establish Item 6.	PAYROLL	Mil.	Thou. Dol.
	Yes 3 🗌 No legal bou	ndaries			n 1992, BEFORE DEDUCTIONS	030	
2	No 4 Do not know			a. Annua	al	031	
c. In what ty physically	/pe of municipality is this / located?	establisi	hment			031	
	City, village, or borough Town or township				juarter (January–March) EMPLOYMENT		Number
з 🗌	Other – Specify				of paid employees for pay	032	
	」Do not know ounty is this establishmer	nt physica	ally located?	period in	ocluding March 12, 1992 both full- and part-time		
		-	lumber of a star	ltem 8.	KIND OF BUSINESS OR ACTIVITY		
a. How man	ERATIONAL STATUS y months during 1992 was lishment actively operate	00 S	Number of months	Motion pie	cture theater, except drive-in	070	783201
b. Which of establishr	the following best describ ment's status at the end o	bes this		Drive-in m	notion picture theater		783301
Mark (X) o 001 1 [ 2 [ 3 [ 4 [	nly ONE box. In operation Temporarily or seasonally Ceased operation – <i>Give d</i> Sold or leased to another of <i>Give date at right AND enter.</i> , below	inactive ate at righ			except motion picture – <i>Describe</i> d of activity – <i>Describe</i>		☐ 777776 ☐ 777777
	new owner or operator						
Number a	nd street						
City		State	ZIP Code				
	R FAILURE TO REPORT			-		CONITIN	UE ON PAGE

											Page 2
Item 9. SOURCES OF F	RECEIPTS		HOW	то	If figure is sales:	38.76% o	f total	Mil.	   Thou.	Dol.	Per- cent
Report receipts by source for item 5) or as percenta see example to the right.	ges (in whole percents)		REPOI PERCE	٦Ť	S • Report v	whole perce	ents ———			· 	39
Please do <b>not</b> combine d		eipts lines.			Not acce	eptable ——		ESTIN	IATES a	re acce	38.76 ptable.
<b>Do not</b> include anywhere stores or other real estate operators of concessions	e, or receipts from sales	s from rental of s made by			Sources of rece	eipts	Cen sus use		t dollars   <sub> </sub> Thou.	<b>SORpe</b> Dol.	rcents. Per- cent
Line a(1) – Amount receined include State and loc	ved from the sale of ad	missions. <b>Do</b>	a. Rec	eipt	ts from theater pa	s from theater patrons			   	   	402
Line a(2) – Total receipts vending machines owned	from refreshment stan <b>d</b> by this establishment	t, excluding	(1)		m admissions (e nission taxes)	xcluding	374	<u>،</u>	1 	 	
sales tax. Receipts from e this establishment should establishment's share of concessions and from ele	d be included on line a( receipts from vending r actronic game machines	4). This machines or s owned by	(2)	ver	m refreshment s nding machines c ablishment (exclu	wned by th	is tax) <b>375</b>	5	 	 	
others and operated on th line b.		-	(3)	Fro (ex	m all other merc cluding sales tax	handise sal )	es 575	5	 	 	
Line a(4) – Include receip owned by this establishm	nent.		(4)	Des	other receipts fro	KS if more i	_ than <b>585</b>	_	1	1	
Line b – Amount received located on these premise compensation was in the of the receipts. Also inclu	s, regardless of whethe form of a flat rental or	er a percentage	(5)		percent of total r TAL (Should equ reporting in	ual item 5 if			   	   	
of the receipts. Also include here <b>this establishment's share</b> of receipts from vending machines and electronic game machines owned by others and operated on these premises, receipts from screen advertising, and receipts from rental of theater facilities (e.g., for meetings, receptions).				s ai tron	ts from other sound ny amount other as received by t business operat	irces or than froi his establi	shment	511	   	   	
			510		□ Yes □ No		<b></b>		1	   	
Item 10. PAID ADMISS Report admissions to the	SIONS DURING 1992	Number admissio		lt	em 13. OWNEI OF OPE	RSHIP, CON ERATION – (	TROL, AN Continued	D LOCA	TIONS		•
		Thou. 515	000	d.	How many est the Employer					Num	ber
<ul> <li>a. Conventional theater - of paid admissions</li> <li>b. Drive-in theater</li> </ul>	lotal number	516	 								
(1) Total number of pa charge was by per	person in the car	517	 	If more than one, provide the <b>physical location</b> address a other information indicated below for each establishment. headquarters location should be first, followed by all other locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.							
(2) Total number of ca charge was by the		517	 		Estimates are			igures ar	e not av		
Item 11. THEATER CA DECEMBER 3					Name		·	1992	Mil. 081	Thou.	Dol.
Drive-in motion picture th having seats should repo and seating capacities se	neaters int car	Numbe 518	r		Number and str			Receipts Annual	082	 	 
<b>a.</b> Seating capacity				1	City			payroll Paid	employ	ees for	pay
b. Car capacity (if this is a picture theater)		519			Kind-of-busines	s descriptio	'n	083	inclua	ng Mar	cn 12
Item 12. NUMBER OF a. Does this report cov of more than one the	ver operation	520 1 ☐ Yes 2 ☐ No	5		Motion picture t	theaters – ens	085	Census use	088		
screen?		2 🗆 🗤			Name			1992		Thou.	Dol.
b. If "Yes," mark (X) OI number.	NE box and enter	Number			Number and str	reet		Receipts	081	1	   
(1) Theaters at diffe	erent physical locations			2	City	State	ZIP Code	Annual payroll	082		I
	reens at same location	522			Kind-of-busines	s descriptio	n	Paid perioc	employ I includi	ees for ng Mar	pay ch 12
Item 13. OWNERSHIP, a. Is the FIRST DIGIT o	of your Census File N	umber (shown						003			
in the address label	immediately after "C	CFN") a zero?			Motion picture to number of scree		085	Census use	088		
2 🗌 No – Skip to				R	EMARKS – Pleas	se use this : ntial in und	space for a erstanding	any expla a your re	anations ported o	that ma data.	ay be
	Enter name, address, a owning or controlling c		of the				-				
097 1 🗌 Yes —>				lt		ICATION - s been prep					
2 🗌 No	El No. (9 digits)			Pe by	riod covered FR			ear TO:	Mo		Year
c. Does this company	-		of the	<u> </u>	me of person to	contact reg	arding thi	s report	– Print	or type	
other company or companies?		. ,		Tit	le						
098 1 □ Yes → 2 □ No				Te	lephone	Area code	Numbe	r	E	xtensio	n
	El No. (9 digits)			Siç	gnature of author	rized persor	1		Date		
FORM CB-7802	-					PECORDE			I		

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM		1992 CENSUS OF SERVICE INDUSTRIES MISCELLANEOUS AMUSEMENT AND RECREATION SERVICES									
<b>CB-7903</b>		OMB No. 0607-0729: Ap	proval E	xpires (	)6/30/94						
DUE DATE: FEBRUARY 15, 1993         If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:         BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001         Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:         1-800-233-6136         Please read the accompanying instructions before answering the questions.		CB-7903									
	(Plea	ase correct any errors in name, address, and ZIP C	ode.)								
this questionnaire to answer the questions IS CONFIDENTIAL. It may be seen only by retained in respondents' files are immune f	and return the report to / Census Bureau emplo rom legal process.	s Code, requires businesses and other organization the Census Bureau. By the same law, <b>YOUR CEI</b> yees and may be used only for statistical purpose	<b>NSUS F</b> s. Furth	er, copi	F						
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number label the same as the one used for this est on its latest 1992 Employer's Quarterly Fee Return, Treasury Form 941?	shown in the ablishment	Item 4. LEGAL FORM OF ORGANIZATION AND a. LEGAL FORM OF ORGANIZATION Which of the following best describes this legal form of organization during 1992? Mark (X) only ONE box.			ıt's						
094 1 🗌 Yes 2 🗌 No – <i>Report currer</i> (9 digits)	nt El No. below	<ul> <li>1 Individual owner (sole proprietorship)</li> <li>2 Partnership</li> <li>5 Government - Specify</li> <li>0 Corporation</li> </ul>									
<ul> <li>a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)</li> <li>093 1 Yes 2 No - Report physical location</li> <li>Number and street</li> <li>City, town, village, etc.</li> <li>b. Is this establishment physically located boundaries of the city, town, village, etity, town,</li></ul>	e ZIP Code	9 Other - Specify b. TAX STATUS (1) Is this establishment operated on a nor 005 1 ☐ Yes 2 ☐ No - Skip to item 5 (2) Was all or part of the income of this e organization exempt from Federal inc section 501 of the Internal Revenue C 004 1 ☐ Yes	ot-for-p stablis ome ta	rofit ba	asis? or						
095 1 ☐ Yes 3 ☐ No legal boundarie 2 ☐ No 4 ☐ Do not know	25	2 No HOW TO REPORT CONTENT		Thou-   sands     (000)							
c. In what type of municipality is this esta physically located?	blishment	DOLLAR     Is \$1,125,628.79     • Preferred       FIGURES     report     Acceptable	<b>1</b>	<b>126</b>	629						
096 1 ☐ City, village, or borough 2 ☐ Town or township 3 ☐ Other – <i>Specify</i> 4 ☐ Do not know d. In what county is this establishment phy	-	<ul> <li>Item 5. DOLLAR VOLUME</li> <li>NOTE – Amusement parlors and video arcades should include commissions received from vending and amusement machine operators. If the answer to item 4b(2) was "Yes," skip to part b; otherwise, complete part a and skip to item 6.</li> <li>a. OPERATING RECEIPTS of this</li> </ul>	010		Dol.						
Item 3. OPERATIONAL STATUS a. How many months during 1992 was this establishment actively operated?	Number of months	<ul> <li>(taxable) establishment in 1992</li> <li><b>REVENUE AND EXPENSES</b> of this (tax-exempt) establishment in 1992</li> <li>(1) REVENUE</li> </ul>	010								
b. Which of the following best describes the establishment's status at the end of 199 Mark (X) only ONE box.	nis )2?	(1) <u>REVENUE</u>	040	ı   							
$001 1 \square$ In operation	Figures only	(2) EXPENSES (including payroll)									
2 ☐ Temporarily or seasonally inacti 3 ☐ Ceased operation – <i>Give date at</i> 4 ☐ Sold or leased to another opera <i>Give date at right AND enter na</i> <i>etc., below</i>	ve Month Year right tor –	Item 6. PAYROLL Payroll in 1992, BEFORE DEDUCTIONS a. Annual	Mil. 030	Thou.   	Dol.						
Name of new owner or operator	I I	b. First quarter (January-March)									
Number and street	e ZIP Code	Item 7. EMPLOYMENT Number of paid employees for pay period including March 12, 1992	032	Numbe	r						
PENALTY FOR FAILURE TO REPORT		(Include both full- and part-time employees)			PAGE 2						

Mark (X) the ONE box which best describes the busin that accounted for the MAJOR portion of this establish	ess or activity hment's	Report for item
receipts or revenue in 1992. 070		Please lines.
Carnivals, circuses, and fairs Carnival or circus	799921	Line a (includi
		establis
Concession operator (amusements, rides, etc.).	799911	paid to
Fair (State, county, etc.)	799931	arcades
Amusement park, theme park, water park,	<b>—</b>	Line b(
kiddie park	799601	specific Line b(
Coin machine operations		facilitie or pool
Coin machine operator (or distributor) – operator		Line b(
of coin-operated machines located in other establishments		canoes, Line b(
	799301	refresh
Pinball, electronic games, and other		of alcoh concess
amusement machines	799302	vending
Merchandise vending machines	596209	Line b( of coin
Service machines, except laundry (weighing, locker rental, etc.)	729995	report
Amusement parlor or video arcade	799303	Line b( such as
		Line d( restricted
Membership clubs	_	made f
Country club, membership	799701	Line d( premise
Yacht club, membership	└ 799702 └ 448900	radio o
Marina	448900	receipts dividen
		investm
Membership sports and recreation club, except country or yacht (e.g., tennis, golf,	_	
swimming club)	799703	So
Gymnasium or athletic club	799191	
Physical fitness, strength development, or weight training center, membership	799111	<b>a.</b> Amu
Civic, social, or fraternal membership		(1)
association	864109	
Other amusement and recreation services		(2)
(except membership clubs)		
Physical fitness, strength development, or weight training center	799112	(3)
Diet or weight reducing center (no physical	_	(4)
fitness facilities)	729972	
Billiard or pool establishment	799991	(5)
Rental of amusement and recreation items (e.g., beach chairs, bicycles, boats, horses)	799992	<b>b.</b> Othe
Sports instruction (including instructional		(1)
schools and camps)	799993	
Golf driving range	799994	(2)
Miniature golf	└ 799994 □ 799201	· ·
	L /33201	(3)
Casino (gambling) with 25 or <b>more</b> guestrooms for lodging	701116	
Casino (gambling) with <b>less</b> than 25 (or no)	_	(4)
guestrooms for lodging	☐ 799995 ☐ 799961	(5)
Skating rink, ice	799971	
Swimming pool, bathing beach	799996	(6)
Ski area with 25 or <b>more</b> guestrooms for		
lodging	701117	(7)
Ski area with <b>less</b> than 25 (or no) guestrooms	799997	(8)
for lodging	799998	(9)
Sports professional, except jockey or racing		
car driver	<b>799999</b>	
Public dance hall or ballroom	791111	c. TOT EST
Dancing school (including modern dance, ballet, tap, ethnic, etc.)	791121	thro Tax-
		blan
Other amusement or recreation service – <i>Describe</i>	77776	d. Othe
		(1) (2)
		(2)
Other kind of activity – Describe	777777	_
· · · · · · · · · · · · · · · · · · ·		e. TOT
		(Sun
		and

ltem 8.

KIND OF BUSINESS OR ACTIVITY

#### Item 9. SOURCES OF RECEIPTS OR REVENUE

Report receipts or revenue by source in dollar figures (see example for item 5).

Please do **not** combine data for two or more receipts or revenue ines.

Line a – Operators of coin-operated amusement machines (including coin-operated gambling machines) located in other establishments should report in part a the total amount paid by customers into such machines, without deduction for amounts paid to those establishments. Amusement parlors and video arcades should report on line b(9) their share of receipts from coin machines operated by others.

Line b(1) – Report amounts received from the sale of general or specific exhibit admissions, exclusive of any State or local taxes. Line b(2) – Report amounts received for the use of recreational facilities. Include tuition or fees for instructional services, billiard or pool table fees, and greens fees.

**Line b(4)** – Report amounts received from the rental of boats, canoes, beach chairs, and other recreational items.

Line b(5) – Report amounts received from sales of food, candy, refreshments, etc., excluding all sales taxes. Do not include sales of alcoholic beverages, receipts made by operators of concessions, or this establishment's share of receipts from vending machines operated by others at this establishment.

Line b(8) – Report casino's share of gaming receipts. Operators of coin-operated gambling machines (e.g., slots) should report on line a.

Line b(9) – Report amounts received from miscellaneous sources such as parking fees, etc.

Line d(1) – Report contributions, gifts, and grants, whether or not restricted against use for operations. Include here any donations made for admissions.

**Line d(2)** – Report receipts from operators of concessions on the premises, rental of display space, advertising, endorsements, radio or television broadcast income, and other noncustomer receipts. Also include amounts received from interest and dividends, but exclude income derived from the sale of investments, real estate, or other assets.

	Sources of receipts or revenue		Cen- sus		IMATES cceptab	
			use	Mil.	   Thou.	Dol.
а.	Am	usement machines	400	401		
	(1)	Phonograph, compact disc, or	401			
		video jukeboxes	401		1	
	(2)	Pinball machines	402			
	(3)	Video games	403			
	(4)	Other amusement machines ( <b>exclude</b> billiard or pool tables)	404			
	(5)	Sum lines a(1) through a(4)	400			
Ь.	Oth	er amounts received from customers				
	(1)	Admissions (do not include admission taxes)	374			
	(2)	Amounts received for the use of recreational facilities	395			
	(3)	Membership dues and fees	444			
	(4)	Rental fees	342			
	(5)	Sales of food and refreshments, excluding alcoholic beverages	122			
	(6)	Sales of alcoholic beverages	123			
	(7)	Sales of other merchandise	575			
	(8)	Gaming receipts	399			
	(9)	All other amounts received from customers – <i>Describe in</i> <i>REMARKS if more than 10 percent</i> of total receipts.	585			
c.	ES thro	TAL RECEIPTS OF TAXABLE TABLISHMENTS (Sum of lines a(5) ough b(9) should equal item 5a) -exempt establishments – leave nk	990			
d.		er sources of receipts or revenue Contributions, gifts, grants	701			
		All other sources – e.g., dividends, rents, interest ( <b>Do not</b> include income from the sale of investments)	785			
е.	TA (Su and	TAL REVENUE OF X-EXEMPT ESTABLISHMENTS m of lines a(5) through b(9), d(1) d(2) should equal item 5b(1)) able establishments – leave blank	995			

**CONTINUE ON PAGE 3** 

FORM CB-7903

								Page 3
FOR	MISCELLANEO	U.S. DEPARTMENT OF COMME BUREAU OF THE CEN F SERVICE INDUSTRIES US AMUSEMENT AND TION SERVICES	NSUS Enter 1 CENSU as sho	the 11-digit JS FILE NUMBER wn on this report abel on page 1)				
lt	em 10. OWNERSHIP, CONT	ROL, AND LOCATIONS OF OPERATIC	DN					
a.	Is the FIRST DIGIT of your	Census File Number (shown in th	he address la	bel immediately after "CFN"	) a zero?			
	1							
b.	Is this company owned or controlled by another company?	Enter name, address, and El Numb	er of the own	ing or controlling company				
	097 1 ☐ Yes —→ 2 ☐ No			El No. (9 dig	its)			
C.	Does this company own or control any other company or companies?	Enter name, address, and El Numb	er of the own	ed or controlled company	·			
	098 1 ☐ Yes —→ 2 □ No							
				El No. (9 dig	its)		<u> </u>	
	How many actablichments	s operated under the Employer Id	entification	Number shown in the		079	Numbe	r
u.	label (or as corrected in it	em 1) AT THE END of 1992?						
	each establishment. The hea room is needed, continue in	e <b>physical location</b> address and oth dquarters location should be first, fol the same format in REMARKS or on	llowed by all	other locations. If more				
	-	if book figures are not available.			1000	D 4:1	<b>The</b>	Del
	Name				1992 Receipts	Mil. 8 081	Thou.	Dol.
	Number and street				or revenue	082		1
1	City		State	ZIP Code	Annual payroll Paid		ees for	
	Kind-of-business description		•		perio	d includi	ng Mar	ch 12
					083			
					Census	088		
-	Name				<b>use</b> 1992	Mil.	Thou.	<sup> </sup> Dol.
	Number and street				Receipts or revenue	6 081		1
	City		State	ZIP Code	Annual payroll	082		1
2					Paid	l employ	ees for	pay
	Kind-of-business description				083	d includi	ng Ivlar	cn 12
					Census	088		
					use			
	Name				1992 Receipts		Thou.	Dol.
	Number and street				or revenue			1
	City		State	ZIP Code	Annual payroll	082		1
3						l employ d includi		
	Kind-of-business description				083		<u></u>	
					Census use	088		
BE	MARKS - Please use this sna	nce for any explanations that may be	essential in u	nderstanding your reported data				
			coocinital in a					
Ite	em 11. CERTIFICATION – Th	nis report is substantially accurate and	d has been pr	epared in accordance with instr	uctions.			
	riod covered FROM: Mo.	Year TO: Mo. Yea	ar Name of p	erson to contact regarding this	report – <i>Pri</i>	int or typ	е	
<u>⊢</u>	ephone Area code	Number Extension	Title					
	nature of authorized person				Date	э		

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

		U.S. DEPARTMENT BUREAU OF THE CENS FORM CB-8001	OF COMME SUS	OF	FICES			F PHYSICIA NTISTS)	E INDUSTR	R HEA	HEALTH				
		02 000 .						ОМ	B No. 0607-0729: Ap	proval E	xpires (	06/30/94			
lf tl C b F t	f you have his report, Census Bure be sure to re ile Number	E: FEBRUARY questions about co please call or write eau. In any commu efer to the 11-digit r (CFN) printed in t Please return your eport to:	ompleting the inication, Census the label	3	[				c	B-8001 	]				
	1201	EAU OF THE CENS East 10th Street rrsonville, IN 47134													
T e	oll-free ass astern time	sistance, 8:00 a.m. t e, Monday through 1–800–233–6136	to 8:00 p.m Friday:	ı.,											
	instru	e read the accomp uctions before answ uestions.													
		Census use													
						(Plea	se correct any	verrors in name	e, address, and ZIP C	ode)					
		11				1				,					
	this quest IS CONFI	ionnaire to answer	the questi be seen on	ons and r	eturn the r sus Burea	report to u emplo	the Census B	Sureau. By the s	and other organizatic ame law, <b>YOUR CE</b> I or statistical purpose	NSUS F	REPORT	Г			
Ite	<b>m 1.</b> EMF	PLOYER IDENTIFICA	ATION NU	MBER			Item 4. LE	GAL FORM OF	ORGANIZATION AND	D TAX S	TATUS				
		yer Identification						ORM OF ORGA							
on	its latest	ne as the one use 1992 Employer's sury Form 941?	ed for this Quarterly	establisl Federal	hment Tax		legal for	f the following m of organizat only ONE box.	best describes this ion during 1992?	s practi	ice's				
	094 1		– <i>Report cu</i> digits)	urrent El N	No. below		003	in a grou	ctitioner (including in p practice filing a so ncome tax return)	dividua le propr	l practit ietorshi	ioner p			
a.	ls this est	'SICAL LOCATION ablishment's phy ss shown in the l	/sical loca	<b>tion the</b> . box and	<b>same as</b> rural rout	e		of group	nip (including associa practice filing a part ax return)	ation or nership	other fo Federal	orm			
		are not physical lo ] Yes 2 🗌 No -	cations) – <i>Report pl</i>	hysical loc	cation belo	w		0 🗌 Professio	nent – <i>Specify</i> onal service organizati g under State profes	tion or a	associati	ion			
	Number a	nd street						or corpor	ration statutes, and find the second statutes and find the second statutes and find the second statutes and the second statutes are statutes and statutes are statutes and statutes are statu are statutes are statu	iling a c	orporati	on			
	City, town	, village, etc.		State	ZIP Code				ion (other than speci Specify		ove)				
ь.	ls this est	ablishment physi	ically loca	ted insid	le the leg	al	b. TAX STA	ATUS							
		es of the city, tow ]Yes 3 □ No	<b>vn, village</b> legal boun						nt operated on a ne	-		asis?			
			not know	daries			005	1 Ves	2 ∐ No – <i>Skip</i> he income of this e			<u></u>			
	In what ty physically	/pe of municipali / located?	ty is this o	establish	ment		orgai secti	nization exemp	pt from Federal inc Internal Revenue C 2 \[] No	ome ta					
	096 1	City, village, or b	orough				004		should be <b>rounded</b>	Mil-	Thou-	Dol-			
		Town or townshi	•				HOW TO REPORT	to thousands	s of dollars.		sands   (000)				
		] Other – <i>Specify</i> _ ] Do not know				_	DOLLAR FIGURES	Example: If is \$1,125,62 report	a figure 8.79 • <i>Preferred</i>	1	126	(000)			
d.	In what co	ounty is this esta	blishmen	t physica	lly locate	d?		•	Acceptable	1	125	629			
					,		If the answe	DLLAR VOLUME r to item 4b(2) v	vas "Yes," skip	Mil.	Thou.	Dol.			
Ite	m 3. OPE	RATIONAL STATU	JS		umber of	months	to part b; oth skip to item	herwise, comple 6.	ete part a and		I   I	1			
		y months during <sup>*</sup> lishment actively			2			ING RECEIPTS establishment in		010	I I	I			
		the following bes					b. REVENU	E AND EXPEN	ISES of this	010					
	establishr	<b>nent's status at t</b> nly ONE box.	the end of	1992?			(tax-exem	npt) establishme ENUE	ent in 1992			   			
	-	In operation		41		es only	(2) EXPE	<b>NSES</b> (includin	ng payroll)	040		l			
	_	☐ Temporarily or se ☐ Ceased operation				n Year	Item 6. PA			Mil.	Thou.	Dol.			
	4	Sold or leased to	another of	perator –			Payroll in 1	992, BEFORE	DEDUCTIONS	030	I	 			
		Give date at right etc., below	t AND ente	er name,			a. Annual				I	I			
		etc., below		er name,						031		 			
		etc., below		er name,			b. First qua	a <b>rter (January</b> -	March)		     Numbe	 			

CONTINUE ON PAGE 2

	Page 2
Item 8. KIND OF ACTIVITY OR OPERATION	Item 9. PERSONNEL, BY OCCUPATION
Mark (X) the ONE box which best describes this practice or facility in 1992. 070	Note – Data on "Type of employee" should cover only the personnel under this Employer Identification (EI) Number. Line a(10) should equal item 7.
Offices of health practitioners (including group clinics owned and operated by health practitioners associated for the purpose of	<b>Line a</b> – Physicians who are members of a professional corporation (PC) or professional association (PA) should be included in "Type of employee" data.
<b>carrying on their profession)</b> Office of physician(s) (licensed practitioner(s)	Line b – Only proprietors and partners <b>not</b> considered employees of the firm for Federal income tax purposes should be included here.
having <b>M.D.</b> degree and engaged in the practice of general or specialized medicine and/or surgery) 801111	Personnel for pay period including
Office of osteopathic physician(s) (licensed practitioner(s) having <b>D.O.</b> degree and engaged in the practice of general or specialized osteopathic medicine and/or surgery)	a. Type of employee March 12, 1992 (number) (1) Physicians (licensed practitioners having M.D. degree)
Office of chiropractor(s)	534
Office of podiatrist(s)	(2) Osteopathic physicians (licensed practitioners having <b>D.O.</b> degree) 535
Office of optometrist(s)	(3) Chiropractors (licensed practitioners having <b>D.C.</b> degree)
Office of dentist(s)	536 (4) Podiatrists (licensed practitioners
nurses, physical therapists, and psychologists) 804901	having <b>D.P.</b> degree)
Outpatient care facilities (including clinics) NOT owned and operated by health practitioners associated for the purpose of carrying on their profession	(5) Optometrists (licensed practitioners having <b>O.D.</b> degree) 538
General medical clinic (staffed by licensed practitioners having M.D. degree)	(6) Registered nurses
General medical clinic (staffed by licensed practitioners having <b>D.O.</b> degree)	539 (7) Licensed practical nurses
Ambulatory surgical center	540
Emergency or urgent care center ............	(8) All other health practitioners
Chiropractic clinic	(9) All other employees (bookkeepers, secretaries, etc.)
Podiatric clinic	542 (10) TOTAL (Sum of lines (1) through (9)
Optometric clinic	should equal item 7) 450
	<ul> <li>b. Active proprietors or partners at this location (unincorporated practices only)</li> </ul>
Kidney dialysis center	For partnerships operating more than one location, report partners at the one location at which they spend most of their working time.
	Group practices should include only physicians who are members of the practice covered by this El Number.
Hospital and medical service plans (including HMO's)	Item 10. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION
General medical clinic operated by the provider of a prepaid medical plan	a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero?
Other health facility operated by the provider of a prepaid medical plan – <i>Describe</i>	1
Management office engaged in arranging for hospital, medical, and other health services in return for a fixed periodic premium from subscribers	b. Is this company owned or controlled by another company?
Other health services Association or similar group of health practitioners formed solely for the purpose of sharing expenses (Employer Identification Number is assigned to the association)	097 1 □ Yes → 2 □ No
Optical goods store	EI No. (9 digits)      C. Does this company     Enter name, address, and El Number of the     own or control any     owned or controlled company
Other kind of health service – <i>Describe</i>	other company or companies?
<b>Other kind of activity or operation –</b> <i>Describe</i>	$\begin{array}{ccc} 098 & 1 \square Yes \longrightarrow \\ 2 \square No \end{array}$
	El No. (9 digits)
FORM CB-8001	ITEM 10 CONTINUED ON PAGE 3 CONTINUE ON PAGE 3
=	CONTINUE ON PAGE 3

**CONTINUE ON PAGE 3** 

												Page 3	
	ORM     CB-8001     U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS       1992     CENSUS OF SERVICE INDUSTRIES       OFFICES AND CLINICS OF PHYSICIANS AND OTHER HEALTH PROVIDERS (EXCEPT DENTISTS)     Enter the 11-digit CENSUS FILE NUMBER as shown on this report (see label on page 1)												
	How many e	stablishmen	ts operated	OCATIONS OF OPERATIC under the Employer Id THE END of 1992?			mber shown in	the	-	079	Numbe	r	
	If more than one, provide the <b>physical location</b> address and other information indicated below for each establishment. The headquarters location should be first, followed by all other locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.         Note – Offices which are not staffed on a full-time basis by at least one employee covered by this El Number should not be considered separate establishments. Include data for these offices with data reported for the main location. Physicians whose main practice is outside the hospital (clinic), but whose practice necessitates using hospital facilities). Physicians whose practice solely from hospitals (e.g., a surgeon with a private practice who utilizes hospital facilities). Physicians who practice solely from hospitals (e.g., anesthesiologists) should not consider these hospitals as separate office locations.         Estimates are acceptable if book figures are not available.         Name       1992       Mil.       Thou.       Dol.         Receipts       081       or       or       or         Number and street       1992       Mil.       Thou.       Dol.												
	Number and	street						or	venue	081	I	l	
	City				Stat	te	ZIP Code	Ar		082		 	
1	Kind-of-busin	ess description	n					08	period	employ includi	rees for ing Mar	pay ch 12	
								C	snaua	088			
	Name								1992 ceipts	Mil. 081	Thou.	Dol.	
	Number and	street						or	venue	082	 	 	
	City				Stat	te	ZIP Code		nnual yroll	082	1		
2	Kind-of-busin	ess description	n					08	period	employ includi	rees for ing Mar	pay ch 12	
								Cous	siiaua	088			
	Name								1992		Thou.	Dol.	
	Number and	street						or	venue	081	   	   	
3	City				Stat	te	ZIP Code	Ar pa	nual yroll Paid e	volame	 rees for	 pav	
	Kind-of-busin	ess descriptio	n					08		includi	ing Mar	ch 12	
									snaua	088			
RE	REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.												
Per	iod covered	TFICATION – T Mo. <sup> </sup> ROM:	his report is Year	substantially accurate and Mo. Yea TO:				ce with instruction parding this report		t or typ	De		
	this report '	Area code	Number	Extension	Tit	le							
	nature of auth	orized person							Date				
				PLEASE PHOTOCOPY T	THIS			ns	1				

HISTORY-1992 ECONOMIC CENSUS

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM	1 1992 CENS	SUS OF SERVICE INDUSTRIES AUDITING, AND BOOKKEEPING SERVICES
CB-8702		OMB No. 0607-0729: Approval Expires 06/30
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136		CB-8702
Please read the accompanying instructions before answering the questions.		
Census use	-	
	(Plea	ase correct any errors in name, address, and ZIP Code.)
this questionnaire to answer the questions	and return the report to by Census Bureau emplo from legal process. ER shown in the	es Code, requires businesses and other organizations that receive o the Census Bureau. By the same law, YOUR CENSUS REPORT byees and may be used only for statistical purposes. Further, copies Item 4. LEGAL FORM OF ORGANIZATION Which of the following best describes this establishment's legal form of organization during 1992?
on its latest 1992 Employer's Quarterly Fe Return, Treasury Form 941?	ederal Tax	Mark (X) only ONE box.
094 1 □ Yes 2 □ No - <i>Report curre</i> (9 digits)	ent El No. below	1 ☐ Individual owner (sole proprietorship) 2 ☐ Partnership
Item 2. PHYSICAL LOCATION a. Is this establishment's physical location the address shown in the label? (P.O. bo addresses are not physical locations)	<b>n the same as</b> bx and rural route	5 Government – <i>Specify</i> 0 Corporation 9 Other – <i>Specify</i>
093 1 ☐ Yes 2 ☐ No – <i>Report phys.</i>	ical location below	HOW TO     Dollar figures should be rounded to thousands of dollars.     Mil-     Thou-     Dollar       REPORT     Example:     If a figure     (000)     (000)     (000)       bollar     is \$1,125,628.79     • Preferred     1     126
		FIGURES report Acceptable 1 125 62
City, town, village, etc. Sta	ate ZIP Code	Item 5. DOLLAR VOLUME Mil. Thou. Do
<ul> <li>b. Is this establishment physically located boundaries of the city, town, village, et</li> </ul>	l inside the legal tc.?	OPERATING RECEIPTS of this establishment in 1992
095 1 🔤 Yes 3 🛄 No legal boundari		Item 6. PAYROLL Mil. Thou. Do
2 No 4 Do not know		Payroll in 1992, BEFORE DEDUCTIONS
<ul> <li>c. In what type of municipality is this esta physically located?</li> </ul>	ablishment	a. Annual
096 1 City, village, or borough		b. First quarter (January-March)
2		Item 7. EMPLOYMENT Number
4 Do not know		Number of paid employees for pay
d. In what county is this establishment ph	nysically located?	period including March 12, 1992 (Include both full- and part-time employees)
Item 3. OPERATIONAL STATUS	Number of months	
a. How many months during 1992 was this establishment actively operated?	002	
b. Which of the following best describes t establishment's status at the end of 19 Mark (X) only ONE box.	this 192?	
<ul> <li>001 1 □ In operation</li> <li>2 □ Temporarily or seasonally inact</li> <li>3 □ Ceased operation - Give date at</li> <li>4 □ Sold or leased to another operative date at right AND enter native tac., below</li> </ul>	at right ator –	CONTINUE ON PAGE 2
Name of new owner or operator		
Number and street		
City Sta	ate ZIP Code	

PENALTY FOR FAILURE TO REPORT

Mark (X) the ONE box which best describes the business or activity that establishment's receipts in 1992.	t accounted for the MAJOR portion of	this		070		
	t accounted for the MAJOR portion of Computer integrated systems design (engaged in the development or mo software and the "bundling" of softw computers and peripheral equipmer integrated system designed for spec Computer or data processing consul (hardware and/or software), except p systems integration service Other computer related service – De Management consulting service . Other consulting service . Other consulting service . Other consulting service – Describe	n serv difica ware v nt to c sific ap lting s progra  escribe	tion of with reate an oplicatio service amming	ns)   or   	7373 7379 7777 87420 77777	12 75 04 76
Item 9. SOURCES OF RECEIPTS	HOW TO REPORT		Mil.	Thou.	Dol.	Per- cent
Report receipts by source either in dollar figures (see example for	PERCENTS • Report whole perc	ents-			→	39
item 5) or as percentages (in whole percents) of the total – see example to the right.	Not acceptable —					38.76
Please do <b>not</b> combine data for two or more receipts lines.	Sources of receipts	Cen- sus use	Report		Dol.	Per-
	Sources of receipts  a. Accounting, auditing, and bookkeeping services  (1) Accounting and auditing services	sus	Report	dollars	OR pe	cents.
Please do <b>not</b> combine data for two or more receipts lines. <b>Line a(1)</b> – Include receipts for preparing preadjusted trial balances (clients have own bookkeeper) and periodic financial statements for clients. Auditing services include examining, reporting, analyzing, and confirming clients' existing accounting records.	<ul> <li>a. Accounting, auditing, and bookkeeping services</li> <li>(1) Accounting and auditing services</li> <li>(2) Bookkeeping services</li> </ul>	sus use	Report Mil.	dollars	OR pe	Per- cent
<ul> <li>Please do not combine data for two or more receipts lines.</li> <li>Line a(1) – Include receipts for preparing preadjusted trial balances (clients have own bookkeeper) and periodic financial statements for clients. Auditing services include examining, reporting, analyzing, and confirming clients' existing accounting records. Include reimbursement of expenses incurred for clients.</li> <li>Line a(2) – Include receipts for preparing trial balances, journals, ledgers, payrolls, etc.</li> <li>Line b(1) – Include receipts for providing strategic and organizational planning, financial planning and budgeting, and other management consulting services. Receipts for tax consulting</li> </ul>	<ul> <li>a. Accounting, auditing, and bookkeeping services</li> <li>(1) Accounting and auditing services</li> <li>(2) Bookkeeping services (writeup work)</li> <li>(3) Sum a(1) and a(2)</li> </ul>	sus use 400 471	Report Mil.	dollars	OR pe	Per- cent
<ul> <li>Please do not combine data for two or more receipts lines.</li> <li>Line a(1) – Include receipts for preparing preadjusted trial balances (clients have own bookkeeper) and periodic financial statements for clients. Auditing services include examining, reporting, analyzing, and confirming clients' existing accounting records. Include reimbursement of expenses incurred for clients.</li> <li>Line a(2) – Include receipts for preparing trial balances, journals, ledgers, payrolls, etc.</li> <li>Line b(1) – Include receipts for providing strategic and organizational planning, financial planning and budgeting, and</li> </ul>	<ul> <li>a. Accounting, auditing, and bookkeeping services</li> <li>(1) Accounting and auditing services</li> <li>(2) Bookkeeping services (writeup work)</li> </ul>	sus use 400 471 472	Report Mil.	dollars	OR pe	Per- cent
<ul> <li>Please do not combine data for two or more receipts lines.</li> <li>Line a(1) – Include receipts for preparing preadjusted trial balances (clients have own bookkeeper) and periodic financial statements for clients. Auditing services include examining, reporting, analyzing, and confirming clients' existing accounting records. Include reimbursement of expenses incurred for clients.</li> <li>Line a(2) – Include receipts for preparing trial balances, journals, ledgers, payrolls, etc.</li> <li>Line b(1) – Include receipts for providing strategic and organizational planning, financial planning and budgeting, and other management consulting services. Receipts for tax consulting should be included on line b(2).</li> <li>Line b(2) – Include receipts for providing advice on tax matters. If advice is provided as part of the preparation of tax returns, enter</li> </ul>	<ul> <li>a. Accounting, auditing, and bookkeeping services</li> <li>(1) Accounting and auditing services</li> <li>(2) Bookkeeping services (writeup work)</li> <li>(3) Sum a(1) and a(2)</li> <li>b. Consulting services</li> </ul>	sus use 400 471 472 470	Report Mil.	dollars	OR pe	Per- cent
<ul> <li>Please do not combine data for two or more receipts lines.</li> <li>Line a(1) – Include receipts for preparing preadjusted trial balances (clients have own bookkeeper) and periodic financial statements for clients. Auditing services include examining, reporting, analyzing, and confirming clients' existing accounting records. Include reimbursement of expenses incurred for clients.</li> <li>Line a(2) – Include receipts for preparing trial balances, journals, ledgers, payrolls, etc.</li> <li>Line b(1) – Include receipts for providing strategic and organizational planning, financial planning and budgeting, and other management consulting services. Receipts for tax consulting should be included on line b(2).</li> <li>Line b(2) – Include receipts for providing advice on tax matters. If advice is provided as part of the preparation of tax returns, enter</li> </ul>	<ul> <li>a. Accounting, auditing, and bookkeeping services</li> <li>(1) Accounting and auditing services</li> <li>(2) Bookkeeping services (writeup work)</li> <li>(3) Sum a(1) and a(2)</li> <li>b. Consulting services</li> <li>(1) Management consulting</li> </ul>	sus use 400 471 472 470 497	Report Mil.	dollars	OR pe	Per- cent

	(writeup work) 472
Line b(1) – Include receipts for providing strategic and organizational planning, financial planning and budgeting, and other management consulting services. Receipts for tax consulting	(3) Sum a(1) and a(2) 470
should be included on line b(2).	b. Consulting services
Line b(2) – Include receipts for providing advice on tax matters. If advice is provided as part of the preparation of tax returns, enter	(1) Management consulting 497
amount on line c.	(2) Tax consulting 498
Line g – Include receipts for developing software tailored to customer specifications. Receipts for developing and marketing prepackaged software should be included on line h. Line i – Include receipts for developing or modifying software and	(3) Computer consulting (hardware and software related), except programming services 240
"bundling" the software with hardware to create an integrated system designed for specific applications. Report on this line the combined charges for software development, hardware sales, and	(4) Other consulting services 499
other services provided in developing and installing the systems.	c. Tax return preparation services 161
	d. Public relations services 521
	e. Management and administrative 512 512
	f. Data processing services 260
	g. Custom computer programming, systems design, and related custom software services 230
	h. Development and sales of prepackaged software 220
	i. Computer integrated systems (sale or lease) 251
	j. Economic, sociological, educational, and other nonphysical research on a fee or contract basis 493
	k. Sales of merchandise – Describe in REMARKS if this is largest source of receipts. 575
	I. All other receipts – Describe in REMARKS if more than 10 percent of total receipts. <b>585</b>
	m. TOTAL (Should equal item 5 if reporting in dollars) 990
FORM CB-8702 HISTORY–1992 ECONOMIC CENSUS	

ON PAGE 3

100%

Page 2

Item 8. KIND OF BUSINESS OR ACTIVITY

										Page	
FORM CB-8702 U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS 1992 CENSUS OF SERVICE INDUSTRIES ACCOUNTING, AUDITING, AND BOOKKEEPING SERVICES						CE US CENSUS FILE NUMBER as shown on this report (See label on page 1)					
Item 10. PERSONNEL AND PA			N		Item 13. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION						
Lines a(1) and a(2) – Include ac professional corporations. Repor unincorporated firms on line b.					a. Is the FIRST DIGIT of your Census File Number (shown in address label immediately after "CFN") a zero?						
Line a(2) – Include licensed, regi accounting practitioners who are	stered, and public <b>not</b> certified by t	accou he Stat	ntants, a e.	nd		_	– Complete : Skip to iten				
Line b – Report the number of p employees of the firm for Federa		ners <b>no</b>	<b>t</b> consid	ered	ь.	Is this company owned or		name, ado	dress, and ELN olling compar	lumber of the	
Occupation (include proprietors and	Personnel for pay period including	An	nual pay	yroll		controlled by another compar	ny?	g or contr		, À	
partners on line b only)	March 12, 1992 (number)	Mil.	   Thou.	l   Dol.		2 🗌 No			[		
<ul> <li>a. Type of employee</li> <li>(1) Certified public accountants (employees of firm)</li> </ul>	630	635	   	 	c.	Does this comp own or control other company	any Enter any owned		dress, and ELN olled company		
(2) Public accountants not certified (employees of firm)	631	636	   	   		<b>companies?</b> <sup>098</sup> 1 □ Yes - 2 □ No	s				
(3) Management consultants and other nonaccounting professional staff	632	637	 					(9 digits)		Number	
(4) All others (including clerical and other support staff)	633	638	   	   	d.	How many esta the Employer Id in the label (or a THE END of 199	lentificatio as correcte 92?	n Numbe d in item	er shown 1) AT	079	
(5) Total (Sum of lines a(1) through a(4) – should equal entries in items 6a and 7)	634	639	   	   		other information headquarters loca locations. If more	indicated b ation should room is ne	provide the <b>physical location</b> address and indicated below for each establishment. The tion should be first, followed by all other room is needed, continue in the same (S or on a separate sheet of paper.			
<ul> <li>Active proprietors or partners at this location</li> </ul>	450			   		<b>NOTE</b> – Tempora auditing, and boo separate locations	<b>cceptable</b> if book figures are not available. ry or special purpose offices of accounting, kkeeping services should not be considered s for purposes of this report. Data for such				
(unincorporated practices only). For businesses operating at more than one location,			   	   		locations should b branch location. Name	be included	with the c	1992 Mil	n or	
report proprietor or partners at the location where they spend most of their working time.			i I			Number and stree	et		Receipts		
Item 11. RECEIPTS, BY CLASS Estimate the percentage of receiption			ort in w percents		1	City	State	ZIP Code	Annual payroll   Paid empl	oyees for pay	
<i>in item 5) by class of client.</i> <b>a.</b> Individuals		441				Kind-of-business	description		period inclu	uding March 12	
<b>b.</b> Trade, farming, industrial, transformed financial, and other business	firms	442							Census <sup>088</sup> use		
c. Federal Government						Name			1992 Mil	. Thou. Dol.	
<b>d.</b> State and local governments authorities)	(including public	444				Number and stree	et		Receipts		
e. All other		445			2	City	State	ZIP Code	Annual payroll		
f. TOTAL Item 12. EXPORTED SERVICES			100	%	2	Kind-of-business	description		Paid empl period inclu	oyees for pay uding March 12	
<b>NOTE</b> – An exported service is a client (individual, government, b	service performe usiness establishr	nent, et	c.) locat	er or ed					Census <sup>088</sup>		
outside the United States (i.e., c Columbia, U.S. Commonwealth Services performed for unaffiliat	outside the 50 Stat Territories, or U.S.	es, Dist posses	rict of ssions).						use		
foreign parent firms, subsidiaries provided to domestic subsidiarie	s, branches, etc.) a	ire inclu	ided. Se		RE	EMARKS – Please essent			y explanation your reported		
a. Did the receipts reported i include any amounts receiv exported services?		Mil.	   Thou. 	   Dol. 							
<sup>405</sup> 1 🗌 Yes – Amount —			1	l T							
2 📙 No			i I	 		and has	been prepar		is substantially ordance with i r Mo	nstructions.	
b. Did this establishment rec amounts for exported serv were NOT included in item	ices which		 	 	by	riod covered this report FROI me of person to co	M: I		TO:		
<sup>407</sup> 1 🗌 Yes – <i>Describe typ</i>	e of	408	1	1	Titl	e					
service in REMARI and report amount			1	1	Tel	ephone	Area code	Number	I	Extension	
2 🗌 No			   	   		nature of authoriz	ed person		Date		

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

FORM	DEPARTMENT OF CO	MMERCE	1992 CENSUS OF TRANSPORTATION TRUCK INVENTORY AND USE SURVEY
	-9502		OMB No. 0607-0730: Approval Expires 12/31/94
DUE DATE: 3 RECEIPT OF FO			
Please return co		:	TC-9502
1201 East Te	THE CENSUS nth Street e, IN 47132-0001		
REGISTRATIO	ON INFORMATI	ON	
Make of vehicle	Year of model	State	
License number	I	I	
Vehicle Identificatio	on Number (VIN)	)	
See Survey Cover questions about o	rage below if yo	u have	(Please correct any errors in name, address, and ZIP Code)
response, wi data sources comments re reducing this Room 2027, of Managem	ith an average of a gathering and egarding this built burden, to the Bureau of the Ce ent and Budget,	f 50 minu maintain rden esti Associate ensus, W Attn: Pa	by this collection of information is estimated to vary from 40 to 60 minutes per utes per response, including the time for reviewing instructions, searching existing ning the data needed, and completing and reviewing the collection information. Send imate or any other aspect of this collection of information, including suggestions for the Director of Management Services, Attn: Paperwork Reduction Project 0607-0730, /ashington, DC 20233; and to the Office of Information and Regulatory Affairs, Office uperwork Reduction Project 0607-0730, Washington, DC 20503. <i>PLEASE INCLUDE</i> <i>CORRESPONDENCE</i> .
			SURVEY COVERAGE
organiza <b>identifi</b> Bureau.	tions, and resid <b>ed in the regi</b> s By the same la	dents th stratior w, YOU	<b>RED BY LAW.</b> Title 13, United States Code, requires businesses, nat receive this questionnaire to answer the questions for the <b>vehicle</b> <b>n information section</b> above and return the questionnaire to the Census <b>JR CENSUS REPORT IS CONFIDENTIAL</b> . It may be seen only by sworn d may be used only for statistical purposes.
			pickups, panel trucks, vans, mini-vans, utility vehicles, jeeps, station single-unit light, single-unit heavy, and truck tractors.
commun Toll-free	ication be sure	to refer	<b>completing this report</b> , please call or write the Census Bureau. In any r to the 11-digit Census File Number (CFN) printed in the label above. e, 8:00 a.m. to 8:00 p.m., Eastern Standard Time, Monday through Friday:
informati <b>after Ju</b> <b>1991 an</b> according	on section and ly 1, 1991 and d prior to Jan g to the vehicle	its use I prior t uary 1, s use d	estions on this form refer to the vehicle described in the registration during calendar year 1992, <b>unless</b> the vehicle was <b>disposed of on</b> or <b>to January 1, 1992</b> . If the vehicle was <b>disposed of on</b> or <b>after July 1</b> , <b>, 1992</b> , please complete entire questionnaire, answering each item <b>during calendar year 1991</b> . If the vehicle was <b>disposed of prior to</b> a Items 1a, 1b, and 32 only.
<b>and</b> mod complete	lel year registra the questionn	ation inf aire. Re	errors in the registration information. If there are errors in the VIN, make, formation, or if the vehicle identified never was in your possession, do not eturn it to the Census Bureau, along with a note correcting the errors in or statistical reasons, we cannot accept any substitution for the sampled
			ad the instructions as you answer the questions. If exact figures are not prepared estimates are acceptable.
PENALTY FOR FAIL	URE TO REPORT		CONTINUE ON PAGE 2

ITEM			
a.	Is the vehicle identified in the Registration Information section (cover page) still in your po 110 1 Yes – Are you the – 111 1 owner? 2 lessee? SKIP to item 2 and continue with questionnaire	ssession?	
	$2 \square \text{No} - Continue with item 1b}$		
b.	<b>Did you dispose of this vehicle prior to July 1, 1991?</b> 112 1 Yes - Complete item 32 and return questionnaire		
	$_2$ $\square$ No – Continue with items 1c, 1d, and the remainder of the questionnaire		·
		Month	Year
c.	When did you dispose of this vehicle?         Enter figures only         Image: Second		19
	<b>NOTE –</b> If you disposed of this vehicle prior to January 1, 1992, answer each remaining item accord vehicle was used during calendar year 1991. If you disposed of this vehicle during calendar answer each remaining item according to how the vehicle was used during calendar year 1	year 1992,	the
d.	How did you dispose of this vehicle?		
	115 1 Sold, traded, or gave it away 3 Returned to leasing company		
	2 🗌 Junked, scrapped, or otherwise destroyed 🛛 4 🗌 Other – <i>Please specify</i>		
ITEM	2	Month	Year
		116	117
	When did you obtain this vehicle?         Enter figures only         Image: Second seco		19
ITEM	3		
a.	How did you obtain this vehicle?         118       1       Purchased it new - SKIP to item 4a         2       Purchased it used (or otherwise acquired) - SKIP to item 4a       3       Leased or rented it FROM someone else - Continue with items 3b and c         4       Other - Please specify		
	<ul> <li>119 1 Without a driver</li> <li>2 With a driver other than an owner-operator</li> <li>3 With an owner-operator as driver</li> </ul>		
C.	Was the agreement for 12 months or more?		
	$1 \square$ Yes – Which of the following did the leasing agreement include? Mark (X) all that apply	<i>.</i>	
	121       Financing only (Do not mark if installment sales contract.)       124       Payment of taxes         122       Full maintenance       126       Recordkeeping for leased trucks		
	<sup>123</sup> Maintenance on specified parts only 127 Other – Please specify		
ITEM	4		
a.	Did you lease or rent this vehicle TO anyone else? 128 1 □ Yes – Continue with items 4b and c 2 □ No – SKIP to item 5		
b.	How was it leased or rented? 129 1 Without a driver 2 With a driver other than an owner-operator 3 With an owner-operator as driver		
c.	Was the agreement for 12 months or more?		
	$1 \square$ Yes – Which of the following did the leasing agreement include? <i>Mark (X) all that apply</i>	<i>.</i>	
	131 Financing only (Do not mark 134 Payment of taxes if installment sales contract.) 135 Obtaining licenses and permits		
	<ul> <li><sup>132</sup> Full maintenance</li> <li><sup>136</sup> Recordkeeping for leased trucks</li> <li><sup>133</sup> Maintenance on specified</li> <li><sup>137</sup> Other - <i>Please specify</i></li> </ul>		
Page 2			FORM TC-950

#### ITEM 5

#### How would you best describe this vehicle as it was most often operated?

- **NOTE** A **straight truck**, also called a single-unit truck, is a complete unit, cab area and body. A **truck tractor** is a cab and chassis that is usually used for pulling trailers. (If the vehicle is a pickup, compact van, mini-van, or panel truck, enter body type on the "Other" line.)
  - 200 1 Straight truck **not** pulling trailer *SKIP to item 9* 
    - 2 Straight truck pulling trailer Continue with item 6a
    - 3 Truck tractor (power unit) pulling trailer(s) SKIP to item 6b
    - • • -

		4 Uther – Please specify		-		
TEM	6			,		
a.	lf y kin	you indicated in item 5 that th	is vehicle is a straight truck pulling trailer(s), indicate below the ST OFTEN PULLED. Mark (X) ONE box only.			
	NII.		an 20 feet most often pulled by this <b>straight truck.</b>			
	201	1 🗌 One axle on trailer				
		2 🗌 Two axles on trailer				
		3 🗌 Three axles or more on trai	ler			
			vith converter dolly) most often pulled by this <b>straight truck.</b>			
		4 🗌 Two axles on trailer				
		<ul> <li>5 Three axles on trailer</li> <li>6 Four axles or more on trailer</li> </ul>	or			
_			·			
b.	(1)	If you indicated in item 5 tha below the kind of trailer(s) th	It this vehicle is a truck tractor (power unit) pulling trailer(s), indic nis vehicle MOST OFTEN PULLED. Mark (X) ONE box only.	cate	,	
			pulled by this <b>truck tractor</b> (power unit).			
		202 01 One axle on trailer				
		02 🗌 Two axles on trailer				
		03∐ Three axles or more on	trailer			
		Two trailers, one semi- and o pulled by this <b>truck tractor</b>	one full (or semi-trailer with converter dolly) most often			
		$04 \square$ Three axles on two trail	•			
		05 🗌 Four axles on two traile				
		06 🗌 Five axles on two trailer	rs			
		07 🗌 Six axles or more on tw	<i>i</i> o trailers			
			I two full (or semi-trailers with converter dollies) most			
		often pulled by this <b>truck tr</b>	•			
		08 Five axles on three trail				
		09 └── Six axles on three traile				
		11 $\square$ Eight axles or more on t				
		12 Other – <i>Please describe</i>	in detail the number of trailers and the number of axles on			
		those trailers most often	n pulled by this vehicle if not mentioned above.			
				-		
				_		
					Percent	
	(2)	What approximate percent of	f 1992 mileage was no trailer pulled	203		•
TENA	-7	by this vehicle (i.e., bobtail)?			Deveent	%
		approximate percent of 1992	mileone was the trailer/orle	204	Percent	
			or b(1) above, MOST OFTEN PULLED by this vehicle?			%
ТЕМ	8				Percent	
				205		
w	hat	approximate percent	a. Railroad, maritime, or domestic containers?			%
of	199	92 mileage pulling		206		~ (
tra	ailei	rs did this vehicle haul -	b. Piggyback trailers?	207		%
			c. Conventional trailers?	207		%
		-	TOTAL (a, b, and c should add to 100%)		100%	
				1	100/0	,

#### ITEM 9

# Please indicate the body type which most closely resembles this vehicle or the trailer MOST OFTEN ATTACHED to it if the power unit is a truck tractor.

If the vehicle is a straight truck, mark (X) the box that best describes the body of the truck (the area behind the cab).

Mark (X) ONE box only.

#### **PLATFORM TYPES**

- 300 05 Low boy (gooseneck) platform with depressed center
  - 06 Basic platform (including flatbed, stake, etc.)
  - 04 🗌 Platform with devices permanently mounted on bed of truck such as high lift, lift gate, hoist, etc.

#### VAN TYPES

- 12 Basic enclosed van (dry cargo)
- 10 Drop frame van (including furniture van, etc.)
- 08 🗌 Insulated, nonrefrigerated van
- 09 🗌 Insulated, refrigerated van
- 11 Open top van (including fruit)

#### SPECIALIZED USE TRUCKS

- 18 🗌 Automobile transport
- 13 🗌 Beverage truck
- 70 🗌 Concrete mixer
- 40 Dump truck (including belly or bottom dump)
- 29 Grain bodies (including low-side grain and hoppers, etc.)
- 30 🗌 Garbage truck
- 07 Livestock truck (including livestock drop frame)
- 27 Oil field truck service equipment permanently mounted on vehicle
- 17 🗌 Pole, logging, pulpwood, or pipe truck
- 22 Service truck or "craftsman's vehicle" body equipped for mobile repair and service
- 60 🗌 Tank truck for dry bulk
- 50 Tank truck for liquids or gases
- 14 Utility truck used in public utility operations (telephone line truck, etc.), body equipped for major repair (may have aerial lift, derrick, etc.)
- 15 🗌 Winch or crane truck lifting equipment (including roll on, roll off) permanently mounted on vehicle
- 16 Wrecker for motor vehicle towing or lifting
- 23 🗌 Yard tractor cab and chassis ONLY, used to spot trailers
- **NOTE** If none of the above descriptions match the body type of this vehicle, or the trailer usually attached to it, mark (X) the "Other" box below and specify body type.
  - 80 Other Please specify

#### ITEM 10

301 1 🗌 Two axles (each axle has 2 tires)	
2 🗌 Two axles (front axle has 2 tires, rear axle has 4 tires)	
з 🗆 Three axles	
4 🗌 Four axles or more	Numl
	302
How many, IF ANY, of this vehicle's axles are liftable?	
How many, IF ANY, of this vehicle's axles are liftable?	
How many of the axles on this truck or truck tractor (power unit) are driving (powered) axles?	

Page 4

FORM TC-9502

3rd trailer
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
///////////////////////////////////////
311
Pounds
Pounds Estimates are
Estimates are

FORM TC-9502

How many weeks during 1992 was this vehicle operated? An estimate is a NOTE - If vehicle was disposed of on or after July 1, 1991, but prior to Janu number of weeks operated during 1991.   Mark (X) ONE box only.   400 01 49 to 52 weeks   02 45 to 48 weeks   03 41 to 44 weeks   04 37 to 40 weeks   05 33 to 36 weeks   06 29 to 32 weeks   13 1 to 4 weeks   14 Less than 1 week   More and a state of on or after July 1, 1991, but prior to Januan number of weeks operated during 1992; An estimate is accepted to a state of on a state of on a state of on a state of on a state of on a state of on a state of one of a state of a state of one of a state of a state of one of a state of a state of a state of a state of one of a state of a	table	Miles 401 ter ter Miles 402
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. Was this vehicle or vehicle/trailer(s) combination used ONLY for consu		
when it was not on the road. 403 1 🗌 Yes – <b>SKIP to item 19</b> 2 🗌 No – Continue with items 17b and c		
. Where was the home base of this vehicle on July 1, 1992?		
<b>NOTE –</b> "Home base" refers to the location where the vehicle was usually parroad. If this vehicle was put into service after July 1, 1992, enter curr	rked when it w ent home base	ras not on the 9.
City 404		
County Sta 405		ZIP Code
. What was the type of home base?		
Mark (X) ONE box only.		
408 1 🗌 Residential or farm – Location is a private residence.		
2	I trucking oper onducted at th	rations and is location.
3	of terminal fac	ilities s (i.e.
4 Corporate headquarters – Location conducts administrative duties and does not conduct usual business, private or commercial trucking opera that business.		
5 🗌 Other – Please specify		
		FORM TC-

EM 18	Pe	ercent
What percent of 1992 mileage was driven OUTSIDE the home base State?	409	%
An estimate is acceptable. (If none, enter zero.)		
<b>NOTE</b> – "Home base State" refers to the state where the vehicle was usually parked when it was not on the road.		
EM 19		
What approximate <b>PERCENT</b> of this vehicle's 1992 mileage was accounted for by the type of trips listed below?		
If all trips were within one range, enter 100%. If more than one range is applicable, be sure that percents total 100%.		
<b>NOTE –</b> If this vehicle is used for consumer one-way truck rental or is a long-haul truck tractor that does not operate from a home base, report average range of operation.	Pe	ercent
Trips off-the-road, little travel on public roads	410	%
	411	
Trips <b>less than 50</b> miles from vehicle's home base	412	%
Trips between 50 and 100 miles from vehicle's home base	712	%
	413	
Trips between 100 and 200 miles from vehicle's home base	414	%
Trips between 200 and 500 miles from vehicle's home base		%
Trips <b>beyond 500</b> miles of vehicle's home base	415	%
	1	00%
EM 20		
	Miles	Tenths
How many miles-per-gallon (MPG) did this vehicle average during 1992?		•
Provide tenths, if available. An estimate is acceptable.		
EM 21		
What kind of fuel does this vehicle use?		
Mark (X) ONE box only.		
<ul> <li>₄18 1 □ Leaded Gasoline</li> <li>2 □ Unleaded Gasoline</li> </ul>		
3 Diesel		
4 🗌 Liquified Gas (Petroleum (LPG) or Natural (LNG))		
5 🗌 Other – <i>Please specify</i>		
EM 22		
Where was this vehicle primarily refueled during 1992?		
Mark (X) ONE box only.		
<sup>419</sup> 1 Central company-owned fueling facility		
2 Single contract fueling facility located off-site		
3 □ Public fueling stations 4 □ Other – <i>Please specify</i>		
What type of brakes does this truck or truck tractor (power unit) have?		
<ul> <li>420 1 ∐ Hydraulic (standard)</li> <li>2 ☐ Hydraulic with power assist</li> </ul>		
$2 \square$ Hydraulic with power assist 3 $\square$ Air		
4 🗌 Other – Please specify		
TC-9502		
10 0002		Page

## ITEM 24

Does this vehicle have any of the following? Mark (X) all that apply. 421 Radial Tires 422 Power Steering  $_{423}$   $\Box$  Air-conditioning in cab 424 Trip recorders/on-board computer 425 Anti-lock brake system 426 Aerodynamic features 427 Axle or drive ratio to maximize fuel efficiency <sup>428</sup> Fuel economy engine with low RPM, high torque rise, turbo-charge, etc. 429 Variable fan drives 430 Other fuel conservation features <sup>431</sup> Reflective materials (in addition to those required by law) 432 Electronic vehicle management system <sup>433</sup> Electronic vehicle identification device (transponder), etc. 434 Road speed governor 435 Navigational systems

436 🗌 Engine retarder

## ITEM 25

Who performed the general maintenance and major overhauls on this vehicle? Mark (X) all that apply.	General maintenance	Major overhauls
Yourself	. 440	448
Your company's own maintenance facilities	. 441	449
Dealership's service department	. 442	450
Leasing company	. 443	451
Independent garage or private mechanic (includes gasoline or service stations)	. 444	452
Component distributorship (engine, transmission, etc.)	. 445	453
No one	. 446	454
Other – Please specify	447	455

# ITEM 26

a. Which of the following best describes the way this vehicle was most often operated?

Mark (X) ONE box only.

**Note** – If this vehicle was operated for business use and personal transportation, please check MIXED and indicate approximately what percent was business and what percent was personal transportation. If this vehicle was operated as a private carrier with for-hire authorization (i.e., backhauls, trip leasing), please check MIXED and indicate approximately what percent was business use and what percent was for-hire.

500 1 BUSINESS USE – Operated by and for a private business (including self-employers) or a company; used in related activities of that business (including transportation of employees) – SKIP to item 27

2 PERSONAL TRANSPORTATION – Operated as a personal-use vehicle for pleasure driving, travel to work, carpool, etc. (NO BUSINESS USE) – SKIP to item 31 (Remarks)

3 **FOR-HIRE –** Continue with item 26b

4 DAILY RENTAL (Not motor carrier) – SKIP to item 2	27
---	----

		Percent
5 🗌 <b>MIXED</b>	Percent business use	501 <b>%</b>
	Percent personal use	502 <b>%</b>
	Percent for-hire (includes private carriage with for-hire authorization, i.e., backhauls, trip leasing) (Please complete 26b(1) below)	503 <b>%</b>
	TOTAL	100%

FORM TC-9502

	er percent of 1992 mileage for each category. An estimate is acceptable.	Percent
(1)	Operation type	504
	MOTOR CARRIER – Operated by a company whose primary business is to provide transportation services, carrying freight belonging to others, for a fee	
	OWNER OPERATOR – Operated by an independent trucker who drives vehicle for himself or on lease to a company –	505
	as an independent	
	leased to a company	506
	PRIVATE FLEET – Operated by and for a private business to transport company- owned freight, which also maintains for-hire authority (i.e., backhauls, trip leasing) –	507
	as private carrier	
	as for-hire operator	508
		100%
(2)	Jurisdiction served (Private Fleet Operation – SKIP to item 27)	509
	INTERSTATE – Operating in more than one State, usually under Interstate Commerce Commission (ICC) authority	
	INTRASTATE – Operating within one State	510
	LOCAL – In a single municipality, contiguous municipalities and its suburban area	511
	TOTAL	100%
(3)	Kinds of carrier	512
	CONTRACT – Offered transportation service to certain shippers under specific contracts	
	COMMON – Offered transportation service to general public over regular and irregular routes	513
	EXEMPT – Transported commodities or provided types of service	514
	that were exempt from Federal regulations, or operated within commercial zones	
		100%
(4)	Kinds of service	515
	TRUCKLOAD – Usually defined as cargo of a single shipper carried on an individual trip	
	LESS-THAN-TRUCKLOAD – Usually defined as cargo of multiple	516
	shippers carried on an individual trip	100%
(E)	Was this vehicle operated under ICC authority during 1992? $517.1 \square Yes$ $2 \square N_1$	
(5) 27		0
hicl	of the following best describes your business (or the part of your business in which the was used)? If vehicle was leased, indicate business of lessee. () ONE box only. I	10
518 0 0 0 0 0	<ul> <li>PORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, maso</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> </ul>	onry, carpentry, etc
518 0 0 0 0 0 0 0	<ul> <li>PORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, masc</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> <li>WHOLESALE TRADE</li> </ul>	onry, carpentry, etc
518 0 0 0 0 0 0 0 0	<ul> <li>FORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, masc</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> <li>WHOLESALE TRADE</li> <li>RETAIL TRADE</li> <li>BUSINESS AND PERSONAL SERVICES – used to assist in such services as lodging operation landscaping, repair (except plumbing, electrical work, etc. – See "Contractor Activities"), laure</li> </ul>	ns,
518 0 0 0 0 0 0 0 0 0	<ul> <li>FORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, masc</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> <li>WHOLESALE TRADE</li> <li>RETAIL TRADE</li> <li>BUSINESS AND PERSONAL SERVICES – used to assist in such services as lodging operation</li> </ul>	ns, ndry, cable television, e
518 0 0 0 0 0 0 0 0 1 1	<ul> <li>FORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, masc</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> <li>WHOLESALE TRADE</li> <li>BUSINESS AND PERSONAL SERVICES – used to assist in such services as lodging operation landscaping, repair (except plumbing, electrical work, etc. – See "Contractor Activities"), lauradvertising, entertainment, etc.</li> <li>UTILITIES – Used to assist in operation or service of public utilities (telephone, gas, electric, MINING OR QUARRY ACTIVITIES (includes well drilling) – used to assist in the extraction of</li> </ul>	ns, ndry, cable television, e natural
518 0 0 0 0 0 0 0 0 0 0 0 1 1 1 1 1	<ul> <li>FORESTRY OR LUMBERING ACTIVITIES</li> <li>CONSTRUCTION WORK – buildings, homes, roads, structures, etc.</li> <li>CONTRACTOR ACTIVITIES OR SPECIAL TRADES – painting, plumbing, electrical work, masce</li> <li>MANUFACTURING, REFINING, OR PROCESSING ACTIVITIES</li> <li>WHOLESALE TRADE</li> <li>RETAIL TRADE</li> <li>BUSINESS AND PERSONAL SERVICES – used to assist in such services as lodging operation landscaping, repair (except plumbing, electrical work, etc. – <i>See "Contractor Activities"</i>), lauradvertising, entertainment, etc.</li> <li>UTILITIES – Used to assist in operation or service of public utilities (telephone, gas, electric, MINING OR QUARRY ACTIVITIES (includes well drilling) – used to assist in the extraction of resources or in hauling to processors</li> <li>DAILY RENTAL – rented out, without a driver, to someone else on a daily or short-term basi</li> </ul>	ns, ndry, cable television, e natural

arried	he following list of products, materials, and equipment, indicate which item or items . Write in the approximate percent of the vehicle's 1992 mileage that was accounted for while ile empty including backhauls, trip leasing, etc. Be sure percents total 100%.	<b>this vehicle</b> carrying loads	
IOTE -	<ul> <li>If you carried only one product, type of equipment, etc., during 1992, enter the percent of m carrying this item.</li> </ul>	ileage while	
	If you carried more than one product, enter the percents beside the appropriate items. You of (10%, 25%, etc.). You DO NOT need to account for every single item the vehicle carried during those that accounted for at least 5% of the mileage.	can use round fig ng 1992, just incl	ures ude
	If the vehicle is involved in some kind of business use, but does not carry any products or equipment, enter 100% in <b>NO LOAD</b> , item 28a.	Percer	nt
	Please be sure to account for miles driven <b>empty</b> in item 28a below.	519	
. <u>NO</u>	LOAD – Vehicle empty		
. PRC	DUCTS, EQUIPMENT, MATERIALS, ETC.	521	
(1)	AGRICULTURAL AND FOOD PRODUCTS		
	(a) Live animals – cattle, horses, poultry, hogs, live seafood, insects, etc.		
	(b) Fresh farm products – grain, crops, eggs, flowers, nursery stock, raw milk, raw tobacco, etc.	522	
	(c) Processed foods and tobacco products – canned goods, prepared meats, frozen foods, beverages, bottled water, dairy products, cigarettes, etc.	523	
	(d) Animal feed – prepared feed and feed ingredients for animals	524 525	
(2)	MINING PRODUCTS – crude oil, coal, metal ores	526	
(3)	BUILDING MATERIALS – gravel, sand, concrete, flat glass, etc. (except cut lumber – See "Lumber")	526	
(4)	FORESTRY, WOOD, AND PAPER PRODUCTS	527	
	(a) Logs and forest products – except cut lumber and fabricated wood products (See below.)		
	(b) Lumber and fabricated wood products – except furniture (See (7) below.)	528	
	(c) Paper and paper products	529	
(5)	CHEMICALS, PETROLEUM, AND ALLIED PRODUCTS ( <i>Placard carriers – also complete item 29a</i> )	530	
	(a) Chemicals and/or drugs (including fertilizers, pesticides, cosmetics, paints, etc.)		
	(b) Petroleum and petroleum products (including paving and roofing materials)	531	
	(c) Plastics and/or rubber products	532	
(6)	METALS AND METAL PRODUCTS	533	
	(a) Primary metal products – pipes, ingots, billets, sheets, etc.		
	(b) Fabricated metal products – except machinery or transportation	534	
	equipment (See below.)	535	
	(c) Machinery – electrical or non-electrical and electronic	536	
(7)	(d) Transportation equipment (including complete vehicles) and parts	537	
(7)			
	(a) Furniture (wood and non-wood) and/or hardware – not involved in household moving	538	
	<ul> <li>(b) Glass products</li></ul>	539	
	(d) Miscellaneous products of manufacturing – including photographic goods,	540	
	watches, clocks, jewelry, and toys		
(8)	MISCELLANEOUS AND MIXED CARGO	541	
	(a) Moving of household and office furniture – from home, offices, etc., under contract		
	(b) Miscellaneous tools and/or parts for specialized use, as in a craftsman's vehicle – traveling workshop for plumbers, carpenters, road service crews, etc	542	
	(c) Mixed cargo (including the delivery of small packages)	543	
	(d) Scrap (not for recycling), garbage, trash, septic tank waste	544	
	(e) Industrial "waste" water	545	
	(f) Hazardous waste (EPA manifest)	546	
	(g) Hazardous waste (non-EPA manifest)	547	
	(h) Recyclable products	548	
(9)	OTHER (not elsewhere classified) – Please describe in detail. $$	549	
	<b>F</b>		

FORM TC-9502

a. At any time during 1992 was this vehicle (or combination) used to haul hazardous materials in quantities large enough to require a hazmat placard on the vehicle due to title 49 CFR 177.823, Transportation?

550 1 Yes – Continue with item 29b

2 No - **SKIP to item 30** 

What type(s) of hazardous materials were carried by this vehicle? Write in the approximate percent of
the vehicle's 1992 mileage which accounted for each hazardous material carried.

**NOTE** – Indicate only percents for those hazardous materials carried in quantities large enough to **require a** hazmat placard placed on the vehicle.

Placard name	Former placard name (if different)	Percent	Placard name	Former placard name <i>(if different)</i>	Percent
Explosives 1.1	Explosives A	551 <b>%</b>	Flammable solid		<sup>562</sup> %
Explosives 1.2	Explosives A	552 %	Spontaneously combustib	e Flammable solid	<sup>563</sup> %
Explosives 1.3	Explosives B	<sup>553</sup> %	Dangerous when wet	Flammable solid W	<sup>564</sup> %
Explosives 1.4	Dangerous	<sup>554</sup> %	Oxidizer		<sup>565</sup> %
Explosives 1.5	Blasting agents	<sup>555</sup> %	Oxygen		<sup>566</sup> %
Explosives 1.6	Dangerous	<sup>556</sup> %	Organic peroxide		<sup>567</sup> %
Flammable gas		557 <b>%</b>	Poison		<sup>568</sup> %
Non-flammable gas		<sup>558</sup> %	Keep away from food	(none required)	<sup>569</sup> %
Poisonous gas		<sup>559</sup> %	Radioactive		<sup>570</sup> %
Flammable		<sup>560</sup> %	Corrosive		<sup>571</sup> %
Combustible		<sup>561</sup> %	Class 9	(none required)	<sup>572</sup> %
Mark (X) ONE box only 600 01 □ 1 0 02 □ 2 to 5 0 ITEM 31 Remarks – Pla ITEM 32 Contact Infor	03 6 to 9 05 04 10 to 24 06 ease use this space fo	100 to 499 or any explanations	08 🗌 1,000 to 4,999 s that may be important in	99  5,000 to 9,999 0  10,000 or more 10 understanding your r	eported data.
a. Name of person to contac	t regarding this report	<b>b.</b> Address (Num)	ber and street)		
c. City			d. State e. ZIP (	Code	
f. Daytime telephone number	Number	Extension (If any)	<b>g.</b> If this vehicle has a fle	et number, please enter	it here
<b>h.</b> Signature of authorized pe	erson	i. Title		j. Date	
FORM TC-9502					Page 11

				OMB No. 0607-0	753: Approva	OMB No. 0607-0753: Approval Expires 12/31/94
FORM CFS-1000 U.S. DE PARTMENT OF COMMERCE (9.2-92) 1993 COMMODITY FLOW SURVEY CENSUS OF TRANSPORTATION	ERCE	(Please correct	(Please correct any error in name, address, and ZIP Code)	Iress, and ZIP Code	(6	
YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.	equires businesses and other o he Census Bureau. By the sam aau employees and may be us gal process.	rganizations that e law, <b>YOUR</b> ed only for statistical	RETURN TO	BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville IN 47132-	THE CENSU th Street IN 4713	CENSUS rreet 47132-0001
Please read the accompanying instructions before completing this questionnaire. The sampling instructions beginning on page 2 of the questionnaire describe how to take a sample of your outbound shipments covering the two-week period shown above. You should use your sales invoices, bills of lading, and any other file of shipping documents which represents your total outbound shipments (or deliveries). Item F, Shipment Characteristics — Beginning on page 2, provide the information requested for each of your sampled shipments. If book figures are not available for weight, value, etc., please provide an estimate.	structions before completing this questionnaire. The sampling instructions beginning on ibe how to take a <b>sample</b> of your outbound shipments <b>covering the two-week period</b> our sales invoices, bills of lading, and any other file of shipping documents which nipments (or deliveries). <b>ics</b> — Beginning on page 2, provide the information requested for each of your <b>sampled</b> t available for weight, value, etc., please provide an estimate.	questionnaire. The s outbound shipmeni and any other file of de the information r please provide an es	ampling instructions be s covering the two-w shipping documents w equested for each of yc timate.	eginning on veek period vhich our sampled		
Item A ESTABLISHMENT NAME	Item D	<b>ORIGIN OF SHIPMENTS</b>	MENTS			
Is the establishment name shown in the mailing address correct?	Du	ring the two-week pe	During the two-week period, did any of your shipments (or deliveries) originate from locations other than this physical location?	pments (or deliverie	s) originate	
1 $\Box$ Yes 2 $\Box$ No – Enter correct name. $\mathbb{Z}$		No — Skip to Item code in colur	<ul> <li>Skip to Item E on page 2. Enter an "A" as the origin code in column (k) of item F for all shipments.</li> </ul>	u" as the origin ipments.		
	5	Zer Alter the Ci	Enter the City, State, and ZIP Code of these other locations in rows B,	f these other locatic	ons in rows	B, C, and D.
		Origin code	City		State	ZIP Code
Item B OPERATIONAL STATUS OF ESTABLISHMENT — Mark (X) the ONE box which best describes this establishment during the 2-week period shown ab	<li>the ONE box eriod shown above.</li>	B Loca	Location in mailing address or in Item	or in Item C.		
	Month/Day/Year	ပ <b>င</b>				
2		Does your Census	Does your Census File Number (CFN) shown in the address box above,	own in the address	box above,	
Item C         PHYSICAL LOCATION (PO boxes or rural routes are not physical locations.)           Is this establishment's physical location the same as the address shown in the label?	l locations.) he label?	begin with a "0" (zero)? 1 🗌 Yes — Include shi	a "O" (zero)? Include shipments from those other locations in your sampling, and use the anomiate origin code (A B C or D) in column (k) of from E for	other locations in yo	our sampling	, and use the
1 $\Box$ Yes 2 $\Box$ No $-$ Enter physical location below. $ abla$		all ship 2 🗌 No — Do any	Do any of these other locations keep their own records for these shipments?	<i>ip to Item E.</i> keep their own reco	ords for thes	e shipments?
Number and street		$1 \Box Yes - O$	Omit shipments from these other locations that maintain their own records from your sampling.	se other locations th mpling.	at maintain	their
City, town, village, etc.	ElP Code	2 🗌 No — In an of	Include shipments from these other locations in your sample, and place the appropriate origin code (A, B, C, or D) in column (k) of item F for all shipments selected.	ese other locations prigin code (A, B, C, selected.	in your sam or D) in coli	ole, umn (k)
FOR ASSISTANCE IN COMPLETING THIS FORM, CALL 1-800-528-3049	3049				CONTIN	CONTINUE ON PAGE 2

## Item E SOURCE DOCUMENT

Please mark (X) the main document that you will use to obtain the requested information.

1 Sales invoices <sup>2</sup> Bills of lading

 $_3$  Other — Specify  $\mathbf{z}$ 

### SAMPLE SELECTION INSTRUCTIONS

1. Enter your total number of shipments for the 2-week period.

NOTE — Remove any voided invoices, credit memoranda, etc. from the files, if possible, before estimating the total number of shipments.

- 2. Find the range in column (1) at right that includes the number entered in 1 above. Put an (X) in column (2) beside it.
- 3. If your total number of shipments is 40 or less, provide data for **every** shipment during the 2-week period in Item F. If the number of shipments is 41 or more, continue with steps 4 and 5 to select the shipments to report.

## Item F SHIPMENT CHARACTERISTICS

Number of shipments (1)	Mark (X) one (2)	"Take every" number (3)	Expected sample size (4)
0–40		Select every shipment	1–40
41—100		2	20—50
101—200		5	20—40
201—400		10	20—40
401—800		20	20—40
801—1600		40	20—40
1601 or more		Call Census 1–800–528–3049	

## **CONTINUE ON NEXT PAGE. -**

	Shipment T						al	Commodity				
Line No.	Number		ate c)		Value (Dollars) (d)		Weight (Pounds)		Сс	de		Description (Largest weight)
(a)	(b)	м	D	Mil.	Thou.	Dol.	(e)		(	f)		(g)
1					 				1			
2					     							
3					     							
4					     					1		
5					   <u> </u>					1		
6										1		
7					     							
8					 							
9												
10					    							
11												
12												
13					 							
14					<u>                                     </u>							
15 Mo for	de of transport codes columns (i) and (n)		▶	1_	Parcel d Postal S	elivery, c ervice	ourier, or U.S.	2 — P 3 — F	riva	te t	truck	<b>4</b> — Railroad Continued — — — — — —

## SAMPLE SELECTION INSTRUCTIONS — Continued

4. Note the "Take every" number in column (3) next to the "X" you marked in column (2). Beginning with the first shipment in the file for the period, count the shipments until you reach the "Take every" number. Select that shipment as the first one to report on in item F.

Continuing with the next shipment, begin counting from 1 until you reach the "Take every" number again. Select that shipment. Continue this process until you reach the end of the file.

## EXAMPLE:

If 176 is entered in 1, mark (X) the third row of the table. The "Take every" number is 5. Begin counting with the first shipment in the file and select the 5th shipment to report in Item F. Now beginning with the

6th shipment, count off 5 more, and select the 10th shipment. Resume counting with the 11th and select the 15th, 20th shipment, etc. until you reach the end of the file. You will have selected 35 shipments to report on in Item F.

**NOTE** – If your sample of shipments includes any voided invoices, credit memoranda, etc., write "VOID" in column (b) for that shipment. Leave the rest of the line blank.

5. Sample validation — After sample selection is done, compare the number of selected shipments to the expected sample size in column (4). If the number of selected shipments is above or below the range, recheck the sample selection.

							_		-		_
Hazardous material? (Y/N)	Domestic mode(s) of transport Enter all that apply using codes shown below.	Containerized? (Y/N)	Origin code	<b>Domestic</b> de (or port/airport/bo of exit for e (I)	stination rder cr xports)	on ossing	Export? (Y/N)	Export mode	<b>Foreign</b> de (for export shi	pments only)	Line No.
(h)	(i)	(j)	(k)	City	State	ZIP Code	ш (m)	ш (n)	City	Country	(p)
											1
											2
											3
											4
											5
											6
											7
											8
											9
											10
											11
											12
											13
											14
											15
	<b>5</b> — Inland wat <b>6</b> — Deep sea		l d/or G	 Great Lakes 7 — Pipeli 8 — Air	ne	<b>9</b> — Oth <b>0</b> — Unk			I		1.2

Iten	F SHIPMENT CHA	RAC	TERIS	STICS -	– Conti	nued						
	Shipment					То	tal		Commodity			
Line No.	Number		ate c)		Value <i>(Dollars</i> (d)	)	Weight (Pounds)	Code	Description (Largest weight)			
(a)	(b)	м	D	Mil.	Thou.	Dol.	(e)	(f)	(g)			
16					   							
17					 							
18					   	   						
19												
20					   	   						
21												
22					   	   						
23												
24					   							
25					   							
26					 							
27					   							
28					   							
29					   	 						
30					 							
31												
32					   	   						
33					   	 						
34					   	   						
35					 	 						
36					   							
37					   	   						
38												
39					   	   						
40						 						
Mo for	de of transport codes columns (i) and (n)			1 —	Parcel o Postal S	delivery Service	, courier, or U.S.	<ul> <li>2 — Private tru</li> <li>3 — For-hire tru</li> </ul>	ck <b>4</b> — Railroad uck <i>Continued</i> ————————————————————————————————————			

Page 4

									1		-
Hazardous material? (Y/N)	Domestic mode(s) of transport Enter all that apply using codes shown	Containerized? (Y/N)	Origin code	<b>Domestic</b> de (or port/airport/bo of exit for e (I)	stinatio rder cro xports)	on ossing	Export? (Y/N)	Export mode	Foreign des (for export shipr (o)	tination nents only)	Line No.
Ξ E (h)	below. (i)	تح (j)	0 (k)	City	State	ZIP Code	யி (m)	யி (n)	City	Country	(p)
											16
											17
					+						18
											19
											20
											21
											22
					+						23
											24
											25
											26
											27
											28
					+						29
											30
											31
											32
											33
											34
					+						35
					<u>     </u>						36
											37
											38
											39
	<b>5</b> — Inland v	vater a	and/o	r Great Lakes <b>7</b> — Pi	peline	<b>9</b> — Ot	her m	ode			40
	<b>6 —</b> Deep se	a wat	er	<b>8</b> — Ai	ir	<b>0</b> — Un	know	'n			

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lten	F SHIPMENT CHARACTERISTICS — Continued											
	Shipment					Тс	otal			Commodity		
Line No.	Number		ate c)		Value (Dollars (d)	)	We (Pou	ight Inds)	Code	Description (Largest weight)		
(a)	(b)	м	D	Mil.	Thou.	Dol.	(	e)	(f)	(g)		
41					1	   						
42					   	   						
43						I I						
44					1	 						
45					 	 						
46						 						
47						   						
48					   	   						
49					   	   						
<b>50</b> Mo	de of transport codes			1-	Parcel c	leliverv	courier, or U	S.	<b>2</b> — Private true	k <b>4</b> — Railroad		
	de of transport codes columns (i) and (n)	ļ			Postal S	Service	courier, or U		<b>3</b> — For-hire tru	ck Continued –	<b></b>	
REI	MARKS											
_												
lten	G CERTIFICATION	I										
Nar	ne of person to contac	t rega	rding	this rep	oort – <i>Ple</i>	ease pri	int	Telephone n	umber – <i>Include al</i>	ea code Date		
<b>C</b>								T:41 -				
Sig	nature							Title				

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Hazardous material? <i>(Y/N)</i>	Domestic mode(s) of transport Enter all that apply using codes shown below.	Containerized? (Y/N)	Origin code	<b>Domestic</b> de (or port/airport/bo of exit for e (I)	estinatio order cr exports)	on ossing	Export? (Y/N)	Export mode	<b>Foreign</b> do (for export shi	pments only)	Line No.
(h)	(i)	(j)	(k)	City	State	ZIP Code	(m)		City	Country	(p)
											41
					- 1						42
											43
											44
											45
											46
											47
											48
											49
											50
	5 — Inland v 6 — Deep se	vater	and/o	r Great Lakes <b>7</b> — Pij <b>8</b> — Ai	peline	<b>9</b> — Ot <b>0</b> — Ur	her m	node	1		
FORM (	:FS-1000 (9-2-92)			THANK YOU	FOR C	COMPLETING	i YO	UR F	REPORT		Page 7

F-78 APPENDIX F

		U.S. DEPARTMENT OF COMME BUREAU OF THE CENSUS		OMMUNIC	ATION	TRANSPORTATION, IS, AND UTILITIES ANSPORTATION OMB No. 0607-0738: Ap	proval E	xpires	05/31/94
lf tl C b b F to c T	f you have o his report, p cansus Bure, le sure to re ile Number o the right. I ompleted re BURE 12011 Jeffer Foll-free assi	E: FEBRUARY 15, 1993 Juestions about completing Jease call or write the au. In any communication, fer to the 11-digit Census (CFN) printed in the label Please return your sport to: AU OF THE CENSUS East 10th Street sonville, IN 47134-0001 stance, 8:00 a.m. to 8:00 p.m. Monday through Friday: 1–800–233–6136		[		c	B-4100 	l	
	instru	e read the accompanying ctions before answering lestions.							
		Census use							
				(Plea	ase correct a	any errors in name, address, and ZIP C	ode.)		
Ite	questionr CONFIDI retained i	naire to answer the questions	and retur by Censu une from	n the report to the s Bureau employe	Census Bui	uires businesses and other organizatio reau. By the same law, <b>YOUR CENSU</b> be used only for statistical purposes. I Dollar figures should be <b>rounded</b>	S REPC -urther, Mil-	Copies	Dol-
lat	oel the sam	ver Identification (EI) Numl e as the one used for this 1992 Employer's Quarterly sury Form 941?	establish	ment	REPORT DOLLAR FIGURES	to <b>thousands</b> of dollars. <b>Example:</b> If a figure is \$1,125,628.79 • Preferred report	lions (000) <b>1</b>	(000) <b>126</b>	(000)
	_				Item 4.	DOLLAR VOLUME OF BUSINESS	1 Mil.	125 Thou.	629 Dol.
	094 1	Yes 2 No – Report c	urrent El N	No. below		g revenue in 1992	010		i
		(9 digits)			-	overnment subsidies. Taxicabs		1	1
		SICAL LOCATION			should inc	clude tips. Bus station agents			
a.	the addres	ablishment's physical loca is shown in the label? (P.O.	tion the s box and	same as rural route	ltem 5.		Mil.	Thou.	Dol.
		are not physical locations)				1992, BEFORE DEDUCTIONS	030		1
	093 1	Yes 2 No – Report p	hysical loo	cation below	a. Annua				
	Number ar	nd street					031		I
	City, town.	village, etc.	State	ZIP Code	b. First q	uarter (January–March)		 	1
					ltem 6.	EMPLOYMENT		Numbe	er
ь.	095 1	ablishment physically loca s of the city, town, village ] Yes 3	, etc.?	e the legal	period in (Include b employee	of paid employees for pay cluding March 12, 1992 oth full- and part-time s) KIND OF BUSINESS OR ACTIVITY	032		
c.	In what ty physically	pe of municipality is this e located?	stablishr	nent	kind of b	s this establishment's PRINCIPAL usiness or activity in 1992? only ONE box.			
1		City, village, or borough				070 De/Intercity bus transportation		~	
		] Town or township ] Other – <i>Specify</i>				et office (agent operated)			
		Do not know				ous service	413	101	
d.	In what co	ounty is this establishment	physical	lly located?	Interstate	e/Intercity.	414		
lte	em 3. OPE	RATIONAL STATUS		umber of months		i suburban passenger transportation d suburban bus (including			
а.	How many	months during 1992 was lishment actively operated	002	2	commut	er)			
Ь.	Which of t	he following best describe	es this			ubway		103	
	establishn	nent's status at the end of aly ONE box.	1992?			us	=	101 W	ontinue vith em 8
	001 1	In operation		Figures only	0	ing bus			0111 0
	2	Temporarily or seasonally i		Month Year	Limousir	ne or auto rental WITH driver	411	921	
1	3	] Ceased operation – <i>Give da</i> ] Sold or leased to another o <sub>l</sub>	0			nce or rescue service (except by air) Llance or rescue service			
	4	Give date at right AND ente etc., below	r name,			oped or senior citizen transportation			
	Name of n	ew owner or operator				r amusement rail, trolley, or cable car n	799	990	
	Number ar	nd street			Other loo <i>Describe</i>	cal passenger transportation –	411	992	
1	City		State	ZIP Code			<u> </u>	J	
1	1					ITEM 7 CONTINUED ON PAG	E 2		

PENALTY FOR FAILURE TO REPORT

									Page 2					
Item 7. KIND OF BUSINESS OR A	CTIVI	TY – Co	ntinued			Item 9. SUBSIDIES								
Other arrangement of passenge transportation NOT operated by	r	070		<b>ר</b>		a. Did this establishment receive any cash or non-cash subsidies								
transportation NOT operated by transportation company	,					any cash or non-cash subsidies 1 U Yes - ( (e.g., fuel, maintenance services) with li from any agency of local, State,								
Travel agency							local, State,		No – Skip to					
Tour operator			. 📙 4725	603		(Include Section 5 & 9 Transit Act Grants.)	Urban Mass		item 10					
Other transportation-related act Motor freight carrier – Describe			1210	000				Mil.	Thou. Dol.					
Motor neight carrier – Describe			. <u> </u>			<ul> <li>Report the dollar va and non-cash subside</li> </ul>		798						
					Skip to tem 12	during 1992.								
Terminal or maintenance facility	,					Item 10. INVENTORIES DECEMBER 3	6 OF REVENUE- 1, 1992	GENERATING	EQUIPMENT –					
(except those for exclusive use of company-operated vehicles)	of		. 🗌 4173	801		Powerus constating	N	umber of vehic	les					
Automobile rental WITHOUT dri						Revenue-generating equipment	Owned	Leased	Total					
Other kind of business or activity –	Desci	ribe	- 7777	77			(1)	(2)	(3)					
						<b>a.</b> Vans								
				-		<b>b.</b> Small buses (less	812	822	802					
Item 8. SOURCES OF REVENUE Please read instructions below before	ore co	mpletin	g this it	em.		than 35 seats)	813	823	803					
Report sources of revenue for t	his es	tablish	- nment e	ither a	S	<b>c.</b> Two-axle buses (35 seats or more)								
dollar figures or as whole perce revenue. (See HOW TO REPORT D	DOLLA	R FIGU	RES on p	rating page 1		<b>d.</b> Three-axle buses	814	824	804					
and HOW TO REPORT PERCENTS BUS TICKET AGENTS should report			ns on lin	e 16		(35 seats or more)	815	825	805					
If figure is 38.76% of	1 3011				Per-	e. Taxicabs								
HOW TO total revenues:			Thou.	Dol.	cent	f Line and	816	826	806					
PERCENTS • Report whole percent Not acceptable —	ents –		+  	→ ↓	<b>39</b> 38.76	f. Limousines	817	827	807					
	_	ESTIN	IATES a	re acce	ptable.	g. Ambulances								
Sources of revenue	Cen- sus	Repor	t dollars	OR pe	rcents.	h. Other – <i>Describe</i>	818	828	808					
	use	Mil.	Thou.	Dol.	Per- cent									
1. Interstate/Intercity passenger	700	701			702	Item 11. Not applicable	e to this report	·	·					
service	101					Item 12. LEGAL FORM	OF ORGANIZA	TION						
<ul><li>2. Charter service</li><li>a. Local</li></ul>	102					Which of the following								
						legal form of organization during 1992? Mark (X) only ONE box.								
<b>b.</b> Interstate/Intercity	103					003 1 🗌 Individual own	er (sole proprie	torship)						
<ol> <li>Local and suburban bus, rail, or subway service</li> </ol>						2 🗌 Partnership								
(including commuter)	104		-											
<b>4.</b> Airport service	105					3 🗌 Cooperative (ta	axable)							
<b>5.</b> School bus service						4 🗌 Cooperative (ta	ax-exempt)							
a. For public schools	106					_	-							
<ul> <li>For private and parochial schools</li> </ul>	107					5 🗌 Governmental	– Specify							
			1	 		0 🗌 Corporation (ta	axable)							
6. Sightseeing	108					_								
<b>7.</b> Taxicab service	109					6 🖾 Corporation (ta	ax-exempt)							
8. Rent or lease of taxicabs						9 🗌 Other – Specify	Y							
to drivers	110													
9. Limousine service	111		1			Item 13. OWNERSHIP,								
						a. Is the FIRST DIGIT o in the address label	of your Census	s File Number after "CFN") a	(shown zero?					
<b>10.</b> Ambulance or rescue service	112		<u> </u>				-	•						
<b>11.</b> Other passenger transportation	113		1	L		1 🗌 Yes – <i>Comp</i> 2 🗌 No – <i>Skip to</i>								
12 Freinkt hann i "			1											
<b>12.</b> Freight, baggage, and mail	114		1			b. Is this company	Enter name ar	dress, and ELN	lumber of the					
<b>13.</b> Repair and maintenance of vehicles NOT owned by			I I			owned or controlled by		trolling compar						
your company	308		1			another company?								
<b>14.</b> Advertising	309													
<b>15.</b> Sales of merchandise	1.00					097 1 ☐ Yes —→ 2 ☐ No								
a. Fuels and lubricants	310					2								
<b>b.</b> Food and beverages	320					c. Does this company	El No. (9 digits Enter name, ac		lumber of the					
					own or control any owned or controlled company other company or									
<b>c.</b> Sales of other merchandise	375		1		companies?									
<b>16.</b> All other operating revenue –				098 1 □ Yes →										
Describe in REMARKS section if this is largest source				$2 \square \text{No}$										
of revenue	485		1					\						
<b>17. TOTAL</b> (Should equal item 4 if reporting in dollars)	990				100%		El No. (9 digits 3 CONTINUED							
FORM CB-4100	1000		1						UE ON PAGE 3					

FORM CB-4100

												Page 3
FOF	СОМІ	MUNICAT	OF TRAN	J.S. DEPARTMENT BUREA SPORTATI ND UTILITI ANSPORTATIC	ON,	CE as	ter the 11-digit ENSUS FILE NUMBER shown on this repor ee label on page 1)					
lte					F OPERATION -	Cor	ntinued					
d.	How many est				Number		Name			1992 Mil.	Thou	. Dol.
	the Employer in the label (o	r as correct	on Numbe ed in item	er shown 1) AT	079		Number and street			l <sub>081</sub> Revenuel	1	1
	THE END of 1	9927								Annual 082		
	If more than on other information	ne, provide th	e physica	l location add	ress and	3	City	State	ZIP Code	payroll		I
	headquarters lo locations. If mo	ocation shoul	d be first, '	followed by all (	other	3	Kind-of-business desc	ription		Paid emplo period incluc	yees fo ling Ma	r pay Irch 12
	format in REMA	ARKS or on a	separate	sheet of paper.	ne					083	-	
	Estimates are	acceptable	if book fig	ures are not ava	ilable.					Census <sup>088</sup> use		
	Name			1992 Mil.	Thou. Dol.		Name			1992 Mil.	Thou	. Dol.
				081 Revenue						l <sub>081</sub> Revenuel	1	
	Number and st	reet		Annual			Number and street			082	1	
	City	State	ZIP Code		I I		City	State	ZIP Code	Annual payroll	1	I
1	Kind of husings			Paid emplo	yees for pay ling March 12	4	Kind of business does			Paid emplo period includ		
	Kind-of-busines	s description	1	083			Kind-of-business desc	ription		083	ing wa	1011 12
				Census <sup>088</sup> use						Census <sup>088</sup> use		
	Name			1992 Mil.	<sup> </sup> Thou. <sup> </sup> Dol.		Name			1992 Mil.	<sup> </sup> Thou	. Dol.
				081 Revenue						081	1	
	Number and st	reet		Annual 082			Number and street			Revenue 082	1	1
	City	State	ZIP Code		I I		City	State	ZIP Code	Annual payroll	I	I
2	Kind of busines			Paid emplo	yees for pay ling March 12	5				Paid emplo period incluc	yees fo	r pay
	Kind-of-busines	ss description	1	083			Kind-of-business desc	ription	I	083	ing wa	
				Census <sup>088</sup> use						Census <sup>088</sup> use		
	REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.											
lte	em 14. CERTIF	ICATION – T	his report	is substantially	accurate and ha	is be	een prepared in accord	ance v	ith instruc	tions.		
Pe by	riod covered this report	FROM: Mo.	Ye	ear TO: Mo	o. Year	Na	me of person to contac	ct rega	rding this ı	eport – Print or	type	
	ephone	Area code	Number	E	xtension	Tit	le					
Sig	nature of autho	rized person		I		•				Date		
1							RM FOR YOUR RECO					

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM CB-4701	CON	IMUN	ICATION	TRANSPORTATION, S, AND UTILITIES INGER TRANSPORTATION OMB No. 0607-0738: A	opproval E	xpires 05/31/94
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136					CB-4701	
Please read the accompanying instructions before answering the questions.						
Census use	-					
			(Please correct a	any errors in name, address, and ZIP	Code.)	
YOUR RESPONSE IS REQUIRED BY LAW questionnaire to answer the questions and CONFIDENTIAL. It may be seen only by C retained in respondents' files are immune f	return the ensus Bure rom legal p	report to au emplo	the Census Bure oyees and may b	au. By the same law, YOUR CENSU	IS REPOR Further, co	TIS
Is the Employer Identification (EI) Number	shown in	the	HOW TO REPORT	to thousands of dollars. Example: If a figure		sands   lars (000)   (000)
label the same as the one used for this esta on its latest 1992 Employer's Quarterly Fee	ablishmen	t	DOLLAR FIGURES	is \$1,125,628.79 • Preferred report	1	126
Return, Treasury Form 941?				Acceptab	le 1 Mil.	125   629 Thou.   Dol.
094 1 ☐ Yes 2 ☐ No – <i>Report curre</i>	nt El No. b	elow		DOLLAR VOLUME OF BUSINESS ing revenue in 1992	010	
			Travel a COMMI	agents should include SSIONS, not gross sales. Tour	i	i
(9 digits)			operato	rs should include the ENCE between the selling price	I	I.
Item 2. PHYSICAL LOCATION a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)			of their supplie	tours and the amounts paid to rs, i.e., hotels, transfers, eing companies, etc	   	
093 1 ☐ Yes 2 ☐ No – <i>Report physi</i>	ical locatio	, below		s establishment operate as a	/09 1 L	_ Yes − Go to line c
Number and street			provide	agent, tour operator, or e other services in arranging ger transportation?	2 [	□ No – Skip to item 5
City, town, village, etc. Sta		Code	c. Gross	operating revenue in 1992	Mil.	Thou. Dol.
			Travel a SALES. the SEL	agents should include GROSS Tour operators should include LING PRICE of tours.		i I
<ul> <li>b. Is this establishment physically located boundaries of the city, town, village, etc</li> </ul>		legal	Item 5.		Mil.	Thou. Dol.
095 1 🗌 Yes 3 🛄 No legal boundari	es			1992, BEFORE DEDUCTIONS	030	
2 🗌 No 🛛 4 🗌 Do not know			a. Annua	-	1	I I
<ul> <li>c. In what type of municipality is this esta physically located?</li> </ul>	blishment			-	031	l
096 1 🗌 City, village, or borough			b. First q	uarter (January–March)	I	I
2 Town or township				EMPLOYMENT of paid employees for the	032	Number
3			period ind	cluding March 12, 1992 oth full- and part-time	-	
d. In what county is this establishment ph	vsically lo	cated?	employees			
a what county is this establishment ph	y Sically 10	Jatou:		KIND OF BUSINESS OR ACTIVITY vas this establishment's <b>PRINCIP</b>	~ 1	
Item 3. OPERATIONAL STATUS		er of mor	ths kind of	f business or activity in 1992?	AL	
a. How many months during 1992 was	002			() only ONE box. ement of transportation or		
this establishment actively operated?	hia			modations for passengers		
b. Which of the following best describes the establishment's status at the end of 199 Mark (X) only ONE box.	92?				472401	ו
001 1 🗌 In operation		Figures c		r operator (except local tseeing)	472501	
2 Temporarily or seasonally inact		Month Y	ear Tou	rist information bureau	738990	I
3	0			nt for FOREIGN cruise ship	472901	Continue
Give date at right AND enter na etc., below	ime,		Tick	et office – NOT operated by		with item 7b
Name of new owner or operator		I	Othe	sportation company	472902	
Number and street			for p	bassengers or tourists –	472903	
City	te ZIP	Code				J
				ITEM 7 CONTINUED ON PA	GE 2	
PENALTY FOR FAILURE TO REPORT			-			E ON PAGE 2

PENALTY FOR FAILURE TO REPORT

											Page 2
Item 7. KIND OF BUSINESS OR	ACTIV	ITY – Continue	əd		lte	əm 9.	COST OF PURC	HASED TRAVEL	Mil.	Thou.	Dol.
Other passenger transportation			٦.		а.		rt the dollar an			I mou.	
activities							ase tickets, pa ng. etc., to eac	ckaged tours, h of the following:	774	1	1
Bus charter service						-	-			1	1
Local		. 🗌 414102	2			$(1) \underline{A}$	ir carriers		775	<u> </u>	1
Intercity		. 🗌 414202	2			(2) \	latar corriera		//5	1	1
Sightseeing bus						(2)	Vater carriers		776	1	<u> </u>
Airport bus service		. 411106	5			(3)⊢	lotels/Motels			1	1
Limousine or auto rental with		_				(3)	loters/moters		777	1	1
driver		. 411922	2			( <b>4</b> ) N	lotor coaches			1	1
Excursion or sightseeing boa									778	1	1
including charter		448903	3			(5) F	ailroad transpor	tation		1	1
Sightseeing airplane or helic	opter					-			779	1	1
service		. 452207	•	1.:		(6) F	ental cars			1	1
Other transportation services				kip to em 12		-			780	1	<u> </u>
Freight forwarding service .		473114				(7) P	ackage tours			1	1
Shipping agent or broker						-			781		1
Shipping agent of broker			·			(8) 🤆	iroup sales			1	1
Other service in arranging						-			782	1	1
transportation of freight or can be carribe			. 1			<b>(9)</b> A	II other			1	I
						-			783	1	1
						(10) T	otal purchased t	ravel		1	1
					h	What	percentage of	the total	F	Report ir	1
					<b>D</b> .	purch	ased travel wa	is for:		ole perce	ents
Other kind of activity – <i>Describe</i> .		. 🗆 777777	,						785		
						(1)	omestic travel				
									786		
						(2)	nternational trav	el			
						(3) T		lines b(1) and b(2)			
b. Did this establishment have								otal 100 percent)		100%	
or appointment with, by, or f organizations listed here?	rom a	iny of the fol	lowing			em 10.		e to this report			
<b>. . . . . . . . . .</b>					lte	em 11.	Not applicable	e to this report			
770 1 🗌 Yes – Mark (X) below	the o	rganization(s)	with whi	ich	lte	em 12.	LEGAL FORM	OF ORGANIZATION			
this establishm	ent ha	d an appointn	nent.		w	hich o	f the following	best describes this	establi	shment	's
2 🗌 No – Skip to item 8					le	gal fo	m of organiza	tion during 1992? M	ark (X) o	nly ONE	box.
IATAN (International Airlir	ie										
IATAN (International Airlir Travel Agent Network)		771 1				003	1 🗀 Individual	owner (sole proprieto	orship)		
ARC (Airline Reporting		_						-			
Corporation)							2 🔛 Partnersh	ip			
Other – <i>Describe</i>		773 1 🗌					<b>—</b> -				
							5 🛄 Governme	ental – <i>Specify</i>			
							□				
					•		0 🗌 Corporatio	on			
Item 8. SOURCES OF REVENUE							o∏Other – S	pecify			
Report sources of revenue for t dollar figures or as whole perce											
revenue. (See HOW TO REPORT L and HOW TO REPORT PERCENTS			n page T		lte	am 13		CONTROL, AND LOCAT		OPERAT	
						, in 15	ownensmi,	CONTROL, AND LOCAT			
Line 1 – Include commissions and sale of airline tickets, cruises, pack	other	revenue from	the RET	AIL	а.	Is the		of your Census File N		(shown	I
revenue from the arrangement and	sale	of assembled		511		τη της	e address label	immediately after "	CFN <sup>®</sup> ) a	zeror	
(whether RETAIL OR WHOLESALE)	on lir	ne 2.					$1 \square \text{Ves} = Cou$	mplete this item			
Line 2 – Report here the DIFFEREN			ing price	e of			2 🗌 No – Skip				
tours and the amounts paid to sup	pliers.				1						
Line 3 – Include all other travel-rel					1						
commissions from sale of travel in	suran	.e, traveler's c	HECKS, E		ь.		s company	Enter name, address, owning or controlling			of the
If figure is <b>38.76%</b> o	f	Mil. Thou		Per-	1	owne	olled by		, compa	·· y	
HOW TO REPORT total revenues:			.   Doi.	cent		anoti	ner company?				
PERCENTS • Report whole percent	ents –		<b>→</b>	39							
Not acceptable —			>	38.76	1						
		ESTIMATES	are acce	ptable.	1	097	1 🗌 Yes>				
Sources of revenue	Cen- sus	Report dolla	rs OR pe	rcents.	1		2 🗌 No				
	use	Mil. Thou	. Dol.	Per-	1						
	<u> </u>		1 - 5	cent	4						
1 Commissions and it	700	701	1	702	1						
<ol> <li>Commissions and other revenue from the RETAIL sales of</li> </ol>			1	1	1			El No. (9 digits)			- 6 41
passenger transportation and			1	1	с.		this company or control any	Enter name, address, owned or controlled	, and El l company	vumber v	of the
lodging	441		1	+	1	othe	company or			•	
2 Tour operation	442					comp	anies?				
2. Tour operation	2		1		1						
<b>3.</b> Other travel-related services	443		1		1		. —				
			1	-	1	098	$1 \bigsqcup \text{Yes} \longrightarrow$				
<b>4.</b> All other operating revenue –			1		1		2 🗀 No				
Describe in REMARKS if this is largest source of revenue	485		1	1	1						
			1	1	1						
5. TOTAL (Should equal item 4a			1		1			El No. (9 digits)			
if reporting in dollars)	990		1	100%			ITEM 1	3 CONTINUED ON PA	GE 3		
FORM CB-4701									ONTIN		

												Page :			
FOR	M CB-4701 U.S. DEPARTMENT OF COMM BUREAU OF THE C 1992 CENSUS OF TRANSPORTATION, COMMUNICATIONS, AND UTILITIES ARRANGEMENT OF PASSENGER TRANSPORTATION								ter the 11-digit INSUS FILE NUMBER shown on this report ee label on page 1)						
lte		RSHIP, CONT						Con	tinued						
	How many es						umber		Name			1992 Mil. Thou. Dol.			
	the Employer in the label (o	Identification r as corrected	on Ńumbe	r showr	n	079			Number and street			Revenue			
	THE END of 1	992?							Number and street			Annual 082			
	lf more than or other informati	ne, provide th	e physica	I locatio	on add	dress an	d	3	City	State	ZIP Code	payroll			
	headquarters lo locations. If mo	ocation shoul	d be first, f	followed	by all	lother	le		Kind-of-business desc	ription		Paid employees for pay period including March 12			
	format in REM	ARKS or on a	separate s	sheet of I	paper.							083			
	Estimates are	acceptable	if book figu	ures are i	not av	ailable.						Census <sup>088</sup> use			
	Name			1992	Mil	. Thou	ı. Dol.		Name			1992 Mil. Thou. Dol.			
	Number and st	reet		Revenue	081		I		Number and street			Revenue			
				Annual	082		1					Annual 082			
1	City	State	ZIP Code		empl	ovees fo	l or pay	4	City	State	ZIP Code	Paid employees for pay			
	Kind-of-busines	nd-of-business description			Paid emplo period includ		arch 12		Kind-of-business desc	ription		period including March 12			
				083								083			
				Census	088			1				Census <sup>088</sup>			
	Name			<b>use</b> 1992	Mil	Thou	ı. <sup> </sup> Dol.	-	Name			use 1992 <sup> </sup> Mil. <sup> </sup> Thou. <sup> </sup> Dol.			
	081											081			
	Number and street         Revenue         I           Annual         1082         I								Number and street			Revenue			
	City	ZIP Code	Annuar	İ.		1		City	State ZIP Code		Annual payroll				
2	Kind-of-business description			Paid period	empl d inclu	oyees fo uding Ma	or pay arch 12	5	Kind-of-business desc	rintion		Paid employees for pay period including March 12			
		083		0			Kind-or-business desc	inption		083					
				Census	088							Census <sup>088</sup>			
				use								use			
lte	m 14. CERTIF	FICATION – T	his report i	is substa	intially	/ accurat	te and ha	s be	een prepared in accord	ance w	ith instruct	iions.			
Pe	riod covered	FROM: Mo.	V	ear To	N	1o.	Vear	Year Name of person to contact regarding this report – <i>Print or type</i>							
	this report 🛛			TO:		1	rear	1.14	• • • • • • • • • • • • • • • • • • • •						
by	ephone	Area code		10:		Extensio		Tit							
<b>by</b> Tel		Area code		10:		I						Date			

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM CB-4801	COMMUNIC	JS OF TRANSPORTATION, ATIONS, AND UTILITIES TELEGRAPH COMMUNICATIONS OMB No. 0607-0738: Approval Ex	pires 05/31/94				
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS		CB-4801					
1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136							
Please read the accompanying instructions before answering the questions. Census use							
guestionnaire to answer the guestions and r	Title 13, United States eturn the report to the ( insus Bureau employee	ase correct any errors in name, address, and ZIP Code.) Code, requires businesses and other organizations that rec Census Bureau. By the same law, <b>YOUR CENSUS REPORT</b> s and may be used only for statistical purposes. Further, cop	IS				
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number s label the same as the one used for this estal on its latest 1992 Employer's Quarterly Fede Return, Treasury Form 941?	hown in the blishment	HOW TO     to thousands of dollars.     lions   s       REPORT     Example: If a figure     (000)       DOLLAR     is \$1,125,628.79     • Preferred       FIGURES     report     Acceptable	hou- Dol- ands I lars (000) (000) <b>126</b> 125 629 Thou. Dol.				
094 1 Yes 2 No - Report curren (9 digits)	t El No. below	Operating revenue in 1992       010         Telephone service establishments should:       1         EXCLUDE revenue collected on behalf of another company. INCLUDE revenue received from international calls originating in the United       1					
<ul> <li>a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)</li> <li>1 Yes</li> <li>2 No - Report physical</li> </ul>	and rural route	States (including that portion paid to foreign countries for accessing their network). INCLUDE allowances for uncollectable accounts.         Item 5. PAYROLL       Mil. 1         030       030	Thou. Dol.				
Number and street       City, town, village, etc.		Payroll in 1992, BEFORE DEDUCTIONS a. Annual 031 b. First quarter (January–March)	     				
<ul> <li>b. Is this establishment physically located i boundaries of the city, town, village, etc.</li> <li>095 1 Yes 3 No legal boundarie</li> </ul>	.?	Item 6.     EMPLOYMENT     N       Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)     032	umber				
2 No 4 Do not know c. In what type of municipality is this estab physically located? 096 1 □ City, village, or borough	lishment	Item 7. KIND OF BUSINESS OR ACTIVITY What was this establishment's PRINCIPAL kind of business or activity in 1992? Mark (X) only ONE box. 070					
2 Town or township 3 Other – Specify 4 Do not know		Telephone communications (except radiotelephone)         Local telephone service					
<ul><li>d. In what county is this establishment phy</li><li>Item 3. OPERATIONAL STATUS</li></ul>	sically located?	Other telephone service (except telephone answering) – <i>Describe</i> . 🗌 481303					
<ul> <li>a. How many months during 1992 was this establishment actively operated?</li> <li>b. Which of the following best describes the establishment's status at the end of 1992 Mark (X) only ONE box.</li> </ul>	is	Radiotelephone communications         Cellular telephone service.         Paging or beeper service (including voice mailbox)	Continue with				
<ul> <li>001 1 In operation</li> <li>2 Temporarily or seasonally inactive</li> <li>3 Ceased operation - <i>Give date at</i></li> <li>4 Sold or leased to another operative</li> <li>6 <i>Give date at right AND enter nan</i></li> </ul>	right or –	Other radiotelephone service – Describe	item 8				
Name of new owner or operator		Telegraph service					
City State	e ZIP Code	Describe	ON PAGE 2				

PENALTY FOR FAILURE TO REPORT

											Page 2	
Item 7. KIND OF BUSINESS OR	ACTIV	ITY – Co	ontinue	d		Item 10	<ol> <li>Not applicabl</li> </ol>	e to this report				
Other communications-related activities				ן		Item 11	I. CONSTRUCT	ION ACTIVITY	723			
Radio broadcast station			483209	C I	ip to			SHMENT involved		Yes – <i>Co</i>		
Television broadcast station			483309		m 12			n, renovation, or pairs of buildings,		with line	Ь	
Cable or other pay television service			484109			stru	ctures, or lines	during 1992?	2	No – Ski item 12	o to	
Other communications-related services – <i>Describe</i>			489901		ontinue	b. Wha	t were your cap	nital expenditures in ruction, including	Mil.	   Thou.	l   Dol.	
			403301		m 8	reno	vation? (INCLUI	DE labor and materials e value of production	724		1	
						mach	ninery and equip of a structure.)	ment not an integral		1	l I	
Other telephone and telegraph related activities				ן			t percentage of	the canital	Rep	ort in w		
Telephone answering service .			738930			expe	esents work do	ted in line b	725	percent		
Telemarketing service		=	738990			own	employees as a done by contr	opposed to				
Telephone equipment sales			762900			othe	r hired labor?				%	
Individuals		_	599959 506511		ip to m 12	d. Wha	t were your exp	enses in 1992	Mil.	Thou.	Dol.	
Other kind of business or activity –			506511			for r	naintenance an LUDE expenses t	d repairs?	726	1		
Describe			777777			activ	ities as janitorial ling, lawn mainte	services,		1	l I	
									Rep	ort in w		
				J		e. Wha expe	t percentage of enses for maint	<sup>:</sup> the enance	727	percent		
Item 8. SOURCES OF REVENUE Report sources of revenue for t	hia aa	tobliab			-	and line	repairs reporte d represents w	d in ork				
dollar figures or as whole perce revenue. (See HOW TO REPORT D	entage	es of to	tal ope	erating		as o	e by your own e pposed to work	done by			0/	
and <i>HOW TO REPORT PERCENTS</i> Telephone service establishments	below	)						r hired labor? 1 OF ORGANIZATION			%	
collected on behalf of another com from international calls originating	pany.	INCLUE	DE reve	nue rec	eived			best describes this	establi	shment	's	
that portion paid to foreign countri Include allowances for uncollectab	es for	accessi						tion during 1992? M				
If figure is <b>38.76%</b> of total revenues:			   Thou.	Dol.	Per- cent	003	1 🗌 Individua	l owner (sole proprieto	rship)			
REPORT PERCENTS • Report whole perce	ents –			<b>├</b> →	39		2 🗌 Partnersh	ip				
Not acceptable —	1	ECTIM	∔ IATES ε	<u>↓&gt;</u>	38.76							
Sources of revenue	Cen- sus	Report	t dollars	s OR pe	ercents.		3 🔛 Cooperat	ive (taxable)				
	use	Mil.	   Thou.	   Dol.	Per- cent		4 🗌 Cooperat	ive (tax-exempt)				
1. Telephone service revenue	700	701	 	1	702	1	5 🗌 Governm	ental – <i>Specify</i>				
a. Local service	801						0 🗌 Corporati	on (taxable)				
<b>b.</b> Long-distance service	802		 				6 🗌 Corporati	on (tax-exempt)				
2. Network access revenue	803		1	1		9 🗌 Other – <i>Specify</i>						
<ol> <li>Cellular and other radio telephone service</li> </ol>	804		 	 		Item 13. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION						
<ol> <li>Telegraph and other message communication services</li> </ol>	805		 			a. Is th	e FIRST DIGIT o	of your Census File N immediately after "	lumber	(shown		
<b>5.</b> Other communication services	806							-	0111 / 4	2010.		
			I			1	1 ∐ Yes – <i>Co</i> 2 ∐ No – <i>Skij</i>	mplete this item o to item 14				
<ol> <li>Directory advertising revenue</li> <li>Rent or lease of</li> </ol>	336		<u> </u>				is company	Enter name, address,	and El	Number	of the	
8. Sale of communications	337		I	1		cont	ed or rolled by her company?	owning or controlling	) compa	ny		
8. Sale of communications equipment	370											
9. Sale of other merchandise	375		I I	 								
10. All other operating revenue – Describe in REMARKS section				1		097	1 🗌 Yes					
if this is largest source of revenue	485		 				2 🗌 No					
			I	 I								
<b>11. TOTAL</b> (Should equal item 4 if reporting in dollars)	990				100%	c. Doe:	s this company	El No. (9 digits) Enter name, address,	and El	Number	of the	
Item 9. REVENUE BY CLASS OF	CUST	OMER		leport in		own	or control any r company or	owned or controlled	compan	У		
Report the approximate percen your 1992 revenue (item 4) to e	tage o ach	of	710	ole perc	ents	com	panies?					
of the customer classes listed. <b>a.</b> Residential customers												
			711			098	1					
<b>b.</b> All other customers												
<b>c. TOTAL</b> (Sum of lines a and b								El No. (9 digits)				
should add to 100 perc	ent)			100%			ITEM 1	3 CONTINUED ON PAG	GE 3			

FORM CB-4801

	_													Page 3	
Item 13.         OWNERGENT, CONTROL AND LOCATIONS OF OPERATION - Continued           d. how many settlements action Remain 9 across         Name         1992         Main - Theor. Dot.           d. how many settlements action Remain 9 across         207         207         Name         Remain 207           If more than one, provide the physical bacestion address and other information information theorem theorem in resettlements information theorem theorem and information information theorem theorem and information information theorem theorem and information information theorem theorem and information information theorem theorem and information information theoremation information theoremany information informati	FOR	1992 ( COM	MUNICAT	OF TRAN	NSPORTATI	ON, ES	CE as	ENSUS FILE NUMBER shown on this repor							
d. Box many establishments operated under the subject framework of the state of the st	lte						Cor	ntinued							
Image project       Image project <thimage project<="" th=""> <thimage project<="" t<="" th=""><th></th><th></th><th></th><th>-</th><th></th><th></th><th></th><th colspan="8">Name 1992 Mil. Thou.</th></thimage></thimage>				-				Name 1992 Mil. Thou.							
The END of 1992?       United and set with a physical location addrass and other information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latew for each sectoristic inner. The base information induced latework is a sectoristic inner. The base information induced latework is a sectoristic inner. The base information induced latework is a sectoristic inner. The base information induced latework is a sectoristic inner. The base information induced latework is a sectoristic inner. The base information induced latework is a sectoristic inner information induced latework is a sectoristic inner information induced latework is a sectoristic inner information induced latework is a sectoristic inner information induced latework is a sectoristic inner information induced latework is a sectoristic inner information induced latework is a sectoristic inner information information information information information information information informatis		the Employer	Identificati	on Numbe	er shown	079					081	1			
If more than one, provide the physical location address and obtain the theory of pairs of the physical location address and obtain the physical location address andex physical location address and obtain address		THE END of 1	992?					Number and street				082		1	
eter 140mmetten indicated below for each establishment, The becautes at more more more increased contrase in the same of puper.       3       Indic 6 business discription       Paid employees for puy provided discription         Estimates are acceptable if book figures are no available.       1		If more than o	ne, provide th	ne <b>physica</b>	I location addr	ress and		City	State	ZIP Code			I	1	
Estimates are acceptable if book figures are not available.       Image: Cacess or an acceptable if book figures are not available.       Image: Cacess or an acceptable if book figures are not available.         Image: Im		other informati	ion indicated	below for	each establishm	ent. The	3				Paid e	mploy	vees for	pay	
Estimates are acceptable if book figures are not available.         Name         Create 100           Name         1992         Mill         Thou         Doi.           I         Beenue         1         I         I         Beenue         I           I         Brit         State         2// Cool         Paid amployees for pay parced including March 12         Image: State         2// Cool         Paid employees for pay parced including March 12           I         Barne         1992         Mill         Thou         Doi.         Paid employees for pay parced including March 12           I         Create 100         Beenue         1         Image: State         2// Cool         Paid employees for pay parced including March 12           I         Create 100         Paid employees for pay paid employees for pay parced including March 12         Image: State         2// Cool         Paid employees for pay paid           I         Create 100         Paid employees for pay parced including March 12         Image: State         2// Borice Including March 12         Image: State         2// Borice Including March 12           I         Create 100         December 12         Revenue         Image: State 12// Borice Including March 12         Image: State 12// Borice Including March 12           I         Create 100         Create 100 </th <th></th> <th>locations. If mo</th> <th>ore room is n</th> <th>eeded, cor</th> <th>ntinue in the san</th> <th>ne</th> <th></th> <th>Kind-of-business desc</th> <th>ription</th> <th></th> <th></th> <th>merua</th> <th>ing wa</th> <th></th>		locations. If mo	ore room is n	eeded, cor	ntinue in the san	ne		Kind-of-business desc	ription			merua	ing wa		
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1       Find on playages for pay ported including March 12 and the second		City	State	ZIP Code	Annual			City	State	ZIP Code	Annual	502	1	1	
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Name         1992         Mil.         Thou.         Dot.           Number and street         Bevenuel         I         I         I         I           City         State         ZIP Code         Davidi         I         I         I           Vinder and street         Bevenuel         I         I         I         I         I           City         State         ZIP Code         Davidi         I         I         I           Vinder and street         Bevenuel         I         I         I         I         I           Kind-of-business description         Paid employees for pay period including March 12         Date         Date         Date         Including March 12         Date           Census         Date					Ochisus							088			
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Kind-of-business description       period including March 12 org       Kind-of-business description       period including March 12 org         REMARKS - Please use this space for any explanations that may be essential in understanding your reported data.		City	State	ZIP Code	Annual	i i		City State ZIP Code			Annual		I	i i	
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Image: Image:															
REMARKS - Please use this space for any explanations that may be essential in understanding your reported data.         Item 14.       CERTIFICATION - This report is substantially accurate and has been prepared in accordance with instructions.         Period covered       FROM: Mo. Year       To: Mo. Year         Telephone       Area codo       Number       Extension												088			
Period covered by this report         FROM:         Mo.         Year         Year         Name of person to contact regarding this report - Print or type           Telephone         Area code         Number         Extension         Title															
Period covered by this report         Mo.         Year         Year         Name of person to contact regarding this report - Print or type           Telephone         Area code         Number         Extension         Title															
by this report     FROM:     IO:     IO:     IO:       Telephone     Area code     Number     Extension     Title					-		_								
			FROM:	1	10:	Ι									
Signature of authorized person Date				Number	· E	xtension	l lit	16							
PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS	Sig	nature of autho	rized person								Date				

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM CB-6000	AND REAL	SUS OF FINANCIAL, INSURANCE, ESTATE INDUSTRIES ND RELATED INSTITUTIONS OMB No. 0607-0745: Approval Expires 06/30/94
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:		CB-6000
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:		
1–800–233–6136		
Please read the accompanying instructions before answering the questions.		
Census use		
YOUR RESPONSE IS REQUIRED BY LAW	J. Title 13. United State	ase correct any errors in name, address, and ZIP Code.)
this questionnaire to answer the questions a <b>IS CONFIDENTIAL</b> . It may be seen only by retained in respondents' files are immune fr	and return the report to census Bureau emplo om legal process.	b the Census Bureau. By the same law, YOUR CENSUS REPORT yees and may be used only for statistical purposes. Further, copies
If this questionnaire does not seem to apply should fulfill your reporting requirements an	to your business, comp nd will reduce follow-up	blete it to the extent possible and explain in REMARKS section – this correspondence.
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number s label the same as the one used for this esta on its latest 1992 Employer's Quarterly Fed Return, Treasury Form 941?	shown in the ablishment	HOW TO     Dollar figures should be rounded to thousands of dollars.     Mil-     Thou-     Dol-       REPORT     Example:     If a figure     (000)     (000)     (000)       DOLLAR     is \$1,125,628.79 • Preferred     1     125     629
094 1 🗌 Yes 2 🗌 No – Report curren	t El No. below	Item 4. DOLLAR VOLUME OF Bil. Mil. Thou. Dol. REVENUE 010
(9 digits) Item 2. PHYSICAL LOCATION		Revenue in 1992
<ul> <li>a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)</li> </ul>	the same as and rural route	Item 5.     PAYROLL     Mil.     Thou.     Dol.       Payroll in 1992, BEFORE DEDUCTIONS     030     1     1
093 1 🗌 Yes 2 🗌 No – Report physic	al location below	a. Annual
Number and street		
City, town, village, etc. State	e ZIP Code	b. First quarter (January-March) Number
b. Is this establishment physically located boundaries of the city, town, village, etc	?	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)
095 1 ☐ Yes 2 ☐ No 3 ☐ No legal boundaries	4 🔲 Do not know	Item 7. LEGAL FORM OF ORGANIZATION
c. In what type of municipality is this estal physically located?	blishment	Mark (X) the <b>ONE</b> box which best describes this establishment during 1992.
096 1 ☐ City, village, or borough 2 ☐ Town or township		003 1 🗌 Individual proprietorship 2 🔲 Partnership
3 🗌 Other – Specify		3 Cooperative
4 🗌 Do not know		5 Government – <i>Specify</i> 0 Corporation (Do not mark if cooperative)
d. In what county is this establishment phy	sically located?	9 🗌 Other – <i>Specify</i>
Item 3. OPERATIONAL STATUS a. How many months during 1992 was this establishment actively operated?	Number of months	
<ul> <li>b. Which of the following best describes th status at the end of 1992? Mark (X) only C</li> </ul>	<b>is establishment's</b> DNE box.	
Note: Complete the remainder of this report operated) even if the establishment ceased o	(for the period	
001 1 ☐ In operation 2 ☐ Temporarily or seasonally inactive 3 ☐ Ceased operation - <i>Give date at</i> 4 ☐ Sold or leased to another operation or placed into conservatorship of receivership. <i>Give date at right A</i> enter name, etc., below	right	CONTINUE ON PAGE 2
Name of new owner or operator		
Number and street		
City State	e ZIP Code	

PENALTY FOR FAILURE TO REPORT

<b>Item 8.</b> KIND OF BUSINESS OR ACTIVITY <b>a.</b> Mark (X) the <b>ONE</b> box which best describes the		Item 9a. SOURCES OF REVENUE							
PRINCIPAL kind of business of this establishmen in 1992.	t	(To be completed by banks and other financial institutions except credit unions.)							
070 Commercial bank	001	Report source of revenue whole percent of total re FIGURES on page 1 and HO NOT combine data for tw	W TO	s. (See REPOR	HOW TO RT PERC	<b>figure o</b> O REPOI CENTS be	r as a RT DOLL elow) D	LAR o	
Trust company (accepting deposits) 🗌 6020	02	<b>Note</b> – All entries are to be made in accordance with Generally Accepted Accounting Principles (GAAP). If Regulatory Accounting Principles (RAP) are used for any entries, please make a note in the REMARKS section. For definitions see page 4, Special Instructions.							
Savings and loan association $\ldots$ $\Box$ 6030	Complete all items except 9b								
Savings bank	002	If figure is 3	8.76	/ of		т <u>т</u> ,	<b>.</b>	Per-	
Private bank 6029	001	HOW TO REPORT PERCENTS • Report with	ie:			∣ Thou.	Dol.	cent 39	
Credit union 6060	01 – Complete	Not accept				1		38.76	
	all items except 9a	Sources of revenue	Cen- sus			ES are a ollars OR			
Federal Reserve bank or branch . 🗌 6017	01		use	Bil.	Mil.	   Thou.	Dol.	Per- cent	
Farm Credit Bank, Farm Credit Association, or any other entity		1. Interest income	850	851				852	
of the federally-sponsored Farm Credit System	13	(Note – Investment interest should be reported on line 2)				l l			
Other federally-sponsored credit agency (primarily engaged in		<b>a.</b> New and used auto loans	099		 	 			
gūaranteeing, insuring, or making Ioans) – <i>Describe</i> 6117	93	<b>b.</b> Residential real estate loans (except home equity)	091		 	   			
Branch of foreign bank	Complete all items	<ul> <li>c. Nonresidential real estate loans</li> </ul>	092		 	 			
	except 9b	<b>d.</b> Home equity loans	107						
Representative office of foreign bank	003	e. Commercial and				1			
Agreement or Edge Act corporation	201	industrial loans, except real estate	093		 	 			
Bank holding company	202	<ul> <li>f. Credit cards, overdraft credit, and related plans</li> </ul>	094		   	   			
Other kind of business – <i>Describe</i> 7777	77	<b>g.</b> Other loans to individuals	095		1	 			
	J	h. Lease financing receivables	096		1	1			
<b>b.</b> TYPE OF CHARTER	-	i. Other interest income	097						
Mark (X) the <b>ONE</b> box to indicate the highest cha authorization granted to this institution, such as	the Federal	j. TOTAL (Sum of lines 1a			 	1			
Government, a State, the District of Columbia, or authorization; or never chartered. Do not report a pending or in the process of review.	some other for charters	through 1i)	090		 	1			
860 1 🗌 Federal or national charter		<ol> <li>Net investment income (if negative, enclose in parentheses)</li> </ol>			 	l I			
2 🗌 State or D.C. charter		<b>a.</b> Gains (losses) from assets held in			 	l l			
3  Other authorization – Specify		trading accounts	121		 	 			
4 🗌 Never chartered		b. Gains (losses) on assets NOT held in trading accounts	122						
c. TYPE OF OFFICE		<b>c.</b> Other investment income (net)	123			 			
Mark (X) the <b>ONE</b> box, that best represents the p of office of this establishment in 1992. If this is a office, check the box with the higher priority usin numbers indicated as a priority ranking, i.e., che	ng the	<b>d. TOTAL</b> (Sum of lines 2a through 2c)	120		   	   			
office if branch activities also include a processir an ATM location.	ng center and	<ol> <li>Service charges on deposit accounts</li> </ol>	180		1	1			
861 1 🗌 Main office –accepting deposits		<ol> <li>Loan origination fee income</li> </ol>			1	1			
2 🗌 Branch office – accepting deposits		<ul> <li>a. Residential real estate loans</li> </ul>	081		 	 			
3 🗌 Data processing office or service cer	iter	<ul> <li>b. Nonresidential real estate loans</li> </ul>	082		1	1			
4 🗌 Other profit, cost, or responsibility c	enter	<b>c.</b> Other loans	083		 				
5 🗌 ATM location only		<b>d. TOTAL</b> (Sum of lines 4a through 4c)	080		 	 			
6 🗌 Other – <i>Specify</i>		5. Fees from consulting							
		and advisory services ITEM 9 (	150 CONTI	NUED C	N PAG	E 3			

FORM CB-6000

r							Pa	age 3
FORM CB-6000 1992 CENSUS OF AND REAL DEPOSITORY AN	EST	ANCI ATE II	AL, II NDUS		ANCE	CENSUS	Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)	
Item 9a. SOURCES OF REV					10		Item 9b. SOURCES OF REVENUE – Continued	
	Cen-			ES are a ollars OF			ESTIMATES are acceptable. Cen- Report dollars OR percents.	
Sources of revenue	sus use	Bil.	Mil.	Thou.	T	Per- cent	Sources of revenue sus use Bit Mill Thous Dol	Per- cent
<ol> <li>Other fees and commissions</li> </ol>	850	851				852	(Note – If negative,	52
<ul> <li>Loan (and line of credit) servicing fees collected after placement</li> </ul>	131		   	 	   		enclose in parentheses)                         a. Gains (losses) from trading securities     121	
<ul> <li>b. Underwriting fee income</li> </ul>	132		 	1	 		b. Gains (losses) on investments (excluding	
<ul> <li>c. Commissions and fees from securities and commodities sales</li> </ul>	133		   	   	   		trading securities)         122                               c. Other investment income         123	
<ul> <li>d. Commissions and fees from insurance sales</li> </ul>	134				1		d. Sum of lines 2a through 2c         120         1         1	
<ul> <li>Other fees and commissions (including ATM charges, etc.)</li> </ul>	135						3. Service charges on deposit accounts 180	
f. TOTAL (Sum of lines 6a through 6e)	130			   	   		4. Loan origination fee                   income                   a. Residential real estate	
<ol> <li>Income from fidiculary (trust) activities</li> </ol>	190		   		   		b. Nonresidential real	
<ol> <li>Leasing revenue (except from finance</li> </ol>			 	 	 		estate loans 082	
and capital leases) <b>9.</b> Other revenue – <i>Specify</i>	800				+		c. Other loans 083 d. Sum of lines 4a	
	890		i I	1	i I		through 4c   080     5. Other fees and   100	
10. TOTAL (Should equal			1	1	1		commissions 130 6. Other revenue – <i>Specify</i>	
item 4 if reporting in dollars)	990		l I		l I	100%		
Report source of revenue e whole percent of total reve FIGURES on page 1 and HOW NOT combine data for two Note – All entries are to be m Accepted Accounting Principle Principles (RAP) are used for , REMARKS section. For definit	or me or me ade in es (GA any er ions s	(See Hi REPORT ore line n accord AAP). If ntries, p see page	OW TO PERCE es. dance w Regulat lease n	vith Gen tory Acc	erally ounting	пе	Item 10.       SPECIAL INQUIRIES         A.       CAPITAL LEASES         1.       Did this establishment lease assets to others under a ("direct financing," "leveraged," or "sales-       862       Yes	00%
and the NCUA Yearend Call R	eport.	• • •						Dol.
Sources of revenue	Cen-	ES Re	STIMAT	ES are a ollars OF	acceptal R percer	ole. nts.	2. Report the acquisition cost of all 863 assets owned by this establishment that were leased to others beginning	
	use	Bil.	Mil.	Thou.	Dol.	Per- cent	in 1992 under a capital lease	
<ol> <li>Interest income         (Note –Investment interest should be reported on line 2)     </li> </ol>	850	851			   	852	the inception of the lease, of all	
a. Unsecured loans	098		1	I	1		B. EXPORTED SERVICES	
<b>b.</b> New and used auto loans	099		 				NOTE – Include services performed for a customer, client, or account (individual, government, business establishment, etc.) located outside the United States	
<ul> <li>c. First mortgage</li> <li>residential real</li> <li>estate loans</li> </ul>	101		   		   		(i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Services performed for unaffiliated and affiliated foreign firms (i.e., foreign parent firms, subsidiaries, branches, etc.) are included. Services performed for domestic	
d. First mortgage nonresidential real estate loans	102		   	   	   		<ul> <li>subsidiaries of foreign firms are excluded.</li> <li>1. Did the revenue reported in item 4 include any amounts received for exported services?</li> </ul>	
e. Home equity loans	107		1	1	1		Mil. <sup> </sup> Thou. <sup> </sup>	Dol.
<ul> <li>f. Other residential real estate loans</li> </ul>	103			1	1		970 1 □ Yes – Amount ————————————————————————————————————	
g. Other nonresidential real estate loans	104		 				2. Did this establishment receive any amounts for	
<b>h.</b> Other loans to members	105				 		exported services which were NOT included in item 4?	<u> </u>
i. Other interest income	106		 		 		972 1 🗌 Yes – Describe in Mil. <sup>†</sup> Thou. <sup>†</sup> [ REMARKS and 973   report amount	Dol.
j. Sum of lines 1a through 1i	090			1	 		hère →→→→ 2 □ No	

CONTINUE ON PAGE 4

	m 11. OWNERSHIP						SPECIAL INSTRUCTIONS
а	Is the FIRST DIGIT in the address lab	of yo el imn	ur Census Fil nediately afte	e Numb r "CFN"	er (shown ) a zero?	-	See also the general instructions accompanying this form) Sources of Revenue for Banks and Other Financial Institutions
	1 🗌 Yes – <i>Col</i> 2 🗌 No – <i>Skip</i>	-				1. Intere incon	Except Credit Unions est Income – Report only interest income. Report net investment me on line 2. Report fee income (except loan origination fee income)
b	<ul> <li>Is this company owned or controlled by</li> </ul>		name, address ng or controllin		Number of the iny	on lir 1a.	ne 5 or 6. New and used auto loans – Report all interest income, after placement, for loans to finance the <b>purchase of</b> , or secured by, new or used automobiles.
	another company? 097 1 $\square$ Yes $\longrightarrow$ 2 $\square$ No	EL No	. (9 digits)			1b., 1c.	<ul> <li>Real estate loans – Report all interest income, after placement, for loans secured by real estate – separately for residential (1b) and nonresidential (1c). Include real estate development and construction loans and second or junior loans secured by real estate. Report home equity loans on line 1d. Report interest income from mortgage backed securities on line 2c.</li> </ul>
	. Does this company		-	and El	Number of the	-	Report mortgage loan servicing fees and loan administration fees on line 6a. Report real estate escrow fees on line 6e.
Ŀ	own or control any other company or companies?	owne	d or controlled	compan	y	1d.	Home equity loans – Report all interest income for "home equity loans," regardless of the use of the funds. Include revolving credit lines and plans secured by home equity. Report second or junior loans secured by real estate, not considered as "home equity," on line 1b. or line 1c.
	098 1 □ Yes → 2 □ No						Commercial and industrial loans – Report all interest income, after placement, for loans to businesses and industrial
	2 🛄 NO	EI No	. (9 digits)				corporations. Report real estate development and construction loans on line 1b or 1c. Report all interest from mortgage-backed securities on line 2c. Report on line 1i
d	I. How many establi the Employer Iden in the label (or as THE END of 1992 If more than one, pr	ntifica correc ?	tion Number s ted in item 1	hown AT	Number 079	-	interest income from loans to finance agricultural production and other loans to farmers, loans to depository institutions, banker's acceptances, commercial paper, loans to foreign governments and official institutions, and obligations (other than securities and leases) of states and political subdivisions.
	other information in headquarters locatio locations. If more ro	dicate	d below for eac uld be first, foll needed, contin	h establ owed by ue in the	ishment. The all other same	1f.	Credit cards and related plans – Include interest income from overdraft check credit plans and revolving credit plans. Report fees for bank credit cards on line 6a.
	format in REMARKS Estimates are acc		-			1g.	Other loans to individuals – Report all other interest income from nonmortgage loans to individuals for household, family, and personal expenditures. Include "installment loans."
	Name			081	1il. Thou. Dol.	1h.	Lease financing receivable – Report all interest income from sales-type, full payout, levered, leveraged, capital, and finance leases net of unearned income. Report all income from operating leases on line 8.
	Number and street		Anr	enue wal <sup>082</sup>		1i.	Other interest income – Report interest income, after
1				roll			placement, for all other types of loans and credit.
- F	ind-of-business description			Paid em eriod ind	ployees for pay Iuding March 12	inves Inclue	nvestment income – Report income only from assets held for stment purposes (if negative, enclose in parentheses). de both interest and dividend income. Report fee income pt loan origination fee income) on line 5 or 6.
			Ce	nsus <sup>088</sup>			Sources of Revenue for Credit Unions
	Name		19	-	1il. Thou. Dol.	Yearend	For the definitions of these categories also refer to NCUA's I Call Report.
	Number and street			081 enue			
2	City S	State	ZIP Code pay	Annual <sup>082</sup> I I payroll I I Paid employees for pay			Unsecured loans – Report all interest income, after placement, for loans not secured by collateral or other security. Include signature, co-maker, co-signer, and guarantor loans; and unsecured lines of credit, unsecured credit card loans, etc.
	Kind-of-business desc	criptior	n p 083	eriod ind	luding March 12		Also include "fees" (an interest charge) on tax-refund- anticipation loans.
			Ce	nsus <sup>088</sup>		1Ь.	New and used auto loans – Report all interest income, after placement, for loans to finance the <b>purchase of</b> , or secured by, new or used automobiles.
RE	MARKS – Please use be essenti		us	e planatio	ns that may	1c., 1d.	First mortgage real estate loans – Report all interest income, after placement, for loans to purchase or refinance residential real estate secured by a first lien on the property on line 1c. Report all interest income, after placement, for loans to purchase or refinance commercial, industrial, or agricultural real estate secured by a first lien on the property on line 1d. Report interest income from mortgage-backed securities on line 2c. Report loan origination fees or points on line 4. Report loan servicing fees, escrow fees, and loan administration fees on line 5. Report loan discount fee income on line 6.
						1e.	Home equity loans – Report all interest income for "home equity loans," regardless of the use of the funds. Include revolving credit lines and plans secured by home equity. Report second or junior loans secured by real estate, not considered as "home equity," on line 1f or line 1g.
						1f.	Other residential real estate loans – Report all interest income, after placement, for loans for any purpose (other than those listed above) secured by an interest (i.e., first or junior liens) in residential real estate (i.e., residential real estate development and construction loans, and second and junior mortgages).
lte			his report is su ared in accorda			1g.	Other nonresidential real estate loans – Report all interest income, after placement, for loans for any purpose (other than
by <sup>.</sup>	riod covered this report		TO:	Mo. Year	-	those listed above) secured by an interest (i.e., first or junior liens) in nonresidential real estate (i.e., nonresidential real estate development and construction loans, and second and	
ivar	Name of person to contact regarding this report – F				t or type	1h.	junior mortgages). Other loans to members – Report all interest income, after
Title							placement, for loans not included above (i.e., share-secured loans, collateral loans, commercial and agricultural loans <b>not</b> secured by farmland or real estate, etc.).
	ephone	code	Number		Extension	1i.	Other interest income – Include interest from loans to credit union non-members. Report interest from loans to other depository institutions (i.e., credit unions, banks, etc.) or bank
_	nature of authorized p	son		Date	5		holding companies on line 2c. Report interest from lease financing receivables net of unearned income on line 6.
JRIV	1 CB-6000		F	FASE	PHOTOCOPY TH	IS FORM	FOR YOUR RECORDS

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

		U.S. DEPARTMENT BUREAU OF THE CENS FORM CB-6200	OF COMME SUS	A	ND REAL	US OF FINANCIAL, INSURANCE, ESTATE INDUSTRIES COMMODITY BROKERS AND SERVICES OMB No. 0607-0745: Approval Expires	06/30/94
		E: FEBRUARY	16 100	2			00/30/94
lf ye this Cen be s File to t	rou have s report, j nsus Bure sure to re e Number	questions about c please call or write au. In any commu afer to the 11-digi (CFN) printed in Please return you	ompleting e the unication, t Census the label	3	<b>[</b>	CB-6200	
	BURI 1201	EAU OF THE CENS East 10th Street rsonville, IN 4713					
Toll eas	Il-free ass stern time	istance, 8:00 a.m. , Monday through 1–800–233–6136	to 8:00 p.n n Friday:	n.,			
	instru	e read the accom actions before ans uestions.	oanying wering				
		Census use					
					(0)		
	S CONFI	SPONSE IS REQ onnaire to answe DENTIAL. It may respondents' file	be seen or	nly by Cer	tle 13, United State return the report to nsus Bureau emplo	ise correct any errors in name, address, and ZIP Code.) is Code, requires businesses and other organizations that receive the Census Bureau. By the same law, <b>YOUR CENSUS REPOR</b> yees and may be used only for statistical purposes. Further, copi	Г ies
lf sł	this que hould ful	stionnaire does no fill vour reporting	t seem to a requiremer	apply to yo ts and wi	our business, comp ill reduce follow-up	plete it to the extent possible and explain in REMARKS section – the correspondence.	his
ls the label	e Employ the sam	LOYER IDENTIFIC /er Identification le as the one use 1992 Employer's	n (EI) Num ed for this	ber shov establis	hment	HOW TO       Dollar figures should be rounded       Mil-       Thou-         to thousands of dollars.       lions       sands         Example:       If a figure       (000)       (000)         DOLLAR       is \$1,125,628.79 • Preferred       1       126	Dol- lars (000)
		sury Form 941?	Quarterry	Federal	Tax	FIGURES report Acceptable 1 125	629
0	94 1	Yes 2 🗌 No	– Report c	urrent El l	No. below	Item 4. DOLLAR VOLUME OF BII. Mil. Thou.	Dol.
		(9	digits)			REVENUE 010	1
ltem	2. PHY	SICAL LOCATION				Revenue in 1992	
th ad	dresses a	ablishment's physical local sector of the se	<b>label?</b> (P.C ocations)	). box and	same as I rural route cation below	Item 5.     PAYROLL     Mil.     Thou.       (Include compensation paid to brokers considered by the IRS on Form 941 as employees of this establishment)     030     I       Payroll in 1992, BEFORE DEDUCTIONS     I     I	Dol.     
N	lumber a	nd street				a. Annual	l I
Ci	Sity, town	, village, etc.		State	ZIP Code	031 b. First quarter (January–March)	   
b. Is	this est	ablishment phys	ically loca	ated insid	de the legal	Item 6. EMPLOYMENT Numbe	r
0:	95 1	s of the city, too Yes 2 No 3	B 🗌 No leg bounda	al 4 aries	Do not know	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees; exclude independent contractors)	
ph	hysically	located?				Item 7. LEGAL FORM OF ORGANIZATION	
0	2	] City, village, or b ] Town or townsh ] Other – <i>Specify</i> _	ip -			Mark (X) the <b>ONE</b> box which best describes this establishment during 1992.	
d. In		Do not know	ablishmen	t physica	ally located?	<ul> <li><sup>003</sup> 1 Individual proprietorship</li> <li>2 Partnership</li> <li>5 Government - Specify</li> </ul>	
-	2 00-		10	N	Jumber of months	0 Corporation	
a. Ho	ow many	RATIONAL STATU months during lishment activel	1992 was	00:		9 🗌 Other – <i>Specify</i>	
		he following be he end of 1992?					
No	ote: Com	plete the remaind ven if the establis	er of this re	eport (for t	the period		
	2 [3 [4 [4	In operation         Temporarily or s         Ceased operation         Sold or leased to         Give date at right         etc., below	n – Give da o another o ot AND ente	nte at righ perator –		CONTINUE ON PAGE 2	
	ame of n	ew owner or oper	rator				
N	lumber a	nd street					
Ci	ity			State	ZIP Code		

PENALTY FOR FAILURE TO REPORT

							-								Page 2
Item 8. KIND OF BUSINE	SS OF	R ACTIV	ΊΤΥ				Item	9. 8	SOURCES OF RE	VENU	1		EC ana a	aaantak	
Mark (X) the <b>ONE</b> box whi PRINCIPAL kind of busines										Cen-	R	eport do	ES are a ollars OF	cceptar percer	its.
in 1992.				070			50	ources	s of revenue	sus use	Bil.	Mil.	Thou.	Dol.	Per- cent
Full service securities brok					621					-		1	1	<u> </u>	cent
Discount securities broker/ Investment banker					621		in	icome				1	1	I	
Securities floor trader					621		İn	terest	Report t income from			1	1	1	
Oil/gas lease and royalties					621			ivestn n line	nent accounts 10)			1	1	1	
Mineral lease and royalties Commodity contract broke					621		a.		capital gains			i i	i i	I	
Commodity contract floor					622			inve	ses) on stment			1	1	l	
Commodity contract introd					622				ounts	281		 	1	 	
Commodity futures commi	v/sell	physica	l produ	cts) –				inco	er investment me (net)	282		<u>i</u>	<u> </u>		
Specify principal product					500	000		and		280		 	 	 	
							6. Fe ai	ees fro nd ad	om consulting visory services	150		 	 	I I	
							7. M	largin	interest	250			1	 	
Commodity contract pool of	operato	or			679	903	co	-	ssions	410		 	 	 	
Certified financial planner Financial planner (not certi					628 628				tate sales ssions	560				 	
Investment advisory servic					628		<b>10.</b> 0	ther i	nterest income	260		1	1	l	
Security exchange Commodity exchange					623			o no no i	ssions from			1	1	 	
Security/commodity excha clearinghouse					628	901	sa	ale of	other nent company			1	1	l	
Security transfer agent					628	902	se	ecuriti	es	270		+	1	 	
Insurance agent/broker Real estate agent/broker –					641			ther r pecify	evenue – ⁄			1	1	1	
Loan broker					616							1	1	1 	
Mortgage broker					616					890		1	1	1	
Management consultant . Other kind of business or a							13. T	ΟΤΑΙ	. (Should equal item 4 if			1	1	1	
									reporting in dollars)	990		1	1	 	100%
							Item	10.	SPECIAL INQUI	RIES					
							(To be	e comp	oleted by establis dities)	hment	s prima	rily sellir	ng securi	ties	
Item 9. SOURCES OF RI							A. Wa	as this	s establishment	owne	d and	operate	d by a c	ompany	/
Report source of revenu	e eith	er as a					Co	ommis	ed as a broker/ ssion and/or Co sell securities/	mmod	ity Fut	ures Tra	nding Co	ommissi	ange ion to
whole percent of total r DOLLAR FIGURES on page	1 and	T WOH I	O REPO	ORT PER	CENTS			-	_	comm	ountes	auring	19921		
below) Do NOT combine	data f	or two	or mo	re lines	-		880		└─ Yes □ No						
HOW TO		<b>%</b> of	Mil.	l   Thou.	Dol.	Per- cent			the percentage of					nole per	cent
REPORT PERCENTS • Report w		ercents		1		39	sec	curitie	ment's gross sal s/commodities co	es of e onducte	quity ed throu	gh	881		
Not accep	otable -	1			┝	38.76			wing services. d States exchang	165					
6 f	Cen-			ES are a ollars OF			I "			,33			882		
Sources of revenue	sus use	Bil.	Mil.	Thou.	Dol.	Per- cent	2.	Forei	gn exchanges				883		
1. Securities and	850	851		1		852	з.	Unite	ed States – OTC						
commodities commissions			 	l l			4.	Forei	gn – OTC				884		
a. Securities	211		 	<u> </u>			5.	тот	AL (Sum of lines should total 1		ugh 4			100%	
b. Commodities	212								ED SERVICES						
<ul> <li>c. Sum of lines 1a and 1b</li> </ul>	210		1	1			(in	dividu	Include services al, government, l ed States (i.e., ou	busine	ss estab	lishmen	t, etc.) lo	cated ou	ıtside
2. Net gains (losses) in			I	I	l		Co	mmor	nwealth Territorie	s, or L	J.S. poss	sessions	). Service	es perfor	med
trading accounts in securities			1				su	bsidia	ries, branches, et	c.) are	include	d. Servic	es perfo	rmed for	r ſ
a. Interest income	221			1 				Did t	he revenue repo	orted i	in item	4		1	1
<ul> <li>b. All other gains (losses)</li> </ul>	229		 	1	1			expo	rted services?			>	Mil. 971	Thou. 	Dol.
c. Sum of lines 2a and 2b	220		1		1				2 🗌 No					 	 
<ol> <li>Net gains (losses) in trading accounts in</li> </ol>			1				<ol> <li>Did this establishment receive any amounts for exported services which were NOT included in item 4?</li> </ol>								
commodities 230						972	1 🗌 Yes – Desc	ribe in	,		Mil. 973	Thou.	Dol.		
4. Gains (losses) from				I.	1				and	ARKS report unt he	ro -		913	l	l
underwriting and selling groups of			1	I I	1				2 🗌 No	инс пе				l	1
securities	240	1			1	1								I	1

Securities FORM CB-6200

			Pag							
AND RE	U.S. DEPARTME BUR OF FINANCIAL, INSU AL ESTATE INDUSTRIE OMMODITY BROKERS AND	RANCE, ES	CE SE Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)							
	CONTROL, AND LOCATIONS C		Item 11. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION – Continued							
a. Is the FIRST DIGIT in the address labe	of your Census File Number el immediately after "CFN") a	r (shown a zero?	d. How many establishments operated under the Employer Identification Number shown in the label (or as corrected in item 1) AT							
1	mplete this item to item 12		THE END of 1992? If more than one, provide the <b>physical location</b> address and other information indicated below for each establishment. The headquarters location should be first, followed by all other							
b. Is this company owned or	Enter name, address, and El N owning or controlling compan		locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper. Estimates are acceptable if book figures are not available.							
controlled by another company?			Name         1992         Mil.         Thou.         Do           081 </th							
			Number and street         Revenue         I           City         State         ZIP Code         payroll         I							
097 1 □ Yes → 2 □ No			1         Paid employees for pay period including March 12           Kind-of-business description         Paid employees for pay period including March 12							
	El No. (9 digits)		083 Census <sup>088</sup>							
c. Does this company own or control any other company or	Enter name, address, and El N owned or controlled company	umber of the	Use           Name         1992         Mil. 1 Thou. 1 Do							
companies?			Number and street         Revenue         I           Accurate         082         I							
098 1 🗌 Yes —>			City         State         ZIP Code         Annual payroll         I           2         Paid employees for pay							
2 🗌 No			Kind-of-business description period including March 12							
	El No. (9 digits)		Census <sup>088</sup> use							
Item 12. CERTIFICATIO	ON - This report is substantially	v accurate and bac	as been prepared in accordance with instructions.							
Period covered by this report FROM	Mo Year		Name of person to contact regarding this report – <i>Print or type</i>							
Telephone Area co	ode Number	Extension	Title							
Signature of authorized	person		Date							

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM CB-6400	AND REAL	GUS OF FINANCIAL, INSUR ESTATE INDUSTRIES GENTS, BROKERS, AND SERVICES OMB No. 0607-0745: Apj					
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136 Please read the accompanying		CI	8-6400				
instructions before answering the questions.							
Census use							
	(Plea	ase correct any errors in name, address, and ZIP C	ode.)				
this questionnaire to answer the questions a <b>IS CONFIDENTIAL</b> . It may be seen only by retained in respondents' files are immune for	and return the report to / Census Bureau emplo rom legal process. to your business, comp	es Code, requires businesses and other organizatio o the Census Bureau. By the same law, <b>YOUR CEI</b> byees and may be used only for statistical purpose plete it to the extent possible and explain in REMAR o correspondence	<b>NSUS REPORT</b> s. Further, copies				
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number s label the same as the one used for this esta on its latest 1992 Employer's Quarterly Fed Return, Treasury Form 941?	े shown in the ablishment	HOW TO REPORT DOLLAR FIGURES DOLLAR FIGURES DOLLAR FIGURES DOLLAR FIGURES DOLLAR FIGURES DOLLAR FIGURES	Mil- lions         Thou- sands         Dol- lars           (000)         (000)         (000)           1         126         -           1         125         629				
094 1 🗌 Yes 2 🗌 No – Report curren	t El No. below	Item 4. DOLLAR VOLUME OF REVENUE					
(9 digits)		See instruction sheet for general description. In a Include revenue earned from:	addition –				
<ul> <li>a. Is this establishment's physical location the address shown in the label? (P.O. box addresses are not physical locations)</li> <li>093 1 Yes 2 No - Report physical Number and street</li> </ul>	and rural route	<ul> <li>Commissions from sales of insurance, annuity real estate, and securities</li> <li>Fees from rate-making, claims adjusting and ap and insurance inspection services</li> <li>Rents of property owned by this establishment</li> <li>Other operating revenue of this establishment</li> </ul>	opraisal,				
City, town, village, etc. Stat	e ZIP Code		Mil.   Thou.   Dol.				
b. Is this establishment physically located	inside the legal	Revenue in 1992					
boundaries of the city, town, village, etc 095 1 Yes 2 No 3 No legal	4 🗌 Do not know	Item 5. PAYROLL	Mil.   Thou.   Dol.				
c. In what type of municipality is this estal physically located?  096 1 City, village, or borough 2 Town or township		Payroll in 1992, BEFORE DEDUCTIONS Do not include commissions paid to agents and brokers unless reported on IRS Form 941. a. Annual					
$3 \square$ Other – Specify			031				
4 🗌 Do not know		b. First quarter (January–March)					
d. In what county is this establishment phy	sically located?	Item 6. EMPLOYMENT	Number				
<ul> <li>Item 3. OPERATIONAL STATUS</li> <li>a. How many months during 1992 was this establishment actively operated?</li> <li>b. Which of the following best describes th status at the end of 1992? Mark (X) only (X)</li> </ul>	ONE box.	Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees) Include sales agents, brokers, and other personnel if they were reported on the IRS Form 941 for the El Number in label; exclude independent contractors.	032				
<b>Note:</b> Complete the remainder of this report operated) even if the establishment ceased o	(for the period peration during 1992.	Item 7. LEGAL FORM OF ORGANIZATION					
<ul> <li>001 1 ☐ In operation</li> <li>2 ☐ Temporarily or seasonally inacti</li> <li>3 ☐ Ceased operation - Give date at</li> <li>4 ☐ Sold or leased to another operat</li> <li>Give date at right AND enter nate</li> <li>etc., below</li> </ul>	right cor –	during 1992.					
Name of new owner or operator		5 🗌 Government – <i>Specify</i>					
Number and street		0 🗌 Corporation					
City Stat	e ZIP Code	9 🗌 Other – Specify					

PENALTY FOR FAILURE TO REPORT

Item 8. KIND OF BUSINE									. SPECIAL						
a. Mark (X) the ONE box w PRINCIPAL kind of busin in 1992.					<b>.</b>		a.	work		this	nsed insurance establishmen				
Insurance agent					6	41111			☐ Yes						
Insurance broker Real estate agent – reside						41112 53111		2	!∐ No – 5	Skip t	to item 10d				
Pension, health, and well						41191	ь.				of licensed agent				
Pension, health, and wel	fare fu	und adm	ninistra	tor .	6	37131		(incluation agent)	ding emplo /brokers) w	yees orkir	and independe out of this est	nt contra	ctor ent duri	ing	
Insurance appraiser						41192		the w	eek of Marc	ch 12	, 1992.			Numbe	r
Insurance claims process Insurance advisory servi	-				_	41193 41194							893	Numbe	•
Insurance rate-making or						41194		(1) Fu	ull time						
Financial planner (certifie	ed or	not certi	ified) .			20000		( <b>3</b> ) B	art time				894		
Title abstract office						54101							895		
Other kind of business o	r activ	/ity – De	scribe			77777		(3) T	OTAL						
							c.		many of th m 6 (Empl		agents are inc	luded	896		
<b>b.</b> TYPE OF OPERATION (To selling insurance)	o be c	omplete	ed by e	stablishi	ments				-		o item 5a (Ann	ual nave	all) inc	Juda	
Mark (X) the <b>ONE</b> box w	hich l	best des	cribes i	the oper	ational		u.	comp	ensation p	paid	by this establi	ishment	during	g 1992	
method by which this bu						92.		NOT	classified ·		tractor agent/ RS Form 941 a				
855 1 Independent carrier's poli	agen	t/broker	(estab	lishmen lently ov	t sells a	ny		this f	_	_					
2  Exclusive ag			•					897	1 ∟ Yes	es	rovide the comp stablishment to	independ	i paid b dent co	y this ntractor	
one carrier's	polic	ies and	is inde	pendent	ly owne	ed)				ag	gent/brokers in ´	1992		1	
3 Direct writer policies and	(esta	blishme	nt sells	only or	ne carrie	er′s			2 🗌 No				Mil. 898	Thou.	Dol.
Item 9. SOURCES OF RE			Porate	a by the	Surrel	,								I	L
Report source of revenue	eith	er as a	dollar		or as a									1	1
whole percent of total re FIGURES on page 1 and HC NOT combine data for tw	W TC	REPOR	T PERC	CENTS Ł	pelow)	)o	lte	em 11.	. OWNERS	SHIP	, CONTROL, ANI	D LOCAT	IONS C	F OPER	ATION
If figure is 3				1	1	Per-	a.	is the	FIRST DIG	GIT d	of your Census	File Nu	mber (	shown	
HOW TO REPORT		<b>70</b> 01	Mil.	Thou.	Dol.	cent		in the	e address l	abel	immediately a	after "C	FN") a	zero?	
PERCENTS • Report wh	-	ercents-			┝	39			1 🗌 Yes –	Com	plete this item				
Not accept	table -				<u>↓                                    </u>	38.76			2 🗌 No – S	Skip t	to item 12				
	Cen-			ES are a ollars Of			ь.	ls this	s company	E	Enter name, add	lress, and	d El Nu	mber of	the
Sources of revenue	sus use	Bil.	Mil.	Thou.	Dol.	Per-		owne			owning or contro				
						cent		anoth	er compan	y?					
<ol> <li>Insurance and annuity commissions</li> </ol>	850	851	1	1	1	852		(Note insura	<ul> <li>Independence agents/</li> </ul>	ent					
a. Life insurance			I	Ì	Í.			broker	rs should no e contractua	t					
commissions	411		I	I	1			agreer	ments with						
b. Accident and health insurance commissions	412			1				maura							
c. Property and casualty	412		1 	1	1			007	1 🗌 Yes — 2 🗌 No	→					
insurance commissions	413		1	1	1				2 1110	E	El No. (9 digits)				
d. Annuity commissions	414			1	1		c.		this compa or control a		Enter name, add owned or contro			mber of	the
<ul> <li>e. Other insurance commissions</li> </ul>	419		1	1	1			other	company o			med com	ipany		
f. Sum of lines 1a			<u> </u>	1	1			comp	anies?						
through 1e	410		I	i	i										
2. Insurance claims adjusting/appraisal fees	420			1	1				1 🗌 Yes — 2 🗌 No	→					
<b>3.</b> Fees earned managing			I	1	1				z 🗀 No						
pension, health, and welfare funds	430		1	1	1										
4. Fees from consulting and		1		1	1	1					El No. (9 digits)			Num	ber
advisory services	151		1	1			d.	the E	mployer ld	lenti	hments operat ification Numb	oer shov		)79	ibei
a. Insurance	151		 	1	1				e label (or a END of 199		orrected in ite	m 1) AT	_		
b. All other fees from consulting and advisory	450		I	i	Ì			If mor	e than one,	, pro	vide the <b>physic</b>	al locati	i <b>on</b> add	Iress an	d
services	159			1	+			headc	uarters loca	atior	icated below for should be first,	, followe	d by all	other	те
c. Sum of lines 4a and 4b	150		1	I.	1			locatio forma	ons. If more It in REMAF	e roo ₹KS d	m is needed, co or on a separate	ntinue in sheet of	the sa paper.	me	
5. Revenue from all other			i I	1	1					cce	<b>ptable</b> if book fi			-	1
insurance-related activities 6. Securities commissions	440 200			+				Name	•			1992	Mil. 081	Thou.	Dol.
<ol> <li>Securities commissions</li> <li>Real estate sales</li> </ol>	200			1	1			Numb	per and stre	et		Revenue	301	I	I
commissions	560		I 									Annual	082	1	1
8. Gross rents from real properties owned by this				·			1	City		Sta	ate ZIP Code	payroll			1
establishment	500			1			'	Kind-	of-business	dese	ription	Paid period	employ I includ	vees for ing Mai	pay ch 12
<b>9.</b> Other revenue – <i>Specify</i>				I.	1							083			
	890		 	1	1								000		
10. TOTAL (Should equal			 I	I		1						Census use	008		
item 4 if reporting	990	1	1	1	1	100%	-	1	1	TEM	11 CONTINUED		F 3		

FORM CB-6400

CONTINUE ON PAGE 3

Page 2

															Page 3
FOR	Α	ND REAL	FINANCIA	NL, IN DUST	SURAN FRIES	NCE,	MMERCE HE CENSUS	Cl	nter the 11-digit ENSUS FILE NUMB shown on this rep see label on page 1	oort					
			rs, broker							· /					
lte	m 11. OWNE Name	RSHIP, CON	TROL, AND L	.OCATI 1992		OPER Thou		Con	tinued Name			1992	Mil.	<sup>†</sup> Thou	. Dol.
	Number and st	reet		Revenue	081	 			Number and street			Revenue	081	 	
				Annual	082	1	1			Charte		Annual	082	1	
2	City	State	ZIP Code	payroll Paic	d employ d includ	yees fo	or pay_	4	City	State	ZIP Code	payroll Paid	employ d includ	vees fo	r pay_
	Kind-of-busines	ss descriptio		perio 083	d includ	ling Ma	arch 12	-	Kind-of-business de	escriptio	on	perio 083	d includ	ing Ma	irch 12
				Censu: use	s <sup>088</sup>							Census use	088		
$\vdash$	Name			1992		Thou	ı. Dol.		Name			1992	Mil.	Thou	. Dol.
	Number and st	reet		Revenue			1		Number and street			Revenue			
	City	State	ZIP Code	Annual bayroll	082	1	l I		City	State	ZIP Code	Annual payroll	082	l I	l l
3	Kind-of-busines	ss descriptio	n	Paic perio	d employ	yees fo ling Ma	or pay arch 12	5	Kind-of-business de	escriptio		Paid perio	employ	vees fo ing Ma	r pay arch 12
				083						Joonphi		083			
			i I	Censu: use	s <sup>088</sup>							Census use	088		
RE	MARKS – Plea	ase use this :			nations	that m	ay be es	sent	ial in understanding	your re	eported data.				
lte	m 12. CERTII	FICATION -	This report is	subst	antially a	accurat	te and ha	is be	een prepared in acco	ordance	with instruc	tions.			
Pe	riod covered this report	-		ar TC	Mc				me of person to con				Print or	type	
<u> </u>	-	Area code	Number			xtensic	on	Tit	le						
	gnature of autho	orized perso	 n					1				Date	,		

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U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	<b>AND REAL</b>	SUS OF FINANCIAL, INSUR ESTATE INDUSTRIES US REAL ESTATE OMB No. 0607-0745: Ap	-
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1–800–233–6136 Please read the accompanying		c	B-6503
	N. Title 13, United State	ase correct any errors in name, address, and ZIP C as Code, requires businesses and other organization	ons that receive
IS CONFIDENTIAL. It may be seen only be retained in respondents' files are immune in the seen to apply the seen to apply the seen to apply the seen to apply the seen to apply the seen to apply the second s	y Census Bureau emplo from legal process. / to your business, com	b the Census Bureau. By the same law, <b>YOUR CE</b> byees and may be used only for statistical purpose plete it to the extent possible and explain in REMA	es. Further, copies
should fulfill your reporting requirements a Item 1. EMPLOYER IDENTIFICATION NUMBE Is the Employer Identification (EI) Number Iabel the same as the one used for this est on its latest 1992 Employer's Quarterly Fe Return, Treasury Form 941? 094 1 Yes 2 No - Report currer (9 digits)	R shown in the ablishment deral Tax	b correspondence.         HOW TO REPORT DOLLAR FIGURES       Dollar figures should be rounded to thousands of dollars.         Example:       If a figure is \$1,125,628.79 • Preferred report         Acceptable       Acceptable         Item 4.       DOLLAR VOLUME OF REVENUE       Bil. 010         Revenue in 1992       Dollar figures should be rounded to thousands of dollars.	Mil- lions         Thou- sands         Dol- lars           (000)         (000)         (000)           1         126         1           1         125         629           Mil.         Thou.         Dol.
Item 2. PHYSICAL LOCATION a. Is this establishment's physical location the address shown in the label? (P.O. bo addresses are not physical locations) 093 1 Yes 2 No - Report physic	x and rural route	Item 5. PAYROLL Payroll in 1992, BEFORE DEDUCTIONS a. <u>Annual</u>	Mil.         Thou.         Dol.           030   031
City, town, village, etc.       Sta         b. Is this establishment physically located boundaries of the city, town, village, et	inside the legal	b. First quarter (January–March) Item 6. EMPLOYMENT Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)	Number 032
<ul> <li>095 1 Yes 2 No 3 No legal boundaries</li> <li>c. In what type of municipality is this estate physically located?</li> <li>096 1 City, village, or borough 2 Town or township 3 Other - Specify 4 Do not know</li> <li>d. In what county is this establishment physically county is the stablishment physically county is the stablishment physical county is the stable county is the stab</li></ul>	blishment	Item 7.       LEGAL FORM OF ORGANIZATION         Mark (X) the ONE box which best describes this         during 1992.         003       1         Individual proprietorship         2       Partnership         5       Government – Specify	
Item 3. OPERATIONAL STATUS         a. How many months during 1992 was this establishment actively operated?         b. Which of the following best describes the status at the end of 1992? Mark (X) only         Note: Complete the remainder of this report operated) even if the establishment ceased of 001 1 [] In operation         2 ] Temporarily or seasonally inact         3 ] Ceased operation - Give date at         4 ] Sold or leased to another operated?         Name of new owner or operator         Number and street         City       Status	ONE box. t (for the period operation during 1992. Figures only ive Month Year t right tor – ome,	CONTINUE ON PAGE 2	
City	te ZIP Code		

PENALTY FOR FAILURE TO REPORT

Title abstract company									Page 2
This Autors of means       If Sum is 30, 70% of subject which approximate it is 30, 70% of subject which approxima	Mark (X) the <b>ONE</b> box which best describes the PRINCIPAL kind of business of this establishment in 1992.		Report source of revenue whole percent of total re FIGURES on page 1 and HC NOT combine data for tw	e eith venu W TC vo or	er as a e. (See REPOR more li	HOW TO T PERC	OREPOI	RT DOLL	LAR O
Title and trust company		_	If figure is 3	8.76		Mil.	Thou.	Dol.	Per-
Title reconvelupance company   Title search company   Title search company   Title search company   Other title office - Describe   Cemeteries   Cemeteries   Cemetery or mauseleum operation   Gest de   Cemetery subdivider and developer   Animal cemetery operation   Gest de   Mauseleum operation   Gest de   Cemetery subdivider and developer   Animal cemetery operation   Gest de   Mauseleum operation   Gest de   Mauseleum operation   Gest de   Subdividers, developers, and builders   Subdivider and preparing bein on land owned by you   Building contractor - Describe   Subdividing and preparing bein on land owned by you   Building contractor - Describe   Subdividing and preparing bein on land owned by you   Building contractor - Describe   Subdividing and preparing bein on land owned by you   Building contractor - Describe   Subdividing and preparing bein on land owned by you   Building contractor - Describe many   Subdividing and preparing bein on land owned by you   Building contractor - Describe many   Subdividing and preparing bein on land owned by you   Building contractor - Describe many   Subdividing and preparing bein on land owned by you   Building contractor - Describe many   Subdividing and preparing bein buildings   Subdividing and preparing bein buildings   Subdividing and preparing be	Title abstract company	_	REPORT PERCENTS • Report wh	nole po	ercents		, 		39
Interesting of recompany Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Commeteries Image Scores of revenue Image Scores of revenue Image Scores of revenue   Maximum Construction Image Scores of revenue Image Scores of revenue Image Scores of revenue   Maximum Construction Image Scores of revenue Image Scores of revenue Image Scores of revenue   Subdividers Image Scores of revenue Image Scores of revenue Image Scores of revenue   Subdividers Image Scores of revenue Image Scores of revenue Image Scores of revenue   Subdividers Image Scores of revenue Image Scores of revenue Image Scores of revenue   Subdividers Image Scores of revenue Image Scores of revenue Image Scores of revenue   Subdividers Image Scores of re	Title and trust company	654102			ES	TIMATI	ES are a	cceptab	le.
Title search company       and	Title reconveyance company	654103	Sources of revenue	sus		i	1	-	Per-
Other tills office - Describe       1         Cemeteries       600         Cemeteries       600         Cemeteries       600         Cemetery or mausoleum operation       65312         Animal cometery operation       65312         Animal cometery operation       65312         Animal cometery operation       65312         Other cemetery operation       65312         Other cemetery service       Describe         Subdividers, developers, and builders       65202         Subdividers, and see paring year land into late       65202         Subdividers, and see paring year land into late       65202         Subdividing contractor - Describe primary       9196000         Bestrate       630         General building contractor - Describe primary       9198000         Building construction on land owned by you       9198000         Interest active       6311         Building construction on land owned by you       9198000         Interest active       6312         Property manager - nanoresidential       6312 <td>Title search company</td> <td>654104</td> <td></td> <td>850</td> <td></td> <td>1</td> <td></td> <td></td> <td></td>	Title search company	654104		850		1			
Cemetervice       b. Immediatential       602       1       1         Cemetery subdivider and developer       65311       600       1       1         Cemetery subdivider and developer       65311       2       Revenue from real and the services of	Other title office – <i>Describe</i>	777773	abstract service fees <b>a.</b> Residential	601		   	   		
and to       and to	Cemeteries		<b>b.</b> Nonresidential			 	<u> </u>   		
Animal centery operation       6532         Mausoleum construction       0 16200         Other centery sorvice       Describe         Subdividers, developers, and builders       0 177777         Subdividers, developers, and builders       0 5020         Subdividers, developers, and builders       0 5020         Subdivider and preparing your land into lots       0 5020         Intended for sale       0 11         Subdividing and preparing your land into lots       0 5020         Subdividing and preparing your land into lots       0 5020         Subdividing and preparing your land into lots       0 5020         Subdividing and preparing your land into lots       0 5020         Subdividing and preparing your land into lots       0 5020         Subdividing contractor - Describe primery       0 915000         Building construction on land owned by you       0 915000         Building construction on land owned by you       0 915000         Subdividing or residential       0 651290         Agent or broker - residential       0 651290         Preperty manager - residential       0 5314         Agent or broker - nonresidential       0 5319         Preperty manager - nonresidential       0 5319         Preperty manager - residential       0 5319	Cemetery or mausoleum operation	655312		600					
Mausolaum construction       0       0       620       620         Other cemetery service - Describe       0	Cemetery subdivider and developer	655311		610		 			
Mausoleum construction       915200         Other cemetary service - Describe       977777         Subdividers, developers, and builders       9777777         Subdividers, developers, and builders       95201         Subdividers and preparing your land into lots       95201         Subdividing and preparing your land into lots       95201         Subdividing and preparing your land into lots       95000         Subdividing and preparing your land into lots       950000         Subdividing contractor - Describe primary       915000         Building construction on land owned by you       9150000         Other real estate       961299         Agent or broker - residential       953111         Property manager - nonresidential       953111         Real estate asset management       9	Animal cemetery operation	655321	services, other than	620		   	   		
Other cemetery service - Describe	Mausoleum construction	9154200	<b>4.</b> Revenue from sale of	020		 			
Subdividers, developers, and builders	Other cemetery service – <i>Describe</i>	777771	spaces) subdivided or developed by this establishment (Note – Report sale of land with buildings on			     	   		
Subdividing and preparing your land into lots intended for sale	Subdividers, developers, and builders		<ul> <li>a. Value of improvements</li> </ul>			I I	 		
Subalvariand and preparing los on land owned by others	Subdividing and preparing <b>your</b> land into lots intended for sale	655201		631		 	 		
Subdividing and preparing lots on land owned       9179400         General building contractor - Describe primary       915000         Building construction on land owned by you       915000         Building construction on land owned by you       915000         Building construction on land owned by you       915000         Building construction on land owned by you       915000         Building construction on land owned by you       915000         Building construction on land owned by you       9150100         Initended for reat or lease - Describe primary       9153100         Cher real estate       65129         Agent or broker - nonresidential       653131         Property manager - residential       653131         Property manager - nonresidential       653131         Property manager - nonresidential       653131         Real estate asset management       663141         Real estate asset management       663141         Real estate asset management       663141         Other kinds of business or activity - Describe       777777         Other kinds of business or activity - Describe       777777	Subdividing and preparing <b>your</b> land into lots intended for rent or lease	651902		632		 			
General building contractor - Describe primary type of building construction on land owned by you intended for sale - Describe primary type of building construction on land owned by you intended for sale - Describe primary type of building       9 15000       641       1         Building construction on land owned by you intended for sale - Describe primary type of building       9 15000       642       1         Building construction on land owned by you intended for reat or lease - Describe primary type of building       9 15000       642       1         Building construction on land owned by you intended for reat or lease - Describe primary type of building       661299       640       1         Other real estate       653111       653121       8 Aevenue from contract construction work done for others       640       1         Agent or broker - nonresidential       653111       653121       8. Cometory and mausoleum services       1       1         Property manager - nonresidential       653141       653141       1       1       1         Beal estate asset management       653197       653197       1       1       1         Owner-operator of property or buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings - Describe primary type of buildings -	Subdividing and preparing lots on land owned	9179400		630			I		
Building construction on land owned by you intended for sale	General building contractor – <i>Describe primary</i>	_	buildings constructed by this establishment <b>a.</b> Value of			   	   		
Building construction on land owned by you intended for rent or lease - Describe primary type of building		9153100	(including buildings) <b>b.</b> Value of the land (excluding			   	   		
algo of Dahling       algo by an analysis of the structure in the st	intended for rent or lease – Describe primary	_	c. Sum of lines 5a			 	'   		
Other real estate         Agent or broker - residential       653111         Agent or broker - nonresidential       653111         Property manager - residential       653131         Property manager - nonresidential       653131         Property manager - nonresidential       653141         Real estate consultant (excluding appraisers) - Describe nature of consulting performed       653197         Qwner-operator of property or buildings - Describe primary type of building       777772         Other kinds of business or activity - Describe       777777         Iterest income       090         Iterest income       090         Iterest income       090         Iterest income       090	type of building	651299	<ol> <li>Revenue from contract construction work done</li> </ol>			   	 		
Agent or broker - residential       and remodeling of buildings and other structures       1       1       1         Agent or broker - nonresidential       653121       8. Cemetery and mausoleum services       1       1       1         Property manager - residential       653131       653131       8. Sales of cemetery and mausoleum services       1       1       1         Property manager - nonresidential       653141       1       1       1       1       1         Property manager - nonresidential       653141       653141       1 </td <td>Other real estate</td> <td></td> <td>7 Povonuo from ronair</td> <td></td> <td></td> <td> </td> <td> </td> <td>1</td> <td></td>	Other real estate		7 Povonuo from ronair					1	
Property manager – residential	Agent or broker – residential	653111	and remodeling of buildings and other	590		 			
Property manager - nonresidential	Agent or broker – nonresidential	653121							
Real estate consultant (excluding appraisers) – Describe nature of consulting performed       653196         Real estate asset management	Property manager – residential	653131		661		 			
Real estate consultant (excluding appraisers) - Describe nature of consulting performed	Property manager – nonresidential	653141	interment spaces	662					
Real estate asset management       653197         Owner-operator of property or buildings – Describe primary type of building       777772         Other kinds of business or activity – Describe       777777         9. Interest income       090         Interest income       090	Real estate consultant (excluding appraisers) – Describe nature of consulting performed	653196	c. Openings and			   	   		
Real estate asset management       653197         Owner-operator of property or buildings – Describe primary type of building       777772         Other kinds of business or activity – Describe       777777         9. Interest income       090         Interest income       090			d. Maintenance			 			
Owner-operator of property or buildings - Describe primary type of building       777772         f. Other cemetery and mausoleum services (excluding sale of merchandise)       667         Other kinds of business or activity - Describe       777777         g. Sum of lines 8a through 8f       660         9. Interest income       090         ITEM 9 CONTINUED ON PAGE 3	Real estate asset management	653197	e. Sales of monuments,			   	   		
Other kinds of business or activity – Describe <ul> <li>9. Interest income</li> <li>990</li> <li>11EM 9 CONTINUED ON PAGE 3</li> </ul>	Owner-operator of property or buildings – Describe primary type of building	777772	f. Other cemetery and mausoleum services (excluding sale of			     	     		
9. Interest income 090 IIII IIII IIIIIIIIIIIIIIIIIIIIIIII		<b>—</b>	g. Sum of lines 8a			 	 		
	Uther kinds of dusiness or activity - Describe	└── 777777				 	 		
FORM CB-6503 CONTINUE ON PAGE	FORM CB-6503		ITEM 9 C	CONTI	NUED C				

00.0500				DTNACNI										Page 3
FORM CB-6503 1992 CENSUS OF AND REAL MISCELLA	EST/		AL, II NDUS		ANCE	CENSUS	CE	nter the 11-digit ENSUS FILE NUMBI s shown on this rep see label on page 1)	ort					
Item 9. SOURCES OF REVE	ENUE	– Conti	nued				Ite	em 11. OWNERSHI	P, CON	TROL, AND	LOCATIC	NS OF	OPERA	TION
	Cen-	ES Re	STIMAT eport do	ES are a ollars OF	acceptał R percer	ole. nts.	а.	Is the FIRST DIGIT in the address labo						
Sources of revenue	sus use	Bil.	Mil.	Thou.	Dol.	Per-		1 🗌 Yes – <i>Cor</i>		-		- ,		
	850	851	1 1	1	 	cent 852		2 🗌 No – <i>Skip</i>	to iten	n 12				
10. Net investment income	120			1			ь.	Is this company owned or		name, addre g or control			ber of tl	ne
<ol> <li>Revenue from sale of merchandise</li> </ol>	670		1	1	1			controlled by another company?	ownin	g or control	ing com	pany		
12. Gross rents from properties owned by this establishment				1	1			097 1 ☐ Yes →						
a. Residential properties	505		1	1	1			2 🗌 No						
Nonresidential <b>b.</b> properties	511			1					EL No.	(9 digits)				
c- Sum of lines 12a					 		c.	Does this company	Enter	name, addre			ber of tl	ne
and 12b 13. Commissions from	500		<u> </u>	<u> </u>	<u> </u>			own or control any other company or companies?	owned	d or controll	ea comp	any		
insurance sales				1	l			098 1 □ Yes →						
<ul> <li>a. <u>Title</u></li> <li>b. Other insurance - Specify</li> </ul>	415		<u> </u>	<u> </u>	<u> </u>			2 🗌 No						
<b>b.</b> Other matrance – Opecny	416		i	Ì	i i				EL No.	(9 digits)				
c. Sum of lines 13a							d.	How many establis	shmen	ts operated	d under		Numb	er
and 13b 14. Other revenue – Specify	410		ļ		ļ			the Employer Iden in the label (or as o	correc			07	9	
14. Other revenue – Spechy				1	1			THE END of 1992? If more than one, pr	ovide t	he <b>physical</b>	locatio	<b>n</b> addr	ess and	
	890			<u> </u>	<u> </u>			other information in headquarters location locations. If more ro	on shou	ıld be first, fe	ollowed	oy all c	ther	
<b>15. TOTAL</b> (Should equal item 4 on page 1 if reporting in dollars)	990			l I	1	100%		format in REMARKS	or on	a separate s	heet of p	aper.		
Item 10. SPECIAL INQUIRIE				910		100%		Name	ергари	e ii book ligt	1992	Mil.	Thou.	Dol.
a. Was THIS ESTABLISHMENT construction, renovations of	involv or alter	ved in n rations.	ew land	1	🗌 Yes			Number and stored			Revenue	081	1	1
subdividing or development and repairs during 1992? (N	t, or m laintei	aintena	nce nd	2		– Skip tem 11		Number and street			Annual	082	1	
repairs do not include janito maintenance, cleaning, etc.	.)	ervices,	lawn				1	City	State	ZIP Code	payroll			<u> </u>
<ul> <li>Report the expenditures incurr struction activity during 1992.</li> </ul>	Includ	e labor.		Mil. 911	Thou. 	Dol.		Kind-of-business de	scriptic	) n	period	d inclu	yees for ding Ma	rch 12
materials, and overheads. Incl improvement, but exclude val value of machinery and equipr	lue of la	and and			 	 					083			
integral part of a structure.											Census use	088		
c. Of the expenditures reporte what percent involved	a m (b	,		912	Percent			Name			1992	Mil.	<sup> </sup> Thou.	Dol.
(1) Residential buildings				913				Number and street			Revenue	081	1	
(2) Nonresidential buildings											Annual	082	1	1
(3) Subdividing/developing lot	ts			914			2	City	State	ZIP Code	payroll Paid	emplo	yees for	r pav
(4) Other – Describe				915				Kind-of-business de	scriptic	on			ding Ma	
											085			
(5) TOTAL d. Of the expenditures reported	d in (h	<u></u>			100% Percent	•					Census use	088		
what percent involved	, u iii (ii			916	rereem			Name			1992	Mil.	<sup>†</sup> Thou.	Dol.
(1) New construction				917				Number and street			Revenue	081	I I	l
(2) Renovations and alteration	ıs			918					<u>.</u>	710 0 1	Annual	082		
(3) Maintenance or repairs				918			з	City	State	ZIP Code	· · ·	emplo	yees for	r pay
(4) TOTAL					100%			Kind-of-business de	scriptic	on	period 083	l inclu	ding Ma	rch 12
e. What percent of the new co					Percent	t								
work reported in (d) was int (1) Rent or lease	tended	TOP		930							Census use	088		
				931				Name			1992	Mil.	<sup> </sup> Thou.	Dol.
(2) Sale				932				Number and street			Revenue	081	ļ	1
(3) Own use				933				City	C+-+-		Annual	082	1	1
(4) Other – <i>Describe</i> 933				4	City	State	ZIP Code	payroll Paid	emplo	yees for	рау			
(5) TOTAL 100%						Kind-of-business de	scriptic	on	perioo	1 inclue	ding Ma	rch 12		
f. What percent of the total expenditures Percent					t									
own employees as opposed contractors or other hired la	to wo	ork done	by	934							Census use	088		

### SPECIAL INSTRUCTIONS

### (See also the general instructions accompanying this form)

Item 9. SOURCES OF REVENUE (on pages 2 and 3)

Line 4. Developed land includes improvements to land, such as grading, roads, utilities, site planning, etc. Do not include here the sale of land which has buildings constructed on it but, rather report this value on line 5.

Line 5. Report here the sale of buildings constructed by this establishment) with the intention of being sold. If the value of the land is included in the selling price, include the value of the land on which the buildings are constructed.

Line 12. Gross rents should include all charges billed to tenants throughout the year. Include any costs billed (in accordance with the rental agreement) as additional charges to your tenants, such as building improvements, parking, repairs, utilities, etc.

REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.

Item 12. CERT	TIFICATION – Th	is report is su	bstantial	ly accurate a	nd ha	s been prepared in accordance with instruction	าร.		
Period covered by this report	FROM: Mo.	Year	то:	Mo.	Year	Name of person to contact regarding this rep	ort – Print or type		
Telephone	Area code	Number		Extension		Title			
Signature of authorized person Date									

FORM CB-6503

#### PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

(.		U.S. DEPARTMENT O BUREAU OF THE CENSU FORM		1992 CENS	US	OF CONSTRUCTIO	N INDUS	TRIES		
	OF THE CENTR	CC-150	9			OMB No. (	0607-0732: Ap	proval Expi	res 06	5/30/94
li t E r (	f you have his report, Bureau. In efer to the CFN) print	E: FEBRUARY 1 questions about c please call or writ any communication 11-digit Census Fi ed in the label to th r completed form t	ompleting e the Census n, be sure to le Number ne right.	[			C	C-1509		
	1201 Jeffer	AU OF THE CENS East 10th Street rsonville, IN 47134	4-0001							
e	eastern tim	sistance, 8:00 a.m. le, Monday through	h Friday:							
		1-800-233-6136								
	instr	read the accomp ruction guide be vering the quest	fore							
		Census use only								
				(Please	e corr	ect any error in name, add	ress, and ZIF	Code)		
	this quest	ionnaire to answer t	the questions ar een only by Cer	nd return the report to nsus Bureau employee	the Ce	, requires businesses and oth nsus Bureau. By the same lav may be used only for statistic:	v, YOUR CEN	SUS REPO	RT IS	
lte		LOYER IDENTIFICAT			Ite	<b>n 3</b> . OPERATIONAL STATUS		Number	ofmo	nthe
	label the latest 19	ployer Identificat SAME as that use 92 Employer's Qu	d for this esta	blishment on its	a.	How many months during this firm or organization a operate this establishmen	1992 did ctively t?	002		11115
	094 1	Form 941? Yes			b.	Mark (X) the <b>ONE</b> box which establishment at the end of <b>1</b>		s this		
	2	No – Enter current El Number (9	digits)>	-		001 1 In operation 2 I Temporarily or		Figure	es only	У
lte		SICAL LOCATION – . boxes or rural rout				seasonally inactive 3 Ceased operation -		Month D	ay `	Year
a.	address s	tablishment's phy shown in the label	sical location	the same as the		4 Sold or leased to a operator – Give da AND enter name, e	nother			
	093 1 🗌 2 🗌	Yes No – <i>Enter physical</i>	l location below	7 7		Name of new owner or oper	· · · · ·			
		and street		*		Number and street				
	City town	n, village, etc.	State	ZIP Code		City	State	ZIP Code	2	
		i, vinago, oto.				ony	Oluto		,	
b.	boundari	tablishment physi es of the city, tow Yes 3 No lega No 4 Do not k	<b>/n, village, etc</b> I boundaries	inside the legal .?	Iter	<ul> <li>n 4. ORGANIZATIONAL STA which best describes th</li> <li>1 Individual proprieto</li> <li>2 Partnership</li> <li>3 Cooperative associ</li> </ul>	<i>is establishme</i> orship	nt during <b>1</b>	00X <b>992</b>	
c.			-	blishment located?		4 Cooperative associ (tax-exempt)				
	2	City, village, or bord Town or township	-			5 🗌 Government – <i>Spe</i>				
d.		Other or do not kno		ated?		0 Corporation (Do no association) 9 Other – Specify	-			
						∍∟omer – <i>Specny</i>				
	List e		omplete items			ies as shown on the Kind o r business in item 13; and			es	
YOU	R RESPO	NSE IS REQUIRED	BY LAW.				CONTIN	UE ON PA	GE 2	

# F–102 APPENDIX F

Form CC-1509					Page 2
Item 5. EMPLOYMENT IN 1992 - Your answers should be based on all employees included	d on your En	nployer's Q	uarterly Fe	deral Tax	Return,
Treasury Form 941. Do not include your subcontractors or their employees. During the pay periods including the 12th of March, May, August, and November 1992 –		of employe pay period			
a. how many construction workers were on the payroll of this establishment? <i>INCLUDE</i> - • Apprentices • Working foremen • Equipment operators	March	May	Augus	st Nov	/ember
Journeymen • Job-site record keepers and mechanics     Craftsmen • Laborers • Others engaged	1992 101	1992 102	1992 103	104	1992
	105	106	107	108	
INCLUDE -       • Supervisors above working foremen       • Office staff       • Executives         • Personnel staff       • Accounting staff       • Engineers       • Others engaged in nonconstruction         • Accounting staff       • Purchasing agents       • Purchasing agents       • Others engaged in nonconstruction					
c. how many total employees were on the payroll of this establishment? Sum lines a and b	109	110	111	112	
			Millions	Thou-	Mark
HOW TO REPORT			(000)	sands (000)	(X) if "0"
DOLLAR FIGURES         Example: If a value is \$1,025,739.00 - REPORT		>	1	026	0
If a value is "0" (or less than \$500.00) – MARK (X)					<b>X</b> 0
Item 6. PAYROLL IN 1992 BEFORE DEDUCTIONS What were the annual payroll costs to this establishment for – Exclude fringe benefits.		Key	Mil.	Thou.	Mark (X) if "0"
a. construction workers (as defined in item 5a)?		117			
<b>b.</b> other employees (as defined in item 5b)?		118			0 🗌
c. all employees? Sum lines a and b		119			0 []
Items 7 and 8 – Not applicable to this report					
Item 9. CONSTRUCTION WORK SUBCONTRACTED OUT			Mil.	Thou.	4
What was the total cost to this establishment for construction work subcontracted Exclude the cost of materials purchased by this establishment for subcontractors.	out in 1992	<b>2?</b> 124			□ <b>0</b>
Item 10. MATERIALS, COMPONENTS, AND SUPPLIES			Mil.	Thou.	
What were the job-site, general office, and all other costs to this establishment for					1
materials, components, and supplies in 1992? Include the cost of materials purchased by this establishment for subcontractors. Exclude the	he cost of				
<ul> <li>items purchased by this establishment that were installed in a building but were not part of</li> </ul>					
structure, such as production machinery, furniture, etc.					
items listed in item 11.		125			
Item 11. SELECTED COSTS			Mil.	Thou.	-
What were the job-site, general office, and all other costs to this establishment in 1	992 for –			İ	
Where items are combined on your books, separate estimates are preferred. <ul> <li>a. purchased electricity?</li> </ul>		126			
b. natural gas and manufactured gas (propane)?		120			
c. gasoline and diesel fuel – ON highway?		128			
d. gasoline and diesel fuel – OFF highway?		129			
e. all other fuels and lubricants, including heating oils, lubricating oils and greases	s?	130			
Item 12. DOLLAR VALUE OF BUSINESS DONE IN 1992			Mil.	Thou.	
For this establishment in 1992 – a. (1) what were the receipts (or billings) for contract construction work done for	others?				
Exclude the cost of items purchased by this establishment that were installed in a bu					
were not part of its structure, such as production machinery, furniture, etc.		136			
(2) what was the estimated dollar value of speculative construction work done and other building projects which you sold or intended to sell, rent or lease	on resident ?				
INCLUDE the estimated dollar value of – EXCLUDE the estimated dol					
<ul> <li>all improvements to land associated with these building projects done by or for you in 1992.</li> <li>land. Even though land w be included in the value of be included in the value o</li></ul>					
work actually done in 1992, whether project, the value of the la	and is not	U		l	
<ul> <li>buildings were sold or not.</li> <li>considered construction v</li> <li>subdividing and preparing your own land into lots.</li> </ul>	work done.	137			
(3) what was the estimated dollar value of construction work done for this esta					
own use, i.e., not intended for sale, rent, or done under contract for others?		138			
(4) what was the total dollar value of construction work done? Sum lines (1) is what was the previous for all other business activities done by this exterior activities of the second s	0				
b. what were the receipts for all other business activities done by this establishme INCLUDE –	ent in 1992?				
INCLUDE –     architectural services         rental or lease of properties         retail tra	ade				
construction management services         • real estate commissions and         • transpo	rtation				
engineering services management fees      manufacturing     end of construction machinery     other but the services      management fees     other but the services      management fees     other but the services      management fees     other but the services      management fees     other but the services      management fees     other but the services      other but the services      other but the services      management fees     other but the services      other b	ale trade usiness activ	ities		l	
mining     or equipment to others		140		 	□0
c. what was the total dollar value of all business done by this establishment in 1	992?				
Sum lines 12a(4) and 12b		141			0 🗌

CONTINUE ON PAGE 3

OW TO REPORT	Report percents rounded to whole perc	abel on page	1 Census					Pr	ercent
ERCENTAGES	Example: If figure is 38.8% – REPORT	cents.					<b>&gt;</b> [=		<b>39</b> %
tem 13. KIND OF E	BUSINESS IN 1992					201			nt of total
hat percent of t	ne amount that you reported in item 12c (	the total dolla	ar value of				Code		ess done
usiness done in 19	92) was due to –  owing construction activities? (As reporte	d in item 12a	.)						
	ction on land owned by others – general contr		• /				5001		ġ
Building constru	ction on land owned by you, for sale					!	5002		C
Building constru	ction for your own use, not intended for sale,	rent, or lease	)			!	5003		0
Building constru	ction for rent, or lease						9923		(
Remodeling – ge	eneral contractor					!	5004		
Subdividing and	preparing your own land into lots, for sale, re	ent, or lease					9924		
	nstruction – Refer to list of construction y kind(s) of construction and enter code(s)								
each of the fol Architectural ser	lowing other business activities? (As repo	rted in item 1	2b)				9911		
	nagement services						9913		
Engineering service							9914		
	products manufactured and sold to others – 3	Specify kind							
- 3						:	9915		
Mining – minera	Is produced and sold to others						9916		
Real estate com	nissions and management fees						9917		
Rental or lease of	f properties						9918		
Rental of constru	action machinery or equipment to others					:	9919		
Retail trade – Sp	ecify kind						9920		
Transportation of	f goods for others (e.g., dirt hauling)						9921		
Wholesale trade	– Specify kind						9922		
Other business a	ctivities – Specify kind						9999		
The sum of	the percentages reported should equal 1	00%						10	00 0
em 14. TYPE OF ( Ihat percent of the volved the follow llocate this percent	CONSTRUCTION the amount you reported in item 12a(4) (the wing types of construction? Report these p according to the three categories of construct	e dollar value ercentages ir tion. The sum	n column (1) n of column <mark>s</mark>	of the (2) th	table below. rough (4) sho	Then ould ea	in columns	(2), (3),	and (4)
em 14. TYPE OF ( Ihat percent of the noolved the follow llocate this percent	CONSTRUCTION be amount you reported in item 12a(4) (the wing types of construction? Report these p	e dollar value ercentages ir tion. The sum definitions of Perce	n column (1) n of columns the three can ent of dollar	of the (2) th	table below. rough (4) sho es of construc	Then ould eo ction.	in columns	(2), (3), y in col	and (4) umn (1).
em 14. TYPE OF ( Ihat percent of the noolved the follow Ilocate this percent	CONSTRUCTION the amount you reported in item 12a(4) (the wing types of construction? Report these p according to the three categories of construct ion Guide for a step by step example and for o	e dollar value ercentages ir tion. The sum definitions of Perce v	n column (1) n of columns the three can ent of dollar value of	of the (2) th tegoric	table below. rough (4) sho es of construc Three New	Then ould ed ction. catego	in columns qual the entr ories of cons Additions,	(2), (3), y in col truction	<i>and (4)</i> ในmn (1). า
em 14. TYPE OF ( Ihat percent of the noolved the follow Ilocate this percent	CONSTRUCTION the amount you reported in item 12a(4) (the wing types of construction? Report these p according to the three categories of construct	e dollar value ercentages ir tion. The sum definitions of Perce v con	n column (1) n of columns the three can ent of dollar	of the (2) th tegoric	table below. rough (4) sho es of construc Three	Then ould ed ction. catego A alte	in columns qual the entr ories of cons	(2), (3), y in col truction Main	and (4) umn (1).
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# Form CC-1509

Item	is 15 and	<b>I 16 –</b> No	t appli	cable to tl	his report												
Item	17. STA	TES IN V	VHICH	CONSTRU	JCTION V	VORK	WAS DON	E IN 1992	2								
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702	Alaska	%	713	Ga.	%	723	Maine	%	732	Nev.	%	741	Oreg.	%	751	Va.	%
704	Ariz.	%	715	Hawaii	%	724	Md.	%	733	N.H.	%	742	Pa.	%	753	Wash.	%
705	Ark.	%	716	Idaho	%	725	Mass.	%	734	N.J.	%	744	R.I.	%	754	W. Va.	. %
706	Calif.	%	717	III.	%	726	Mich.	%	735	N. Mex	%	745	S.C.	%	755	Wis.	%
708	Colo.	%	718	Ind.	%	727	Minn.	%	736	N.Y.	%	746	S. Dak.	%	756	Wyo.	%
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711	D.C.	%		Ky.	%	730	Mont.	%	739	Ohio	%	749	Utah	%	work	done	100%
Item	is 18 and	<b>i 19 –</b> No	t appli	cable to tl	his report												
	Answer	item 20	only i	f your Ce	ensus File	e Num	ber (CFN)	), shown	n in the	e addres	s label of	<sup>;</sup> this r	report f	orm, begiı	ns wit	h a zero	D.
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			-							PLE	ASE PHO	тосо	PY THI	S REPORT	FOR	YOUR F	RECORD

DUE DATE: FEBRUARY 15, 1993         If you have questions about completing the Census Provide Explored States and Provide Provide Explored States and Provide Explored States and Provide Explored Pr			U.S. DEPARTMENT OF CO BUREAU OF THE CENSUS	OMMERCE	1992 CENS	us c	F CONSTRUCTION	INDUS	TRIE	S	
If you have questions about completing this report, plasse all or write the Census Bureau in any communication, be sure to this report, plasse all or write the Census Bureau in any communication, be sure to CFM pinnice in the label to the right.       CC-1699         CENDER CONTROL IN the Control of the right. Return your completed form to: UPCRND printed form to: BUREAU OF THE CENSUS 1201 East 10h Street Jefferstorming. Na 7134-0001       If lease correct any error in name, address, and ZIP Code         Please read the accompanying instruction gride barrow answering the questions. Consult use only the questions to answer the questions and truth regord to the Canse Bureau. By the sume barrow the questions and the truth the rop to the Canse Bureau. By the sume barrow the questions and the truth the rop to the Canse Bureau. By the sume barrow the questions and the plan process.         YOUR RESPONSE IS RECURED BY LAW. The 13, Unleaf States Code, requires businesses and other organizations that receive the question to answer the questions and the plan process.         YOUR RESPONSE IS RECURED BY LAW. The supporterit this set and the plan process.         Is the Emponeter the support the supporter the apport to the canse Bureau. Converting the supporterit the set and the supporter the supporterit the set and		OF THE CENT	CC-1609				OMB No. 0607	-0732: Ap	proval E	xpires (	)6/30/94
1201 East 10th Street         Jeffersonville, IN 47134-0001         Toll Free assistance, 6:00 a.m. to 8:00 p.m., eastern time, Monday through Finday:         issues on the Monday through Finday:         1-800-233-6136         Please read the accompanying instruction guide before answering the questions.         Census use only         (Please correct any error in name, address, and ZIP Code)         YOUR RESPONSE IS REQUIRED BY LAW. Tile 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Consus Bureau any be used only for statistical purposes.         YOUR RESPONSE IS REQUIRED BY LAW. Tile 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Consus Bureau any buside statistical purposes.         Tother LA. It may be seen only by Consus Bereau any buside statistical purposes.         Item 1. EMPUCPE IDENTIFICATION NUMBER         Is the Broplayer's Guarterly Federal Tax Return, Treasury form S41?         Treesury form S41?         064       1 was and the ord of 1932         070       2 more formating are administical location balow gr         Number and street       2 more formating are administical location balow gr         081       1 more towning         082       1 more contexing         084       1 more contexing	li t E r (	f you have his report, Bureau. In efer to the CFN) print	questions about comp please call or write the any communication, be 11-digit Census File N ed in the label to the ri	oleting e Census e sure to umber				C	C-1609		
eastern time, Monday through Friday: 1-800-233 6136         Please correct any error in name, address, and ZIP Code)         Cansus use only         Cansus use only         Cansus use only         Cansus use only         Cansus use only         (Please correct any error in name, address, and ZIP Code)         YOUR RESPONSE IS REQUIRED BY LAW. Title 13. United Strate Code, requires businesses and other organizations that receive this questionnaire to answer the question and return the report to the Cansus Bureau. employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immume from legal process.         Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (ED) Number shown in the Istext 1922 Employer's Outputy Federal Tak Return), Treasury Form 91?       Item 3. OPERATIONAL STATUS         04       1 \res 2 \res 0 = Enter current (PO. boxes or rural routes are not physical locations).       Item 3. OPERATIONAL STATUS         a. Is this exteblishment's objection below $_{\mathcal{I}}$ Item 4. OPERATIONAL STATUS - Mark (X) the OWE how which bead describes this establishment during 1992 (If y, town, village, etc.       Item 4. OPERATIONAL STATUS - Mark (X) the OWE how which bead describes this establishment during 1992 (If y, town, village, etc.         0       1 \res on the orden table?       Item 4. OPERATIONAL STATUS - Mark (X) the OWE how which bead describes this establishment during 1992 (If y, town, village, etc.         0       1 \res only all boundaries 2 \res tore during thy vis all boundaries 2 \res to al		1201	East 10th Street								
Please read the accompanying instruction guide before answering the questions. <ul> <li>Census use only</li> <li>(Please correct any error in name, address, and ZIP Code)</li> </ul> Your RESPONSE IS REQUIRED BY LAW, Tile 12, United States Code, requires businesses and other organizations that receive the same laws, Your Census Bureau employees and must be cancel by the same laws, Your Centrol IS CONFIDENTIAL. It may be seen only by Census Bureau employees and must be seen only by census Bureau employees and must be cancel by the same laws, Your Centrol IS CONFIDENTIAL It may be seen only by Census Bureau employees and must be seen only by census Bureau employees. Further, copies retained in respondents' files are immune from legal process.           Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number shown in the labet the SAME as that used for this establishment on the labet the SAME as that used for this establishment of the same state of the current EI Number 30 digite) →	Т е	oll-free as astern tim	sistance, 8:00 a.m. to 8 e, Monday through Fri	3:00 p.m., day:							
instruction guide before         answering the questions.         Census use only         (Please correct any error in name, address, and ZIP Code)         YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questions in the respont to the Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.         Item 1. EMPLOYER IDENTICATION NUMBER         Is the Employer identification (EI) Number shown in the label to SAME as that used for this stabilishment in the shown in the label to SAME as that used for this stabilishment is the end of 1992 of this firm or organization activities this conserved to the stabilishment?         04       1 \ves         2 \vert No - Enter current Enter of edgits) → (			1-800-233-6136								
(Please correct any error in name, address, and ZIP Code)         YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this equations and return the report to the Census Bureau. By the same law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by Canus Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.         Item 1. EMPLOYER IDENTIFICATION NUMBER       Item 3. OPERATIONAL STATUS         Is the Employer Identification (EI) Number shown in the labol the SAME as that used for this establishment on its The or organization actively operate this establishment?       Number of months during 1992 did the state set for this establishment on its firm or organization actively operate this establishment?         04       1 \space Secondly in the labol?       Item 3. OPERATIONAL STATUS         a. Is this establishment?       Item 4. OPERATIONAL STATUS       Item 4. OPERATION - Answer parts a-d (P.O. boxes or rural routes are not physical locations.)       Item 4. OPERATION - Answer parts a-d (P.O. boxes or rural routes are not physical location below <i>y</i> Number and street         City. town, village, etc.       State       ZIP Code       Item 4. ORGANIZATIONAL STATUS - Mark (X) the ONE box which best describes this establishment (Y, village, etc.)         05       I \space table is this establishment located?       Item 4. ORGANIZATIONAL STATUS - Mark (X) the ONE box which best describes this establishment (X) the ONE box which best describes this establishment (X)         05 <th></th> <th>instr</th> <th>uction guide before</th> <th>9</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>		instr	uction guide before	9							
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this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, YOUR CENSUS REPORT IS         CONFIDENTIAL it may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies         Item 1. EMPLOYER IDENTFICATION NUMBER         Is the Employer identification (EII) Number shown in the label the SAME as that used for this establishment on its latest 1922 Employer's Quartery Foderal Tax Return, Treasury Form 941?         094 1 □/es         2 □ No - Enter current (PAD) = Answer parts a-d (PAD) = Answ					(Pleas	e corre	ct any error in name, address	s, and ZIF	Code)		
is the Employer Identification (EJ) Number shown in the label?   is the SAME as that used for this establishment on its interest 1992 Employer's Quarterly Federal Tax Return, Treasury Form 941?   094 1   Yes   2   No - Enter current   2   No - Enter current   2   No - Enter current   2   No - Enter physical location the same as the address shown in the label?   093 1   Yes   2   No - Enter physical location below <i>x</i> Number and street   City, town, village, etc.   2   Yes   2   No - Enter ty, Young Village, etc.?   Number and street   City, town, village, etc.   2   Yes   2   No - Enter ty, Young Village, etc.?   095 1   Yes   2   No - Enter ty, Voung Village, etc.?   095 1   Yes   2   No - Giv, date   2   No - Enter ty, Young Village, etc.?   095 1   Yes   2   No - Giv, date   2   No - Enter ty, Young Village, etc.?   095 1   Yes   2   No - Giv, date   095 1   Yes   2   No - Giv, date   095 1   Yes   2   No - Giv, date   095 1   Yes   2   No - Giv, date   096 1   City, village, or borough   2   No - Mark (X) the ONE box   096 1   City, village, or borough   2   No - Mark (X) the State Stablishment located?   096 1   City, village, or borough   2   No - Mark (X) the Orgen traing ty State Stablishment located?   0   Coperative association (taxable)   4   Scoperative association (ta		this quest	ionnaire to answer the q ENTIAL. It may be seen	uestions a only by Ce	nd return the report to nsus Bureau employee	the Cer	sus Bureau. By the same law, <b>Y</b>	OUR CEN	SUS RE	PORT I	S
094 1    Yes   2    No - Enter current 1    no peration   2    No - Enter current 2    no - Answer parts a-d   (P.O. boxes or rural routes are not physical locations.) a. Is this establishment's physical location the same as the address shown in the label?   093 1    Yes   2    No - Enter physical location below rearts and three name of the same as the address shown on the Kind of Construction Activities List enclosed, please complete items 5, 6, and 12, describe your business in item 13; and enter your name and telephone number in item 21.	lte	ls the Em label the latest 19	ployer Identification SAME as that used fo 92 Employer's Quarte	(EI) Numb or this esta	ablishment on its	a.	How many months during 199	92 did ely		er of m	<u>onths</u>
Item 2. Product LOCAL LOCAL COUNT - Answer parts 3=0         (P.O. boxes or rural routes are not physical locations.)         a. Is this establishment's physical location the same as the address shown in the label?         093 1Yes         2No - Enter physical location below r         Number and street         City, town, village, etc.         State       ZIP Code         Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?         095 1Yes 3No legal boundaries 2No 4Do not know         2No 4Do not know         2Town or township 3Other or do not know         3Ceased operation - Give date →         4Sold or leased to another operator         096 1City, village, or borough 2Town or township 3Other or do not know         3Ceased operation - Give date →         4Sold or leased to another operator         0In what county is this establishment located?         0Corporation CD not mark if any form of cooperative association (Lax-exempt)         5Government - Specify		094 1	Yes No – <i>Enter current</i>	ts) →	_		establishment at the end of <b>1992</b> 001 1		Fig		, 
a. Is this establishment's physical location the same as the address shown in the label?	lte							ve date ->	Month	Day	Year
2 No - Enter physical location below r       Name of new owner or operator         Number and street       Number and street         City, town, village, etc.       State       ZIP Code         b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?       Number and street         095       1 Yes       3 No legal boundaries         2 No       4 Do not know         c. In what type of municipality is this establishment located?       1 Individual proprietorship         096       1 City, village, or borough         2 Town or township       3 Other or do not know         d. In what county is this establishment located?       9 Other - Specify         If this company is not primarily engaged in construction activities as shown on the Kind of Construction Activities List enclosed, please complete items 5, 6, and 12, describe your business in item 13; and enter your name and telephone number in item 21.	a.	address s	shown in the label?	I location	the same as the		4 Sold or leased to anoth	ner 🔶			
City, town, village, etc.       State       ZIP Code       City       State       ZIP Code         b.       Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?       City       State       ZIP Code         095       1       Yes       3       No legal boundaries       Vinch best describes this establishment during 1992         095       1       Yes       3       No legal boundaries       2       Partnership         2       No       4       Do not know       2       Partnership       3       Cooperative association (taxable)         4       Cooperative association (taxe)       4       Cooperative association (taxe)       4       Cooperative association (taxe)         096       1       City, village, or borough       5       Government - Specify				ation below	′ 🖌	ſ	Name of new owner or operator		<u> </u>		
b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?       Item 4. ORGANIZATIONAL STATUS - Mark (X) the ONE box which best describes this establishment during 1992         095       1       Yes       3       No legal boundaries       03       1       Individual proprietorship         2       No       4       Do not know       2       Partnership         c.       In what type of municipality is this establishment located?       3       Cooperative association (taxable)         4       Cooperative association (taxable)       4       Cooperative association (taxable)         2       Town or township       5       Government - Specify		Number a	and street			-	Number and street				
boundaries of the city, town, village, etc.?       which best describes this establishment during 1992         095       1 Yes       3 No legal boundaries         2 No       4 Do not know       2         c. In what type of municipality is this establishment located?       003       1 Individual proprietorship         096       1 City, village, or borough       2 Town or township       3 Cooperative association (taxable)         2 Town or township       3 Other or do not know       5 Government - Specify		City, town	n, village, etc.	State	ZIP Code	-	City	State	ZIP C	ode	
<ul> <li>c. In what type of municipality is this establishment located?</li> <li>096 1 City, village, or borough</li> <li>2 Town or township</li> <li>3 Other or do not know</li> <li>d. In what county is this establishment located?</li> <li>4 Cooperative association (tax-exempt)</li> <li>5 Government - Specify</li> <li>0 Corporation (Do not mark if any form of cooperative association)</li> <li>9 Other - Specify</li> <li>9 Other - Specify</li> </ul>	b.	095 1	Yes 3 No legal bou	undaries	inside the legal ?		which <b>best</b> describes this es 1 □ Individual proprietorsh 2 □ Partnership	stablishme ip			
d. In what county is this establishment located?       association)         9 □ Other - Specify         If this company is not primarily engaged in construction activities as shown on the Kind of Construction Activities         List enclosed, please complete items 5, 6, and 12, describe your business in item 13; and enter your name and telephone number in item 21.	c.	096 1 🗌 2 🗌	City, village, or borough Town or township		blishment located?		4 Cooperative associatio (tax-exempt) 5 Government – <i>Specify</i>	n			
List enclosed, please complete items 5, 6, and 12, describe your business in item 13; and enter your name and telephone number in item 21.	d.			hment loc	ated?		association)			-	
YOUR RESPONSE IS REQUIRED BY LAW.		List e telepi	nclosed, please comp hone number in item 2	lete items 21.	ged in construction a 5, 6, and 12, descril	activiti De youi	es as shown on the Kind of C business in item 13; and ent	er your na	me and		

Form CC-1609					Page 2
Item 5. EMPLOYMENT IN 1992 – Your answers should be based on all employees included on	your Emplo	yer's Q	uarterly Fee	deral Tax	Return,
	Number of e uring the pa				
a. how many construction workers were on the payroll of this establishment?       Ma         INCLUDE - • Apprentices       • Working foremen       • Equipment operators	arch 992	May 1992	Augus 1992		ember 992
Journeymen     Job-site record keepers     And mechanics     Journeymen     Staftsmen     Craftsmen     Truck drivers and helpers     And mechanics     Others engaged     directly in construction	102		103	104	
b. how many other employees were on the payroll of this establishment? 105	106		107	108	
INCLUDE -Supervisors above working foremen • Personnel staff • Accounting staff• Office staff • Architects • Engineers • Purchasing agents• Executives • Others engaged in nonconstruction activities					
<b>c.</b> how many total employees were on the payroll of this establishment? <sup>109</sup> Sum lines a and b	110		111	112	
Report dollars rounded to thousands.			Millions	Thou- sands	Mark (X) if
HOW TO REPORT			(000)	(000)	· "o"
DOLLAR FIGURES       Example: If a value is \$1,025,739.00 - REPORT         If a value is "0" (or less than \$500.00) - MARK (X)		-	1	026	<u> </u>
Item 6. PAYROLL IN 1992 BEFORE DEDUCTIONS What were the annual payroll costs to this establishment for –		Key	Mil.	Thou.	Mark (X) if
Exclude fringe benefits.  a. construction workers (as defined in item 5a)?		117			<i>"0"</i>
<ul><li>b. other employees (as defined in item 5b)?</li></ul>		117 118			
c. all employees? Sum lines a and b		119			
Items 7 and 8 – Not applicable to this report					
Item 9. CONSTRUCTION WORK SUBCONTRACTED OUT			Mil.	Thou.	
What was the total cost to this establishment for construction work subcontracted out Exclude the cost of materials purchased by this establishment for subcontractors.	in 1992?	124			0 □
Item 10. MATERIALS, COMPONENTS, AND SUPPLIES			Mil.	Thou.	
What were the job-site, general office, and all other costs to this establishment for materials, components, and supplies in 1992?					
<b>Include</b> the cost of materials purchased by this establishment for subcontractors. Exclude the co	ost of –				
• items purchased by this establishment that were installed in a building but were not part of its					
<ul><li>structure, such as production machinery, furniture, etc.</li><li>items listed in item 11.</li></ul>		125			
		125	Mil.	Theu	0
Item 11. SELECTED COSTS			IVIII.	Thou.	-
What were the job-site, general office, and all other costs to this establishment in 1992 Where items are combined on your books, separate estimates are preferred.	tor –				
a. purchased electricity?		126			
b. natural gas and manufactured gas (propane)?		127			
c. gasoline and diesel fuel – ON highway?		128			
d. gasoline and diesel fuel – OFF highway?		129			0 🗌
e. all other fuels and lubricants, including heating oils, lubricating oils and greases?		130			
Item 12. DOLLAR VALUE OF BUSINESS DONE IN 1992 For this establishment in 1992 -			Mil.	Thou.	-
a. (1) what were the receipts (or billings) for contract construction work done for oth Exclude the cost of items purchased by this establishment that were installed in a buildir					
were not part of its structure, such as production machinery, furniture, etc. (2) what was the estimated dollar value of speculative construction work done on i	racidantial	136			
and other building projects which you sold or intended to sell, rent or lease? INCLUDE the estimated dollar value of – EXCLUDE the estimated dollar v					
<ul> <li>all improvements to land associated with these building projects done by or for you in 1992.</li> <li>land. Even though land would be included in the value of yo</li> </ul>					
<ul> <li>work actually done in 1992, whether project, the value of the land i</li> </ul>	is not				
<ul> <li>buildings were sold or not.</li> <li>subdividing and preparing your own land into lots.</li> </ul>	done.	137			
<ul> <li>(3) what was the estimated dollar value of construction work done for this establis</li> </ul>	hmont's				
own use, i.e., not intended for sale, rent, or done under contract for others?	siment s	138			□ <b>0</b>
(4) what was the total dollar value of construction work done? Sum lines (1) through	ugh (3)	139			0 🗌
b. what were the receipts for all other business activities done by this establishment in	n 1992?				
INCLUDE –					
<ul> <li>architectural services</li> <li>construction management services</li> <li>real estate commissions and</li> <li>transportation</li> </ul>	on				
engineering services     management fees     wholesale tr	rade				
<ul> <li>manufacturing</li> <li>mining</li> <li>rental of construction machinery</li> <li>or equipment to others</li> </ul>	ess activities	; 140			□o
- mining	2				<u> </u>
c. what was the total dollar value of all business done by this establishment in 1992 Sum lines 12a(4) and 12b	•	141			□o

lease enter your 11-digit Census File Number from the address label on page 1	Census Fi	le Numbe	r 🕨						
HOW TO REPORT         Report percents rounded to whole percents.           PERCENTAGES         Example: If figure is 38.8% – REPORT							→ Percent		
Item 13. KIND OF BUSINESS IN 1992 What percent of the amount that you reported in item 12c (the total dollar value of business done in 1992) was due to – a. each of the following construction activities? (As reported in item 12a)					201 Co		Percent of tota business done		
Highway and street contractor – construction of highways, streets, airport runways, and related work					61	01		%	
Paving contractor - asphalt or concrete for highways, streets, and airport runwa	ys				61	02		9	
Heavy construction contractor – construction of bridges, tunnels, water, sewer, and other utility lines, power plants, sewer and water treatment plants, and heavy industrial complexes					62	01		9	
Cable and conduit laying contractor					62	02	%		
Dredging contractor					62	03	%		
Excavating, earthmoving, or land clearing contractor, connected with buildings					79	41	9		
Excavating, earthmoving, or land clearing contractor, not connected with buildings					62	05	0		
Trenching contractor					62	04	9		
Other kinds of construction – Refer to list of construction									
activities – Specify kind(s) of construction and enter code(s)									
<ul> <li>each of the following other business activities? (As reported in item 12b) Construction management services</li> </ul>					99	13	%		
Engineering services						14	9		
anufacturing – products manufactured and sold to others – Specify kind					99	15	9		
ning – minerals produced and sold to others					99	16	Q		
Rental of construction machinery or equipment to others	others				99	19	9		
Retail trade – <i>Specify kind</i>					99	20	9		
Transportation of goods for others (e.g. dirt hauling)						21	9		
Wholesale trade – <i>Specify kind</i>					99	22			
Other business activities – Specify kind					99	99			
The sum of the percentages reported should equal 100%							100	)	
Type of construction	dolla con	dollar value of construction		New	categories of cor Additions, alterations, or		Maintenand r and		
		work done Key (1)		reconstruc		nstruction (3)			
ONBUILDING CONSTRUCTION				(=)		(0)		( - ,	
Highways, streets and related work, such as installation of guardrails, highway signs, etc.	331	%	431	%	531	%	631		
Airport runways and related work	334	%	434	%	534	%	634		
Recreational facilities, such as athletic fields, golf courses, outdoor tennis courts, trails or camps	337	%	437	%	537	%	637		
Bridges and elevated highways	341	%	441	%	541	%	641		
Tunnels: highway, pedestrian, railroad, etc.	340	%	440	%	540	%	640		
Railroad construction	351	%	451	%	551	%	651		
Urban mass transit: subways, trolleys, streetcars, and light rail systems	350	%	450	%	550	%	650		
Dam and reservoir construction	342	%	442	%	542	%	642		
Marine construction including dredging, underwater rock removal, navigational channels, locks, etc.	343	%	443	%	543	%	643		
Harbor and port facilities	344	%	444	%	544	%	644		
		0/	445	%	545	%	645		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects	345	70					045		
Conservation and development construction including land reclamation, irrigation	345 346	%	446	%	546	%	646		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects				%	546 554	% %	646 654		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities	346	%	446						
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear	346 354	%	446 454	%	554	%	654		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear Power plants, nuclear	346 354 353	% % %	446 454 453	%	554 553	% %	654 653		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear Power plants, nuclear Sewers, sewerlines, septic systems, and related facilities	346 354 353 347	% % %	446 454 453 447	% % %	554 553 547	% % %	654 653 647		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear Power plants, nuclear Sewers, sewerlines, septic systems, and related facilities Sewage treatment plants	346 354 353 347 355	% % % %	446 454 453 447 455	% % %	554 553 547 555	% % %	654 653 647 655		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear Power plants, nuclear Sewers, sewerlines, septic systems, and related facilities Sewage treatment plants Water mains and related facilities	346 354 353 347 355 357	% % % %	446 454 453 447 455 457	% % % %	554 553 547 555 557	% % %	654 653 647 655 657		
Conservation and development construction including land reclamation, irrigation projects, drainage canals, levees, and flood control projects Power and communication transmission lines, towers, and related facilities Power and cogeneration plants, except nuclear Power plants, nuclear Sewers, sewerlines, septic systems, and related facilities Sewage treatment plants Water mains and related facilities Water treatment plants	346 354 353 347 355 355 357 365	% % % % %	446 454 453 447 455 457 465	% % % %	554 553 547 555 557 565	% % % %	654 653 647 655 657 665		

Other nonbuilding construction - Specify kind **BUILDING CONSTRUCTION –** Specify kind TOTAL value of construction work done in 1992 (Sum of columns (2), (3), and (4) should equal 100%)

% 500 % 600 CONTINUE ON PAGE 4

% 699

% 620 %

%

%

%

% 520

599

%

**100 %** 400

499

% 420

399

320

# Form CC-1609

Iten	s 15 and	16 - Not	applic	cable to th	nis report												- 0 -
							WAS DON	= IN 199	2								
Wha		t of the a	mour	nt that yo	ou report	ted in	item 12a(			alue of co	nstructior	n work	done by	this			
Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent
701	Ala.	%	712	Fla.	%	722	La.	%		Nebr.	%	740	Okla.	%	750	Vt.	%
702	Alaska	%	713	Ga.	%	723	Maine	%		Nev.	%	741	Oreg.	%	751	Va.	%
704	Ariz.	%	715	Hawaii	%	724	Md.	%	_	N.H.	%	742	Pa.	%	753	Wash.	%
705	Ark.	%	716	Idaho	%	725	Mass.	%		N.J.	%	744	R.I.	%	754	W. Va.	%
706	Calif.	%	717	III.	%	726	Mich.	%	735	N. Mex.	%	745	S.C.	%	755	Wis.	%
708	Colo.	%	718	Ind.	%	727	Minn.	%	736	N.Y.	%	746	S. Dak.	%	756	Wyo.	%
709	Conn.	%	719	lowa	%	728	Miss.	%	737	N.C.	%	747	Tenn.	%	Total		
710	Del.	%	720	Kans.	%	729	Mo.	%		N. Dak.	%	748	Tex.	%		ruction	100%
711	D.C.	%	721	Ky.	%	730	Mont.	%	739	Ohio	%	749	Utah	%	work	uone	100 %
Iten	is 18 and				•												
	Answer	item 20 d	only if	f your Ce	nsus File	e Num	ber (CFN)	, showr	n in the	e addres	s label of	this r	eport fo	rm, begiı	ıs with	n a zero	).
Iten	20. OW	NERSHIP	OR CC	NTROL -	If more s	space i	s needed,	attach a	separa	te sheet.							
	Does anot							Nan	ne					El Num	ber		
1	he voting lirect the	j stock of manage	f this o ment a	company	OR have ies of thi	the p	ower to pany?										
	_			ning or co				Nun	nber ar	d street				1			
Ľ	97 ILI	cor	npany	's name, a	address,												
	2		' Code,	and El n	umber			City						State	ZIF	P Code	
_		-															
	Does this																
	tock of a ower to	direct th	e mar	nagemen				Nan	ne					El Num	nber		
	other don		•					Nun	nhar ar	d street							
C	98 1			ned or col 's name, a						iu street							
	2	ZIP		and El n				City						State	ZIF	<sup>o</sup> Code	
	2	INO															
Iten	21. CER	ΤΙΕΙΩΔΤΙΟ	)N – P	rint or tvr	)e												
Peri	od cover his report	ed FROM			<b>TO:</b> M	o. Ye	ar Name	e of pers	on to c	ontact reg	garding th	is repo	ort				
Cont	act perso	n's positio	on or ti	itle	1		I			Tel	ephone	Area	a code	Number		Ext	ension
				accurate		s beer	n prepareo	<b>f</b> Sigr	nature	I			I		D	ate	

PLEASE PHOTOCOPY THIS REPORT FOR YOUR RECORDS

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM	1992 CENS	US OF CONSTRUCT	ION INDUS	TRIES	
CC-1729		OMB N	lo. 0607-0732: App	oroval Expires (	06/30/94
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to: BUREAU OF THE CENSUS	Γ		CC	-1729	
1201 East 10th Street Jeffersonville, IN 47134-0001					
Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:					
1-800-233-6136 Please read the accompanying instruction guide before answering the questions.					
Census use only					
	(Pleas	e correct any error in name, a	address, and ZIP	Code)	
YOUR RESPONSE IS REQUIRED BY LAW. this questionnaire to answer the questions ar CONFIDENTIAL. It may be seen only by Cer retained in respondents' files are immune from	nd return the report to isus Bureau employee	the Census Bureau. By the same	law, YOUR CENS	SUS REPORT I	S
Item 1. EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification (EI) Number label the SAME as that used for this esta latest 1992 Employer's Quarterly Federa Treasury Form 941?	blishment on its	Item 3. OPERATIONAL STAT a. How many months duri this firm or organizatio operate this establishm	ng 1992 did n actively	Number of m 002	onths
094 1 ☐ Yes 2 ☐ No – Enter current El Number (9 digits) → Item 2. PHYSICAL LOCATION – Answer parts a- (P.O. boxes or rural routes are not physi a. Is this establishment's physical location address shown in the label?	cal locations.)	<ul> <li>b. Mark (X) the ONE box where stablishment at the end of the end</li></ul>	of <b>1992</b> tive on – <i>Give date</i> → to another	Figures or Month Day	nly Year
093 1□Yes 2□No – Enter physical location below			e, etc., below 🖌		
Number and street	*	Number and street			
City, town, village, etc. State	ZIP Code	City	State	ZIP Code	
<ul> <li>b. Is this establishment physically located is boundaries of the city, town, village, etc.</li> <li>095 1 Yes 3 No legal boundaries 2 No 4 Do not know</li> <li>c. In what type of municipality is this establishment location of the city, village, or borough 2 Town or township 3 Other or do not know</li> <li>d. In what county is this establishment location</li> </ul>	lishment located?	Item 4. ORGANIZATIONAL S which <b>best</b> describes 003 1 Individual prop 2 Partnership 3 Cooperative ass 4 Cooperative ass (tax-exempt) 5 Government – 3 0 Corporation (Do association) 9 Other – Specify	s this establishmer rietorship sociation (taxable) sociation Specify o not mark if any fo	nt during <b>1992</b> orm of coopera	tive
If this company is not primarily engage List enclosed, please complete items telephone number in item 21. YOUR RESPONSE IS REQUIRED BY LAW.			nd enter your na		

Form CC-1729				Page 2
Item 5. EMPLOYMENT IN 1992 – Your answers should be based on all employees included on your Treasury Form 941. Do not include your subcontractors or their employees.	Employer's	Ωuarterly Fe	deral Tax	Return,
During the pay periods including the 12th of March May August and Numb	er of employ the pay peri			
a. how many construction workers were on the payroll of this establishment?         March           INCLUDE - • Apprentices         • Working foremen         • Equipment operators         1992	May 1992	Augu 1992		vember 1992
Journeymen     Job-site record keepers     Aborers     Craftsmen     Truck drivers and helpers     and mechanics     Others engaged     directly in construction	102	103	104	
b.         how many other employees were on the payroll of this establishment?         105           INCLUDE -         • Supervisors above working foremen • Personnel staff         • Office staff • Executives • Others engaged in nonconstruction         • Others engaged in nonconstruction	106	107	108	
c. how many total employees were on the payroll of this establishment?	110	111	112	
Sum lines a and b		Milliono	Thou-	Mark
HOW TO REPORT       Report dollars rounded to thousands.         DOLLAR FIGURES       Example: If a value is \$1 025 739 00 - REPORT		Millions (000)	sands (000)	(X) if "0"
DOLLAR FIGURES       Example: If a value is \$1,025,739.00 - REPORT         If a value is "0" (or less than \$500.00) - MARK (X)	>	1	026	
Item 6. PAYROLL IN 1992 BEFORE DEDUCTIONS What were the annual payroll costs to this establishment for –	Key	, Mil.	Thou.	Mark (X) if
Exclude fringe benefits.				"0"
<ul> <li>a. construction workers (as defined in item 5a)?</li> <li>b. other employees (as defined in item 5b)?</li> </ul>	117			
c. all employees? Sum lines a and b	110	-		
Items 7 and 8 – Not applicable to this report				Ĭ
Item 9. CONSTRUCTION WORK SUBCONTRACTED OUT		Mil.	Thou.	
What was the total cost to this establishment for construction work subcontracted out in 19 Exclude the cost of materials purchased by this establishment for subcontractors.	<b>992?</b>			□0
Item 10. MATERIALS, COMPONENTS, AND SUPPLIES		Mil.	Thou.	
What were the job-site, general office, and all other costs to this establishment for materials, components, and supplies in 1992?				
<b>Include</b> the cost of materials purchased by this establishment for subcontractors. Exclude the cost of	_			
• items purchased by this establishment that were installed in a building but were not part of its				
<ul><li>structure, such as production machinery, furniture, etc.</li><li>items listed in item 11.</li></ul>	125			
Item 11. SELECTED COSTS	120	, Mil.	Thou.	
What were the job-site, general office, and all other costs to this establishment in 1992 for -				
Where items are combined on your books, separate estimates are preferred.				
a. purchased electricity?	126	_		
b. natural gas and manufactured gas (propane)?	127	_		
c. gasoline and diesel fuel – ON highway?	128	_		
<ul> <li>d. gasoline and diesel fuel – OFF highway?</li> <li>all other fuels and lubricants, including heating oils, lubricating oils and greases?</li> </ul>	129	_		
Item 12. DOLLAR VALUE OF BUSINESS DONE IN 1992	130	Mil.	Thou.	
For this establishment in 1992 –		ivin.	Thou.	-
<ul> <li>a. (1) what were the receipts (or billings) for contract construction work done for others? Exclude the cost of items purchased by this establishment that were installed in a building building building building part of its structure, such as production machinery, furniture, etc.</li> </ul>	136			□0
(2) what was the estimated dollar value of speculative construction work done on reside	ential			
<ul> <li>and other building projects which you sold or intended to sell, rent or lease?</li> <li>INCLUDE the estimated dollar value of –         <ul> <li>all improvements to land associated with these building projects done by or for you in 1992.</li> <li>work actually done in 1992, whether buildings were sold or not.</li> </ul> </li> <li>and other building projects which you sold or intended to sell, rent or lease?         <ul> <li>EXCLUDE the estimated dollar value of -</li> <li>land. Even though land would gene be included in the value of your bu project, the value of the land is not considered construction work done</li> </ul> </li> </ul>	erally ilding			
<ul> <li>subdividing and preparing your own land into lots.</li> </ul>	137			0 🗌
(3) what was the estimated dollar value of construction work done for this establishmen own use, i.e., not intended for sale, rent, or done under contract for others?	n <b>t's</b> 138			□ <b>0</b>
(4) what was the total dollar value of construction work done? Sum lines (1) through (3)	?) 139			
b. what were the receipts for all other business activities done by this establishment in 199	2?			
INCLUDE –				
<ul> <li>architectural services</li> <li>construction management services</li> <li>real estate commissions and</li> <li>retail trade</li> <li>transportation</li> </ul>				
engineering services management fees      wholesale trade	tivition			
<ul> <li>manufacturing</li> <li>mining</li> <li>rental of construction machinery</li> <li>or equipment to others</li> </ul>	140			□0
c. what was the total dollar value of all business done by this establishment in 1992?				
Sum lines 12a(4) and 12b	141	1	1	

OW TO REPORT Report percents rounded to whole percents.	Census Fi						Perce	nt
ERCENTAGES Example: If figure is 38.8% – REPORT						•	<u>39</u>	%
tem 13. KIND OF BUSINESS IN 1992				201		Dam		
Vhat percent of the amount that you reported in item 12c (the total dollar	value of			Co	de		cent of siness	
usiness done in 1992) was due to - . each of the following construction activities? (As reported in item 12a)								
Bridge painting contractor				72	11			%
Painting contractor					12			%
Paper hanging contractor				72	13			%
Ship painting contractor				72	14			%
Traffic lane painting contractor				72	15			%
Other kinds of construction – <i>Refer to list</i>								%
of construction activities – Specify kind(s)								%
of construction and enter code(s)								%
<ul> <li>each of the following other business activities? (As reported in item 12 Manufacturing – products manufactured and sold to others – Specify kind</li> </ul>	(d							0/
					15			%
Retail trade – Specify kind					20			%
Wholesale trade – <i>Specify kind</i> Other business activities – <i>Specify kind</i>					22			%
The sum of the percentages reported should equal 100%.				99	99		100	
tem 14. TYPE OF CONSTRUCTION							100	70
Vhat percent of the amount you reported in item 12a(4) (the dollar value on nvolved the following types of construction? Report these percentages in Ilocate this percent according to the three categories of construction. The sum of Refer to the Instruction Guide for a step by step example and for definitions of the definitions of the second secon	column (1) of of columns (2 he three categ Per	f the table 2) through gories of c	belov 1 (4) sl	v. Then ir nould equ uction.	n colui al the tegor	mns (2), (3 entry in c	3), and columi	n (1).
Type of construction	cons	r value of struction rk done		New struction	alter	lditions, ations, or nstruction	and	ntenan d repai work
	Key	(1)	Key	(2)	Key	(3)	Key	(4)
SUILDING CONSTRUCTION								
Single-family houses, detached	301	%	401	%	501	%	601	
Single-family houses, attached, including townhouses and townhouse type condominiums	302	%	402	%	502	%	602	
Apartment buildings with two or more units, including rentals, apartment type condominiums, and cooperatives	303	%	403	%	503	%	603	
Hotels, motels, and tourist cabins	304	%	404	%	504	%	604	
Other residential buildings – Specify kind	305	%	405	%	505	%	605	
Office buildings	306	%	406	%	506	%	606	
Other commercial buildings, such as stores, restaurants, and automobile service stations	307	%	407	%	507	%	607	
Industrial buildings	308	%	408	%	508	%	608	
Warehouses	309	%	409	%	509	%	609	
Religious buildings	310	%	410	%	510	%	610	
Educational buildings	311	%	411	%	511	%	611	
Hospitals and institutional buildings	312	%	412	%	512	%	612	
Farm buildings, nonresidential	313	%	413	%	513	%	613	
Amusement, social, and recreational buildings	314	%	414	%	514	%	614	
Other nonresidential buildings – Specify kind	319	%	419	%	519	%	619	
IONBUILDING CONSTRUCTION	is, etc. 331	%	431	%	531	%	631	
IONBUILDING CONSTRUCTION Highways, streets, and related work, such as installation of guardrails, highway sign		%	441	%	541	%	641	
	341	/0	440	%	540	%	640	
Highways, streets, and related work, such as installation of guardrails, highway sign	341 340	%	440	/0			644	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways			440	%	544	%	044	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc.	340	%			544 554	%	654	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc. Harbor and port facilities	340 344	% %	444	%				
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc. Harbor and port facilities Power and cogeneration plants, except nuclear	340 344 354	% % %	444 454	% %	554	%	654	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc. Harbor and port facilities Power and cogeneration plants, except nuclear Power plants, nuclear	340 344 354 353	% % %	444 454 453	% %	554 553	% %	654 653	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc. Harbor and port facilities Power and cogeneration plants, except nuclear Power plants, nuclear Ships	340 344 354 353 395	% % % %	444 454 453 495	% % %	554 553 595	% % %	654 653 695	
Highways, streets, and related work, such as installation of guardrails, highway sign Bridges and elevated highways Tunnels: highway, pedestrian, railroad, etc. Harbor and port facilities Power and cogeneration plants, except nuclear Power plants, nuclear Ships Sewage treatment plants	340 344 354 353 395 355	% % % %	444 454 453 495 455	% % % %	554 553 595 555	% % %	654 653 695 655	
Highways, streets, and related work, such as installation of guardrails, highway sign         Bridges and elevated highways         Tunnels: highway, pedestrian, railroad, etc.         Harbor and port facilities         Power and cogeneration plants, except nuclear         Power plants, nuclear         Ships         Sewage treatment plants         Water treatment plants	340 344 354 353 395 355 365	% % % % %	444 454 453 495 455 465	% % % %	554 553 595 555 565	% % % %	654 653 695 655 665	

For	<u>m CC-</u>	1729															Page 4
lten	ns 15 and	<b>I 16 –</b> Not	t applie	cable to th	nis report												
lten	n <b>17.</b> STA	TES IN W	/HICH	CONSTRU	JCTION V	VORK	WAS DOM	NE IN 199	2								
	at percen						item 12a	(4) (the c	dollar v	alue of co	onstructio	n work	done by	this			
esta	blishment	: in 1992)	occur	red in ea	ch State	7											
Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent	Code	State	Percent
701	Ala.	%	712	Fla.	%	722	La.	%	731	Nebr.	%	740	Okla.	%	750	Vt.	%
702	Alaska	%		Ga.	%	723	Maine	%		Nev.	%		Oreg.	%	751	Va.	%
704	Ariz.	%	715	Hawaii	%	724	Md.	%		N.H.	%		Pa.	%	753	Wash.	%
705	Ark.	%	716	Idaho	%	725	Mass.	%	734	N.J.	%	744	R.I.	%	754	W. Va.	%
706	Calif.	%	717	III.	%	726	Mich.	%	735	N. Mex.	%	745	S.C.	%	755	Wis.	%
708	Colo.	%		Ind.	%	727	Minn.	%		N.Y.	%		S. Dak.	%	756	Wyo.	%
709	Conn.	%		lowa	%	728	Miss.	%		N.C.	%		Tenn.	%	Total		
710	Del.	%		Kans.	%	729	Mo.	%		N. Dak.	%	748	Tex.	%		truction done	100%
711	D.C.	%		Ky.	%	730	Mont.	%	739	Ohio	%	749	Utah	%	WORK	uone	100 /0
Iten	ns 18 and																
	Answer	item 20	only if	f your Ce	ensus File	e Num	ber (CFN	l), showi	n in th	e addres	s label of	f this r	report fo	rm, begiı	ns wit	h a zero	<b>).</b>
lten	n <b>20.</b> OW	NERSHIP	OR CC	ONTROL -	If more a	space i	s needed,	attach a	separa	te sheet.							
	Does ano							Nan	ne					El Num	nber		
	the voting direct the																
(	097 1	Yes – En	ter ow	ning or co	ontrollina			▶ Nun	nber ar	nd street							
		coi	mpany	's name, a , and El ni	address,												
	2	No	Coue,	, anu Ei m	umber			City						State	ZI	P Code	
-																	
	Does this													ELN			
	stock of a power to	direct th	ie mai	nagemen				Nan	ne					El Num	nber		
	other dor		•					Nur	nher ar	nd street							
(	098 1			ned or col r's name, a													
	2	ZIF	Code,	, and El n	umber			City						State	ZI	P Code	
	2	INO															
CO	MMENTS	– Please	use thi	is space fo	or any ex	planati	on that m	ay be es	sential	in unders	tanding y	our rep	oorted da	ta.			

Item 21. CERTIFICATION – Print or type												
Period covered by this report	FROM:	Mo.	Year	<b>TO:</b> Mo.	Year	Name of	person to contac	t regarding this	s report			
Contact person's position or title							Telephone	Area code	Number		Extension	
This report is substantially accurate and has been prepared in accordance with the instructions.				epared	Signature				Date			

### PLEASE PHOTOCOPY THIS REPORT FOR YOUR RECORDS

	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS		NNUAL SU	JRVEY	' OI		IUFAC	TURE	S
REAL OF THE COM	MA-1000(L) (8-13-91)				омв	No. 0607-0	733: Approv	al Expires	06/30/94
DUE DATE	E: FEBRUARY 15, 1993								
completing write the Co communica 11-digit Cer printed in th	questions about this report, please call or ensus Bureau. In any titon, be sure to refer to the isus File Number (CFN) he label to the right. Return eted form to:								
BUREA	U OF THE CENSUS ast 10th Street onville, IN 47134-0001								
	sistance, 8:00 a.m. to 8:00 p.m., e, Monday through Friday: 1–800–233–6136								
instructi	ead the accompanying ions before answering	1							
the ques	s <b>tions.</b> Census use only	4							
		•	Please correct any						
that recei YOUR CI	ESPONSE IS REQUIRED BY ve this questionnaire to answ ENSUS REPORT IS CONFID ical purposes. Further, copies	Per the questions	and return the re be seen only by (	port to the Census Bu	e Cens reau	sus Bureau employees	u. By the sa s and may	ame law.	
Is the En Number the one	PLOYER IDENTIFICATION NUI nployer Identification (EI) shown in the label the SA used for this establishmen	ME as t on Name	vithin your compa ion is incorrect of end of the quest	r blank, ple	tact re ease e	egarding t enter the c	orrect info	(If this rmation ir	ı item
	t 1992 Employer's Quarter Fax Return, Treasury Form	ly l				Area co		er Exte	ension
2 🗌 No –	Report current El number (9 d	igits) <sub>✔</sub> <sup>TAB</sup>	IND-6	AREA			INFL	ccs	
a. Is this est county, a	'SICAL LOCATION – <i>Answer a th</i> tablishment located in the Si nd place shown at the right?	tate,	ber and street	blace ¦ St	ate		ZIP Cod	le	
_	r incomplete, answer (1) throug SKIP to part b	h (4)) ( <b>3)</b> Coun	ty	(4	) If vo	ou correcte	d lines 1, 2	. or 3.	
	Correct or complete lines (1) thro tablishment physically loca	ough (4)		c. Type	give	e year mov	red to new l 1 □ City, vi	ocation 1	
	2 ☐ No 3 ☐ No legal b	ated in part a(2)?		mun	icipal ated	lity	2 🗌 Town o 3 🗌 Other o	or township	р С
Item 2. EM	PLOYMENT IN 1992			-	Key	19	92	199	1
	of PRODUCTION WORKER	S during pay	(1) March 12		301				
-	cluding the 12th of month		(2) May 12		302				
(Include b	ooth full- and part-time emplo	oyees)	(3) August 12 (4) November		303 304				
b. Total (S	Sum of lines (1) through (4))		(4) NOVember	12	304				
	<b>number</b> (Divide line b by 4 -	- omit fractions)			306				
	R EMPLOYEES (Pay period		12)		307				
e. Total (S	Sum of lines c and d)				308				
Item 3A. PAY	ROLL IN 1992 (Exclude supple	emental labor cos	ts)			Mil.	Thou.	Mil.	Thou.
a. Producti	on workers' wages				309				
b. All other	r salaries and wages				310		 		
	Sum of lines a and b) ST QUARTER PAYROLL IN 199	92 (Exclude supple	emental labor cos	ts)	311		 		
Total p Item 3C EM	ayroll for the first quarter PLOYER'S COST FOR FRINGE	(January-March BENEFITS (Annua	<b>h)</b> al supplemental la	abor costs)	315				
	equired, including Social s			and 3B)	312		   		
	Sum of lines a and b)				313				
	ANT HOURS WORKED BY PRO	DUCTION WORK	ERS IN 1992 (Ann	ual)	Key		Plant he	ours	
						Mil.	Thou.	Mil.	Thou.
	lant hours worked by proc		s in 1992		320	10	92	199	1
	TAL SHIPMENTS AND OTHER				Key	Mil.	Thou.	Mil.	Thou.
item 18B).	report the total value of produc This value should be compara e not comparable, please expla	ble to the total rep	ported for 1991. If	the two	330				
	R FAILURE TO REPORT				550		CONTIN		PAGE 2

F-114 AFFENDIAF	F–114	APPENDIX F
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								•		Page 2
Item 6A. VALUE OF PRODUCTS EXPORTED (This is	s a br	eakout of the	e value	repor	ted in item 5)	)		Produc	992 ts shij	pped
Report the value of PRODUCTS SHIPPED FOR EXI in the Panama Canal Zone, the Commonwealth of							Key	Mil.	   Thou.	Mark (X) if "0"
well as the value of products shipped to exporters include the value of products sold to the U.S. Gov	s or ot	her wholesa	lers for	expo	rt. Also,				1	
governments. DO NOT INCLUDE PRODUCTS SHIF ASSEMBLY, OR FABRICATION IN THE UNITED ST			ÉŔ MAN	IUFAC	ČTURE,		399		1	
Item 6B. SHIPMENTS TO OTHER DOMESTIC PLAN					ELIBTHER				992	
ASSEMBLY, FABRICATION, OR MANUFA							Key	Produc		1
a. Is the FIRST DIGIT of your Census File Num	<b>ber</b> (i	mprinted in	the add	ress b	oox) <b>"0"?</b>			Mil.	Thou.	Mark (X) if "0"
□ Yes – <i>SKIP to item 7</i> □ No – <i>Complete this item</i>										
							376		1	
b. Value of products shipped to other dome further assembly, fabrication, or manufa			our co	mpa	ny tor					0
Item 7. DEPRECIABLE ASSETS, CAPITAL EXPENDITURES, AND RETIREMENTS					199	92				
Refer to the instruction manual for		Buildings other strue			Machine and	ery			OTAL	nne
detailed instructions including how to report leasing arrangements.	Key	(exclude except ite		Key	equipme	ent	Key		and (2)	
		(1)	1		(2)	1	-		(3)	Mark (X)
	<u> </u>	Mil.	Thou.		Mil.	Thou.		Mil.	Thou.	Mark (X) if "0"
a. Gross value of depreciable assets (usually original cost) at beginning of year (exclude land)	339		1	340			341		 	
<ul> <li>b. Capital expenditures for new buildings and machinery</li> </ul>	342		1	343		 	344		 	□o
C. Capital expenditures for used buildings and machinery	345			346		 	347			□o
d. Retirements and disposition of depreciable										
assets (Gross value of assets sold, retired, scrapped, destroyed, etc.)	351	(	¦ )	352	(	,   )	353	(	¦ )	
e. Gross value of depreciable assets at end of year (Should equal a+b+c-d)	354			355		 	356		 	
Item 8. DEPRECIATION CHARGES FOR THE YEAR	357			358			359			
Item 9. RENTAL PAYMENTS (Include land)	360			361			362		1	
Item 10. BREAKDOWN OF EXPENDITURES FOR	R NEV			D					992	
EQUIPMENT BY TYPE REPORTED IN IT	EIVI /	b, column (	(2)				Key			Mark (X)
								Mil.	Thou. 	if "O" '
a. Automobiles, trucks, etc., for highway us	;e						393		1	
b. Computers and peripheral data processin	ıg eq	uipment					394			□o
c. All other expenditures for new machinery	y and	equipmen	it				395		l I	□o
d. Total (Should equal item 7b, column (2))							396			□0
Item 11. SELECTED PURCHASED SERVICES							Key		992	
(See Instruction Manual)							,	Mil.	Thou.	Mark (X) if "0"
a. Repair of buildings and other structures							390		1	□o
b. Repair of machinery							391		 	
c. Communication services (telephone, data	trar	emission	fax to	loar	anh atc.)		391		   	
· · · · · · · · · · · · · · · · · · ·		13111331011,		legic	ipii, etc./					
d. Legal services							372			
e. Accounting and bookkeeping services							373		 	
f. Advertising							374			
g. Software and other data processing servi	ices						380		1 	□0
h. Refuse removal (include hazardous waste	<b>)</b>						398			□0
	co		N PAG	iE 3						

FORM MA-1000(L) (8-13-91)

#### **CENSUS USE ONLY**

Page	3
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Item 12. COST OF MATERIALS AND CONT	RACT WO	DRK			Key	1992		1991	
					-	Mil.	Thou.	Mil.	Thou.
<ul> <li>a. Cost of materials, parts, containers, e</li> <li>b. Cost of products bought and sold as a</li> </ul>	-	•			321				
or assembly (Report sales in item 18B) c. Cost of fuels consumed for heat and p					322				
d. Cost of purchased electricity (Report of	-	itom 14 line a)			323				
	. ,				324				
e. Cost of contract work done for you by	y others	on your materials	•		325				
<ul> <li>f. Total (Sum of a through e)</li> <li>Item 13. FOREIGN CONTENT OF COST OF MAT</li> </ul>	TERIALS, C	OMPONENTS PARTS	S. FTC., U	SED	326				
a. Does this establishment use materials pur This includes foreign-made materials acquired establishment of your company. Foreign source the District of Columbia, Puerto Rico, and the U your company or someone else.	from a cen es include J.S. territor	transferred from for ntral warehouse or oth any operation outside ies, whether that oper	breign so her domes of the 50 ration is o	tic State wneo	es, d by	2 🗆 N		nswer 13b Now } SKI	below P to 14
b. If yes, what percentage (approximate) of the line a) is accounted for by foreign sources? fabricated abroad which reenter the country usu Tariff Schedule of the United States. Do not use	? Materials ually under	used should not inclu items 806 and 807, S	de items   chedule 8	partia of th	illy e	191	%		
						1992		199	
Item 14. QUANTITY OF ELECTRICITY					Key	Kilowatth Mil.	ours Thou.	Kilowatt Mil.	hours Thou.
<ul> <li><b>a. Purchased electricity</b> (Quantity compar in item 12, line d)</li> </ul>	able to co	ost reported			327				
b. Generated electricity (Gross less generated electricity)	ating stati	ion use)			328				
c. Electricity sold or transferred to othe	r establis	shments			329				
Item 15A. INVENTORIES OF THIS ESTABLISHME	NT AT END	OF YEAR (Report bot	h years)	Kev		d of 1992	Key	End of	
Report inventories at cost or market using gene	erally accer	pted accounting meth	ods.	ne y	N	/lil. Thou	. <b></b>	Mil.	Thou.
Are inventories of this establishment subject to the a. Finish LIFO method of valuation?	ned good	S		335		i	331		i
230 1 Yes – Use the sum of the LIFO amount plus	-in-proce	SS		336		I	332		
the LIFO reserve for <b>c. Mater</b>	rials, sup	plies, fuels, etc.		337		   	333		1
through e(2). Note: If you changed	tal inven	tories (Sum of a, b,	and c)	338		l	334		1
to LIFO for calendar e. Of the		n line d, report: subject to LIFO cos	sting	368			364		
$2 \square \text{No} - Complete only lines}$ (2) An		ject to LIFO costing		369			365		
Note: <i>Line e(1)</i> (1) An		wing applicable to lin he LIFO reserve	ne e(2):	370			366		
should equal line d (2) LIF	FO value o	of line e(2) (net)		371			367		
Item 15B. METHOD OF VALUATION FOR INVENTORIES NOT SUBJECT TO LIFO COSTING		Method o	of valuati	on			Key	Amount of 19 (b)	92
Using the inventory total reported for this establishment in item 15A, line e(1) for			(a)					Mil.	Thou.
1992, please indicate the breakdown of that total according to the inventory valuation methods shown.	1. Cost	a. First-in, First-o	out (FIFC	))			381		1
<ul> <li>Cost method – Report amounts on lines 1a through e.</li> </ul>		b. Average cost					383		1
<ul> <li>Market basis always used – Report amount on line 2b.</li> </ul>		c. Specific or act	tual cos	t			384		1
<ul> <li>Lower of cost or market – Report amounts</li> </ul>		d. Standard cost					385		1
valued at cost on lines 1a through e according to the applicable methods and the amount at market on line 2a. For the		e. Other – Specify	<i>'</i> <b></b>						
value reported on line 2a, indicate in the	2. Market	a. Market used fo	r valuati	ion b	ecau	se market	386		
was higher than market. For example: "FIFO."		lower than cos					387		1
		b. Market always			aluati	ion	388		· 
	Total –	Equals the total re item 15A, line e(1)	ported in for 1992	1			389		 
FORM MA-1000(L) (8-13-91)							CONT	INUE ON I	PAGE 4

1.4								Page 4
lite	m 16A. LEGAL FORM OF ORGA	ANIZATION						
	Mark (X) the ONE box that be	est describes this es						
003			5 Government		<i>c c c</i>			· . · · · · · ·
	2 Partnership 3 Cooperative association (	tavahla)	9 Other – Spec	(do not mark if any	form of c	oopei	rative associ	lation)
	4 Cooperative association (			king k				
		•						
lte	m 16B. OPERATIONAL STATU							
001	Mark (X) the ONE box that be	est describes this es	tablishment at the	end of 1992.				
001	1 In operation 2 Temporarily or seasonally	inactive					Month E	Day Year
	3 Ceased operation				ן <i>GIVE D</i>	ΔTF —		-
	4 Sold or leased TO another	operator – <i>Give date</i>	at right AND enter	name, etc., below	Enter fi			
	5 Acquired or leased FROM	l another operator -	<ul> <li>Give date at right etc., below</li> </ul>	AND enter name,	] only			
Na	ame of new/former owner or op	erator			002			
				El Number <i>(9 digi</i>	ts)	-		
Nu	umber and street		City		State		ZIP Code	
140	m 16C. OWNERSHIP, CONTR							
	. Is the FIRST DIGIT of your			a address bay) "O"	· <b>&gt;</b>			
a.	$\square$ Yes – Answer parts b–d	Census rile Numi	<b>ber</b> (imprinted in tr		ſ			
1	$\square$ No – SKIP to item 17							
007	1	<b>N</b>			Kin I C	. <b>.</b>		
097		Name and addres	s of owning or con	rolling	Kind of	DUSI	ness of this o	company
<b>р</b> .	. Is this company 1□Yes→	,						
	owned or controlled <sup>2</sup> No				El Num	ber (s	9 digits)	
	by another					_		
098	company?							
	」 . Does this	Name and addres	s of owned or cont	rolled	Kind of	busir	ness of this o	company
0.	company own ₁□∨es→							
	or control $1 \square$ 100 $\mu$ any other $2 \square$ No $\mu$				El Num	nber <i>(</i> s	9 digits)	
	company or companies?					_		
d	. Did this company operate	at more than one	location during 1	9927 If more space	e is needd	ad		
u.	attach a separate sheet.		location during			<i>.u</i> ,		
079	] 1 🗌 Yes – List additional locat	tions below.						
	₂□No – SKIP to item 17							
							Number of	Are these figures
F	Physical address of business loc		ousiness (KB) at thi on and Employer	s Sales and receipts	Annu payro		employees during pay	included
(N1	umber and street, city, State, ZIF		ification Number	10001010	payro	/II	period including	in other items on
				(3)	(4)		March 12	this report?
	(1)		(2)	Mil. Thou.		Thou.	(5)	(6)
		КВ						
								□Yes
								□No
1		КВ						
1		КВ		 				□Yes
		КВ						□Yes □No
								□ No
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
								□No □Yes
	M MA-1000(L) (8-13-91)							□No □Yes

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM	1992 CENSUS OF MANUFACTURE MEAT PROCESSING PLANTS	S	
MC-2002		07-0733: Appro	val Expires 06/30/
DUE DATE: FEBRUARY 15, 1993 If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to: BUREAU OF THE CENSUS 1201 East 10th Street		MC-2	
Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1-800-233-6136			
Please read the accompanying instructions on page 4 before answering the questions.			
Census use only			
	(Please correct any error in name, addre	ess, and ZIP Co	ode)
that receive this questionnaire to answer YOUR CENSUS REPORT IS CONFIDE only for statistical purposes. Further, con- Item 1A. EMPLOYER IDENTIFICATION NUL Is the Employer Identification (EI) Net establishment on its latest 1992 Employer 1 1 Yes	LAW. Title 13, United States Code, requires businesse or the questions and return the report to the Census Bu ENTIAL. It may be seen only by Census Bureau emplo pies retained in respondents' files are immune from le JMBER umber shown in the label the SAME as the one u sployer's Quarterly Federal Tax Return, Treasury	ureau. By the soyees and may egal process. sed for this	rganizations same law, y be used
$2\square$ No -Enter current El Number (9 digits) $\longrightarrow$			
<ul> <li>a. Is this establishment's physical local (P.O. box and rural route addresses are</li></ul>	ation the same as the address shown in the label?         not physical locations)         Number and street         City, village, or other place         c. In what type of municipality is this establish         096       1 City, village, or borough         3 Other - Specify         2 Town or township         4 Do not know         d. In what county is this establishment located	te             	ZIP Code d?
		Key	Number
Item 2. EMPLOYMENT IN 1992 a. Number of PRODUCTION WORKERS			Number
(Include both full- and part-time employ		301 302	
	(3) August 12	303	
	(4) November 12	304	
<b>b.</b> Total (Sum of lines (1) through (4))		305	
<b>c. Average number</b> (Divide line b by 4 –	omit fractions)	306	
d. All OTHER EMPLOYEES (Pay period i		307	
e. Total (Sum of lines c and d)		308	
Item 3A. PAYROLL IN 1992 (before deduct	ions)	Key	Mil. Thou
a. Production workers' wages		309	
b. All other salaries and wages		310	
c. Total (Sum of lines a and b)		311	
Item 3B. FIRST QUARTER PAYROLL IN 19 Payroll for the first quarter (Janua		315	I
Item 4. PLANT HOURS WORKED BY PRO	-	Key-	Plant hours Mil. Thou
Total plant hours worked by prod	uction workers in 1992	320	
Items 3C, 5, 6B, 8, 10, 11, 13, 14, and	<b>I5B</b> – Not applicable to this report	CONTI	NUE ON PAGE

Report the value of PRODUCT in the Panama Canal Zone, the well as the value of products s	e total value of shipments reporte S SHIPPED FOR EXPORT. Include e Commonwealth of Puerto Rico, shipped to exporters or other wh sold to the U.S. Government to b DE PRODUCTS SHIPPED FOR FU	ed in i	tem 18B)				100		
in the Panama Canal Zone, the well as the value of products s include the value of products s governments. DO NOT INCLUI ASSEMBLY, OR FABRICATION Item 7A. CAPITAL EXPENDITURES a. Capital expenditures for N	e Commonwealth of Puerto Rico, shipped to exporters or other wh sold to the U.S. Government to b DE PRODUCTS SHIPPED FOR FU	a ahini	monto to a	untomo	r0	Key	199	2	Mark (X) if
include the value of products a governments. DO NOT INCLUI ASSEMBLY, OR FABRICATION Item 7A. CAPITAL EXPENDITURE: a. Capital expenditures for N	sold to the U.S. Government to b DE PRODUCTS SHIPPED FOR FU	and l	J.S. posse	ssions,	as		Mil.	Thou.	"0"
ASSEMBLY, OR FABRICATION Item 7A. CAPITAL EXPENDITURE: a. Capital expenditures for N	LE PRODUCTS SHIPPED FOR FU	olesal	ped to for	reign	-				
a. Capital expenditures for N	A IN THE ONTED STATES.	RIHE	R MANUF	ACTURE	=,	399		1	
	S FOR 1992								Mark
		_				Key	Mil.	Thou.	(X) if "0"
(1) Buildings and other str	NEW buildings and NEW mach	inery	(exclude	land)					
	ructures					342			
(2) <u>Machinery and equipm</u>	ient					343			□0
(3) Total new capital	<b>expenditures</b> (Sum of lines (1) a	and (2	))			344		1	□o
			//			344		<b> </b>	
	JSED buildings and USED ma		-		)	347	B 4 1		
Item 7B. GROSS VALUE OF ALL D	DEPRECIABLE ASSETS (original o	cost) a	it end of 1	992		Key	Mil.	Thou.	-
· · ·	l equipment (exclude land)					356		-	
Item 9. RENTAL PAYMENTS FOR	R 1992					Key	Mil.	Thou.	Mark (X) if "0"
								1	
Item 12. COST OF MATERIALS A	I equipment (include land)					362		-	☐0 Mark
Tem 12. COST OF MATERIALS A	ND CONTRACT WORKTON 1992					Key	Mil.	Thou.	
a. Cost of materials, parts, c	containers, etc., used (Report o	detail i	n item 17)	,		321			
	and sold without further proc					322			□o
	or heat and nower					323			□o
c Cost of fuels consumed for									
c. Cost of fuels consumed for	or near and power								
<ul> <li>c. Cost of fuels consumed for</li> <li>d. Cost of purchased electric</li> </ul>						324			□0
d. Cost of purchased electric		nater	ials						□ o □ o
d. Cost of purchased electric	city ne for you by others on your r	nater	ials			324 325			
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work doin</li> <li>f. Total cost (Sum of limits)</li> </ul>	city ne for you by others on your r nes a through e)	nater		OF 199	2	324	END	       OF 199	
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work doint</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both year)</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END			OF 199	<b>2</b> Mark	324 325 326	END	                                   	
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work doint</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IS</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END	nater Key		<b>OF 199</b>       	Mark	324 325	END Mil.	OF 199	□0 1 Mark
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line</li> <li>Item 15A. INVENTORIES OF THIS I OF YEAR (Report both y Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END		END		Mark (X) if	324 325 326			□ 0 1 <i>Mark</i> (X) if
d. Cost of purchased electric e. Cost of contract work dou f. Total cost (Sum of lii Item 15A. INVENTORIES OF THIS I OF YEAR (Report both y Report inventories at cost or market using generally accepted accounting methods. Are inventories of this establishment subject to the LIFO method of	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. <u>Finished goods</u>	<b>Key</b> 335	END		<i>Mark</i> (X) if "0" □0	324 325 326 <b>Key</b> 331			□ 0 1 Mark (X) if "0" □ 0
d. Cost of purchased electric e. Cost of contract work don f. Total cost (Sum of lin Item 15A. INVENTORIES OF THIS I OF YEAR (Report both y Report inventories at cost or market using generally accepted accounting methods. Are inventories of this establishment subject to the LIFO method of valuation?	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process	Key	END		Mark (X) if "0"	324 325 326 <b>Key</b>			□ 0 1 Mark (X) if "0"
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1200 1 Yes – Use the sum of the LIFO amount plus</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc.	<b>Key</b> 335	END		<i>Mark</i> (X) if "0" □0	324 325 326 <b>Key</b> 331			□ 0 1 Mark (X) if "0" □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1 Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories	Key 335 336 337	END		<i>Mark</i> (X) if "0" □0	324 325 326 <b>Key</b> 331 332 333			□ 0 1 Mark (X) if "0" □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work doe</li> <li>f. Total cost (Sum of lie</li> <li>Item 15A. INVENTORIES OF THIS I OF YEAR (Report both y Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1 Yes - Use the sum of the LIFO amount plus the LIFO reserve</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d,	Key 335 336 337	END		Mark (X) if "0" □0 □0 □0	324 325 326 <b>Key</b> 331 332			□ 0 1 Mark (X) if "0" □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work dom</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1  Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing a through e(2). Note: If you changed to LIFO for calendar</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d, report:	Key 335 336 337	END		Mark (X) if "0" □0 □0 □0	324 325 326 <b>Key</b> 331 332 333			□ 0 1 Mark (X) if "0" □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1  Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing a through e(2).</li> <li>Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d,	Key 335 336 337	END		Mark (X) if "0" □0 □0 □0	324 325 326 <b>Key</b> 331 332 333			□ 0 1 Mark (X) if "0" □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1 □ Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing a through e(2).</li> <li>Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section.</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d, report: (1) Amount not subject	Key 335 336 337 338	END		Mark (X) if "0" 0 0 0 0	324 325 326 <b>Key</b> 331 332 333 333			□ 0 Mark (X) if "0" □ 0 □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work dom</li> <li>f. Total cost (Sum of lining the second sec</li></ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d, report: (1) Amount not subject to LIFO costing (2) Amount subject to LIFO costing (gross) f Report the following	Key 335 336 337 338 368	END		Mark (X) if "0" 0 0 0 0	324 325 326 <b>Key</b> 331 332 333 334 364			□ 0 Mark (X) if "0" □ 0 □ 0 □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work don</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1  Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing a through e(2). Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section.</li> <li>2  No - Complete only lines</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d, report: (1) Amount not subject to LIFO costing (gross)	Key 335 336 337 338 368	END		Mark (X) if "0" 0 0 0 0	324 325 326 <b>Key</b> 331 332 333 334 364			□ 0 Mark (X) if "0" □ 0 □ 0 □ 0 □ 0 □ 0
<ul> <li>d. Cost of purchased electric</li> <li>e. Cost of contract work dom</li> <li>f. Total cost (Sum of line)</li> <li>Item 15A. INVENTORIES OF THIS IN OF YEAR (Report both y)</li> <li>Report inventories at cost or market using generally accepted accounting methods.</li> <li>Are inventories of this establishment subject to the LIFO method of valuation?</li> <li>1200 1 Yes - Use the sum of the LIFO amount plus the LIFO reserve for completing a through e(2). Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section.</li> <li>2 No - Complete only lines a through e(1). Note: Line e(1)</li> </ul>	city ne for you by others on your r nes a through e) ESTABLISHMENT AT END rears) a. Finished goods b. Work-in-process c. Materials, supplies, fuels, etc. d. Total inventories (Sum of lines a, b, and c) e. Of the value on line d, report: (1) Amount not subject to LIFO costing (2) Amount subject to LIFO costing (gross) f. Report the following applicable to line e(2):	Key 335 336 337 338 368	END		Mark (X) if "0" 0 0 0 0	324 325 326 <b>Key</b> 331 332 333 334 364			□ 0 Mark (X) if "0" □ 0 □ 0 □ 0 □ 0 □ 0

Items 3C, 5, 6B, 8, 10, 11, 13, 14, and 15B – Not applicable to this report

						Page 3
FORM MC-2002 U.S. C	EPARTMENT OF COMMERCE BUREAU OF THE CENSUS		TABLISHMENT'S			
1992 CENSUS OF MAN MEAT PROCESSING PLAN			shment (Same a			
Item 16A. LEGAL FORM OF ORG Mark (X) the ONE box which be 1 Individual proprietorship 2 Partnership 3 Cooperative association (1 4 Cooperative association (1	st describes this establish 5  Gove 0  Corp axable)  9  Othe	nment during 1992. ernment – Specify poration (do not m er – Specify 7		f cooperative as	ssociation)	
Item 16B. OPERATIONAL STATU Mark (X) the ONE box which bes 1	nactive nactive te at right operator – Give date at rig nother operator – Give d name,	ght AND enter nam	e, etc., below	GIVE DATE	Month	Day Year
	•		l Number (9 digi			
Number and street		City		State	ZIP Cod	е
Item 16C. OWNERSHIP, CONTRO a. Is the FIRST DIGIT of your C Yes – Answer parts b–d No – SKIP to item 17	ensus File Number (ir	mprinted in the ac		Kind of busi		0000000000
b. Is this company 1 ☐ Yes → owned or 2 ⊡ No <del>2</del> another company?	Name and address of o	bwning or control		El Number	(9 digits)	
098       1 □ Yes →         c. Does this company own or control any other company or companies?       1 □ Yes →	Name and address of o	owned or controlle	ed company	El Number		s company
d. Did this company operate a (If more space is needed, attact 079 1 □ Yes – List additional locat 2 □ No – SKIP to item 17	h a separate sheet)	ion during 1992	?			
Physical address of business loca (Number and street, city, State, ZIP (1)	location a	ness (KB) at this Ind Employer tion Number (2)	Sales and receipts (3) Mil. Thou.	Annual payroll (4) Mil. <sup> </sup> Thou.	Number of employees during pay period including March 12 (5)	Are these figures included in other items on this report? (6)
	КВ — — — — — — — — — — — — — — — — — — —					☐ Yes ☐ No
	КВ — — — — — — — — — — — — — — — — — — —					☐ Yes ☐ No
	КВ					☐ Yes ☐ No
	солт	TINUE ON PAGE 5				

Items 3C, 5, 6B, 8, 10, 11, 13, 14, and 15B - Not applicable to this report

### INSTRUCTIONS

#### **GENERAL INFORMATION**

If you require an extension of time to complete this report, or if there are any other questions regarding this report, please write to:

# Bureau of the Census 1201 East 10th Street Jeffersonville, IN 47134-0001

Please include the 11-digit Census File Number which appears in the address box of this report form on any correspondence.

You may also call our toll free number 1-800-233-6136.

We estimate that it will take from one-half hour to six hours to complete this form, with 3.4 hours being the average. This includes time to read instructions, develop or assemble material, conduct test, organize and review the information, and maintain and report the information. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Management Services, Paperwork Reduction Project 0607-0733, Room 2027, FB3, Bureau of the Census, Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0607-0733, Washington, DC 20503.

#### **DETAILED INSTRUCTIONS FOR ITEMS 2 THROUGH 15A**

#### Item 2 – EMPLOYMENT IN 1992

Report all employees at this establishment who received pay for part of the pay period including the 12th of the specified months. Include officers at this establishment, if corporation; if an unincorporated concern, exclude proprietor or partners.

Line a, (1) through (4) – Number of production workers during the pay period including 12th of month – Report workers (up through the working supervisor level) engaged in fabricating, processing, assembling, inspecting, and other manufacturing.

Line d – All other employees – Report nonproduction (above the working supervisor level), installation and servicing of own product, sales, delivery, professional, technical, administrative, etc.

#### Item 3A – PAYROLL IN 1992 (before deductions)

Follow the definition of salaries and wages used for calculating the Federal withholding tax. Report gross earnings prior to deductions paid in the calendar year to those employees reported in item 2. Include commissions, dismissal pay, bonuses, and vacation pay.

# Item 4 – PLANT HOURS WORKED BY PRODUCTION WORKERS IN 1992 (ANNUAL)

Include all production hours worked, including overtime hours, but excluding paid vacations, etc. These should be reported as actual hours worked, not straight-time equivalent hours.

#### Item 6A – VALUE OF PRODUCTS EXPORTED

Report as exports those shipments going directly for Report as exports those shipments going directly for export, including shipments to foreign subsidiaries or foreign divisions of your company and their affiliates. Include value of products shipped to exporters or other wholesalers for export. Also include the value of products sold to the U.S. Government to be shipped to foreign governments. Do not include products shipped for further manufacture, assembly, or fabrication in the United States. Shipments to customers in the Panama Canal Zone, the commonwealth of Puerto Rico, and the United States possessions are considered exports. Before completing this item, note that the value of exports should not exceed the total value of shipments and other receipts reported in the total value of shipments and other receipts reported in item 18B.

# Item 7A – CAPITAL EXPENDITURES FOR 1992 (Exclude expenditures for land)

Include all costs actually incurred during 1992 chargeable to the fixed assets accounts and of the type for which depreciation or amortization accounts are ordinarily maintained. This should include construction and repair work performed by your own forces.

#### Item 7B – GROSS VALUE OF DEPRECIABLE ASSETS

Report the original cost of depreciable assets on the books of this establishment such as buildings, structures, machinery, and equipment for which depreciation or amortization reserves are maintained. Improvements and new construction in progress, but not completed at year-end, should be included in fixed assets at a value equal to the cumulative expenditures to the end of the year. This procedure should be followed even though the asset is not in use and is not yet being depreciated.

#### Item 9 – RENTAL PAYMENTS FOR 1992

Report rental payments made during the year to other companies for use of such fixed assets as buildings, structures, and equipment (including land). If the parent or subsidiary rents property for use of this establishment and pays the rent, the rents should be reported as if the establishment paid them.

#### Item 12 – COST OF MATERIALS AND CONTRACT **WORK FOR 1992**

Report total delivered cost after discounts and include freight of the materials actually consumed or put in production during the year. Include purchases, interplant transfers, and withdrawal from inventories.

If there are no records of consumption, purchases may be reported instead for minor items. This can also be done for major items if purchases do not differ significantly from the amounts actually used. Where consumption of major items differ significantly from purchases, consumption may be estimated by adding beginning inventories to the amount support and subtractions and incentes. amount purchased and subtracting ending inventories.

Line a – Cost of materials, parts, containers, etc., used – The delivered cost figures should cover all raw materials, containers, scrap, supplies, etc., which were: (1) put into production, (2) used as operating supplies, or (3) used in repair and maintenance. Item 12, line a should be consistent with the data in item 17.

Line b – Cost of products bought and sold without further processing or assembly – Report the cost of all products bought and sold in the same condition as when purchased and not made part of another product manufactured by this establishment. (Total sales value of all such products is to be reported in item 18B on the line for resales.)

Line c – Cost of fuels consumed for heat and power – Report the total cost of all fuels consumed for heat, power, transportation, or the generation of heat, power, transportation, or the generation of electricity. Do not include the estimated cost of fuels, such as sawdust or blast furnace gas, produced as a byproduct of your manufacturing activities. Include anthracite and bituminous coal, coke, natural and manufactured gas, fuel oil, liquefied petroleum gas, gasoline, and all other fuels, including purchased steam. Be sure to include fuel used to power delivery trucks, fork lifts, or other motor vehicles associated with the establishment.

Line d – Cost of purchased electricity – Report the total cost of electric energy purchased from other companies or received from other establishments of your company. Exclude the value of electricity generated and used at this establishment.

Line e – Cost of contract work done for you by others on your materials – If any contract work was done by others on materials furnished by your establishment, report the total payments made during the year for such work, including freight out and in. Exclude the cost of materials worked on, which should be included in item 12, line a.

# Item 15A – INVENTORIES OF THIS ESTABLISHMENT AT END OF YEAR (Report both years)

AT END OF YEAR (Report both years) Report the value of all inventories owned by this establishment regardless of where the inventories are held. If this establishment is part of a multiestablishment company, the company should assign to each establishment those inventories that the establishment is responsible for, as if it owned them. For example, in completing the report of a manufacturing establishment or sales branch, report those inventories are held elsewhere, e.g., at a warehouse operated by your company or in a public warehouse. These inventories of an operating establishment held elsewhere should not be reported on the report of the warehouse where they are actually stored. Inventories should not be duplicated on establishment reports. on establishment reports.

	MC-2002	U.S. [	DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS ES 11-DIGIT CENS					
	1992 CEN	ISUS OF MAN	IUFACTURES	Name of establis			ox)		
	MEAT PRO	CESSING PLAN	TS – Continued						
İt	em 17. CONS	UMPTION OF S	ELECTED MATERIALS	DURING 1992					
	<ul> <li>below are the manufacture, listed in item report separa you do not co parts, and su report them i at the end of \$25,000 of a of all other m 970099 8.</li> <li>Report mater transferred fr withdrawn fro lf quantities a measure spec lf the informa from your bo ACCEPTABLE</li> <li>Valuation of materials, etc delivered cos discounts and</li> </ul>	bee commonly co processing, or as 18B. Please revie itely each item co onsume the item. pplies which are n the "Cost of all this section. If you listed material, in naterials," Ce ials, parts, and su om other plants of om inventory. are requested, ple cified. ation as requested ok records, REAS i f Materials Const t, i.e., the amoun	s, and supplies listed nsumed in the seembly of the products sw the entire list and onsumed. Leave blank if If you use materials, not listed, describe and other materials " line ou consumed less than clude the value with "Cos nsus material code upplies purchased, of your company, or ease use the unit of d cannot be taken directly GONABLE ESTIMATES AR sumed – The value of the uld be based on the t and other direct charge	Material compan (the value freight a lf purch- the and the cost consum purchas adjusted inventor amount inventor amount <b>3. Contrae</b> you pur- under cc contract should i material te commis <b>4. Resales</b> those m sausage year. EX same cc carcassé s	y should be ue assigned and other h- ases or tran ounts actual of purchass of purchass d for change- ries by addi purchased or trans: <b>ct Work</b> – I chased for u ontract. Am work shou nclude freig s owned by ng products sion should <b>ct Materi</b> eat materia , smoked m CLUDE tho ondition as as later sold neless mea	from other plants e reported at their by the shipping andling charges). sfers do not diffi- ly put into produ- es or transfers. I- reirred, these amo- es in the material or transferred ar nclude as materi- use by others ma- ounts paid to the d be reported in and out. Or others but used for others under be excluded. <b>als –</b> INCLUDE O ls that were furth- eats, canned me- se materials white ourchased, also e as fresh meat (p- ts, etc.). The cost in item 12, line b	ir full econor plant, plus t er significant iction, you m dowever, if om the amou burts should ls and suppl g inventory t nd subtractin als consume iking product e companies item 12, line the other h at this estab contract or NLINES 9–1 her processed rats, etc., dur exclude purch primal and fa of such resa	nic valu the cost ty from hay repo nts be o the g ending the so the g ending the so the g ending the so the so the g ending the so the so the g ending the so the the so the so the the so the so the so the the so the so the so the the the so	of Irt g ue It
					Unit of	Consumption and of materi establishm	als received	from of	ther
Line No.		Materials, parts,	and supplies	Census material code	measure for quantities	Quantity	Cost, incl cost	uding d freight- (E)	elivery in)
Line	Animals	Materials, parts, (A)		571 (B)	measure for quantities (C)	Quantity	Cost, incl cost	uding d freight- (E)	elivery
Line	Slaughtered	(A)	Number of head	(B) 021013 8	measure for quantities (C) Number Thousanc	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
Line L	Slaughtered	(A)	Number of head Live weight	(B) 021013 8 021011 2	measure for quantities (C) Number Thousanc pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
Line	Slaughtered	(A) CATTLE	Number of head	(B) 021013 8	measure for quantities (C) Number Thousanc	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 Line	Slaughtered	(A) CATTLE CALVES	Number of head Live weight	(B) 021013 8 021011 2	measure for quantities (C) Number Thousand pounds Number	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3	Slaughtered	(A) CATTLE	Number of head Live weight Number of head	material code           571           (B)           021013 8           021011 2           021023 7	measure for quantities (C) Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
euil 1 2 3 4	Slaughtered	(A) CATTLE CALVES SHEEP AND LAMBS	Number of head Live weight Number of head Live weight	material code           571           (B)           021013 8           021011 2           021023 7           021021 1	measure for quantities (C) Number Thousanc pounds Number Thousanc	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5	Slaughtered	(A) CATTLE CALVES SHEEP AND	Number of head Live weight Number of head Live weight Number of head	material code           571           (B)           021013 8           021011 2           021023 7           021021 1           021413 0	measure for quantities (C) Number Thousanc pounds Number Thousanc pounds Number	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
eui 1 2 3 4 5 6	Slaughtered	(A) CATTLE CALVES SHEEP AND LAMBS	Number of head Live weight Number of head Live weight Number of head Live weight	material code           571           021013 8           021011 2           021023 7           021021 1           021413 0           021411 4	measure for quantities (C) Number Thousanc pounds Number Thousanc pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7	Slaughtered Meat Materials	(A) CATTLE CALVES SHEEP AND LAMBS HOGS FRESH AND FROZEN RED	Number of head Live weight Number of head Live weight Number of head Live weight Number of head	material code           571           68)           021013 8           021023 7           021021 1           021021 1           021413 0           021411 4           021313 2	measure for quantities (C) Number Thousand pounds Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7 8 9	Slaughtered Meat Materials Purchased From Other Packers	(A) CATTLE CALVES SHEEP AND LAMBS HOGS	Number of head Live weight Number of head Live weight Number of head Live weight Number of head Live weight	material code           571           (B)           021013 8           021013 7           021023 7           021021 1           021413 0           021313 2           021311 6	measure for quantities (C) Number Thousand pounds Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7 8 9 10	Slaughtered Meat Materials Purchased From Other Packers (Including interplant	(A) CATTLE CALVES SHEEP AND LAMBS HOGS FRESH AND FROZEN RED MEATS (Including	Number of head Live weight Number of head Live weight Number of head Live weight Number of head Live weight Beef	material code           571           021013 8           021011 2           021023 7           021021 1           021413 0           021411 4           021313 2           021311 6           201111 2	measure for quantities (C) Number Thousand pounds Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7 8 9 10 11 1	Slaughtered Meat Materials Purchased From Other Packers (Including interplant transfers) (Value of	(A) CATTLE CALVES CALVES SHEEP AND LAMBS HOGS HOGS FRESH AND FROZEN RED MEATS (Including variety	Number of head Live weight Number of head Live weight Number of head Live weight Number of head Live weight Beef Veal Pork Other fresh and frozen	material code       571       68)       021013 8       021013 8       021023 7       021021 1       021021 1       021413 0       021313 2       021311 6       201121 1       201121 1       201121 1	measure for quantities (C) Number Thousand pounds Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7 8 9 10 11 12	Meat Materials Purchased From Other Packers (Including interplant transfers) (Value of carcasses cut up for resale fresh should	(A) CATTLE CALVES SHEEP AND LAMBS HOGS HOGS FRESH AND FROZEN RED MEATS (Including variety meats)	Number of head Live weight Number of head Live weight Number of head Live weight Number of head Live weight Beef Veal Pork Other fresh and frozen read meats for sausage and canning	material code           571           (B)           021013 8           021013 8           021023 7           021021 1           021021 1           021413 0           021313 2           021311 6           201121 1           201121 1           201141 9           201132 8	measure for quantities (C) Number Thousanc pounds Number Thousanc pounds Number Thousanc pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)
1 2 3 4 5 6 7 8 9 10 11 12	Meat Materials Purchased From Other Packers (Including interplant transfers) (Value of carcasses cut up for resale fresh should be reported as "Cost of	(A) CATTLE CALVES SHEEP AND LAMBS HOGS HOGS FRESH AND FROZEN RED MEATS (Including variety) meats) Meat materials not separable b	Number of head Live weight Number of head Live weight Number of head Live weight Number of head Live weight Beef Veal Pork Other fresh and frozen read meats for sausage and canning	material code       571       68)       021013 8       021011 2       021023 7       021021 1       021413 0       021411 4       021313 2       021111 2       201111 2       201121 1       201121 1       201121 1       201132 8	measure for quantities (C) Number Thousand pounds Number Thousand pounds Number Thousand pounds	Quantity 573 (D)	Cost, incl cost	uding d freight- (E)	elivery in)

190032 3

209993 5

201191 4

**CONTINUE ON PAGE 6** 

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Poultry; live, fresh, frozen, or prepared

Hides and skins purchased (including transfers from other establishments of this company)

Spices and curing materials

Fo	<u>rm MC-200</u>	2						Page 6
lt	em 17. CONS	SUMPTION OF SELECTED MATERIALS D	URING 1992	– Continue	ed			
Line No.	ſ	Materials, parts, and supplies	Census material code	Unit of measure for quantities	Consumption o and of material establishmen Quantity	s received its of your Cost, inclu cost (1	from ot compan uding de freight-i ( <b>E</b> )	her iy elivery n)
	CACINICS	(A)	(B)	(C)	(D)	Millions	' sands	Dollars
19	CASINGS	Animal and collagen casings purchased (including transfers from other establishments of this company) Casings, synthetic (including	201391 0			\$	   	   
20		cellulosic and fibrous reinforced)	308012 4				1	1
21	Paperboard con	tainers, boxes, and corrugated paperboard	265001 8				<u> </u>	
22		r and plastics film, coated and laminated	267101 4				<u> </u>	- -
23	supplies consur	materials, parts, containers, and ned	970099 8				                           	
24	<b>TOTAL</b> Sum of lin	nes 1–23 should equal item 12, line a				\$		 
lt	em 18A. METH	OD OF OPERATION OF THIS ESTABLISH	IMENT DURI	ING 1992				
	<ol> <li>Custom slaugh</li> <li>Meat and poul poultry slaugh</li> <li>Manufacturing meat specialtic</li> <li>Chiefly retailin</li> </ol>	box which best describes your method of open ntering of livestock or poultry owned by other ltry products processed chiefly from livestock tered in this establishment	°S Or 			Key         ap,           401         -           402         -           403         -           404         -	Mark (. propriat 1016 - 1032 - 1057 - 1099 -	X) e box

CONTINUE WITH ITEM 18B ON PAGE 7

FOR	MC-2002	U.S. D	EPARTMENT OF COMMERCE BUREAU OF THE CENSUS		ESTABLISHME				Page 7
	1992 CEN	ISUS OF MAN	UFACTURES			ne as address bo	ox)		
	MEAT PROC	CESSING PLAN	۲S – Continued						
lt	em 18B. PROD	OUCTS AND SEI	RVICES OF THIS EST	ABLISHMENT	DURING 1992	2			
			IN	STRUCTIONS					
	listed below a make product them in the "/ establishment DO NOT COM If quantities a measure spec If the informa	ire generally mad s that are not list All other products " section at the e IBINE PRODUCT I re requested, plea ified. tion as requested ok records, REAS	nd of item 18B. PLEASE	u yoʻur to the produ and p <b>3. Cont</b> FOR as if hand XE OWN recei	company, you e transferred pr uction and a re- profits. tract Work – R YOU FROM YO they were mad , do not report DUCTS THAT Y ED BY OTHERS	acts to other esta should assign th oducts; i.e., inclu asonable proport eport PRODUCTS UR MATERIALS e in this establish on the specific p OU MADE FROM S. Report only the ssion or contract e 93000 00 8.	e full econo ide all direct ion of all ot 6 MADE BY on the speci ment. On the roduct lines MATERIAL e amount th	mic valu costs c her cost OTHERS ific lines ne other S at you	of :s S
	products ship selling value,	ped and services f.o.b. plant to the l allowances, and	ort the value of the performed at the net customer; i.e., after exclusive of freight	<b>4. Resa</b> origi casin inclu Cens	iles – Products nally purchased gs, etc., and wh ded on lines 1– us product code	which you purcha , including meats nich are not made 47 should be repo 99989 00 6. Incl d from purchased	s, hides, skir e part of any orted as "Re ude also the	s, pelts produc sales" fo	ts or
						Products ship	ped and oth	er recei	ipts
No.		Product	s and services		Census product code	Quantity (Thousand		f.o.b. pl	-
Line			(A)		581 (B)	583 pounds)	584 Millions	Thou- sands	   . Dollars
1	Fresh and Frozen	BEEF (20111)	Whole carcass and hall carcass beef	f	20111 12 6		\$	1	
2	Meat, From Animals		Primal cuts		20111 14 2				   
3	Slaughtered in This Plant, Not		Subprimal and fabricat packaged in plastics (b		20111 16 7				
4	Canned or Made Into Sausage		Other subprimal and fa	abricated cuts	20111 18 3				 <del> </del>
5	Jausaye		Boneless beef (includir	ng hamburger)	20111 31 6			i	 <del> </del>
6			Variety meats (edible o	organs)	20111 51 4			1	1
7			Other edible beef (including corned beef	)	20111 71 2				 
8		VEAL (20112)	Whole carcass veal		20112 12 4			 	   
9			Primal cuts, fabricated boneless veal	cuts, and	20112 17 3			 	   
10			Other edible veal (including edible organ	ns)	20112 61 1			   	1   
11		PORK <b>(20114)</b>	Whole carcass pork		20114 12 0			   	 
12			Primal, subprimal, and cuts (including trimmir		20114 17 9			i 1	 
13			Variety meats (edible c	organs)	20114 51 8		ļ	i	 
14	Pork, Processed or Cured	Sweet-pickled o	r dry-cured (not smoked	l or cooked)	20136 12 3			-   	 
15	(Not Canned	Dry salt pork			20136 22 2			1	1
16	(20136)	SMOKED PORK (Not otherwise cooked)	Hams and picnics (exc	ept canned)	20136 31 3			 	 
17			Slab bacon		20136 35 4			·   	1
18			Sliced bacon		20136 41 2			 	 
19		Boiled ham har	Other smoked pork	ooked pork	20136 52 9			I I	 
20		except canned	becue pork, and other c meats and sausage)	ooked pork	20136 61 0				I

CONTINUE WITH ITEM 18B ON PAGE 8

lt	em 18B. PROD	OUCTS AND SERVICES OF THIS ESTABLISHMENT	DURING 1992	1			
No.		Products and services	Census product	Products shipp Quantity		f.o.b. pl	
Line		Troducts and services	code 581	(Thousand <sub>583</sub> pounds)	584	(E)	<del>1</del>
	SAUSAGE AND	(A)	(B)	(D)	Millions	sands	Dollars
21	SIMILAR PRODUCTS,	Fresh sausage (pork sausage, breakfast links, etc.)	20137 11 3		\$		 +
22	(2013/)	Dry or semidry (salami, cervelat, pepperoni, beefjerky, summer sausage, pork roll, etc.)	20137 17 0				 <del> </del>
23	(Report similar products made from poultry	Frankfurters (including wieners)	20137 21 2				 +
24	on lines 26–29)	Other sausage, smoked or cooked (bologna, liverwurst, Polish sausage, packed luncheon meats, minced roll, smoked pork sausage, etc.)	20137 35 2				
25		Jellied goods and similar preparations, not canned (headcheese, meat loaves, scrapple, puddings, chili con carne, imitation sausage, etc.)	20137 91 5				-   
26	COOKED OR SMOKED	Turkey, except frankfurters, bologna, and luncheon meats	20155 31 3				1
27	POULTRY PRODUCTS	Chicken, except frankfurters, bologna, and luncheon meats	20155 32 1			1	<del> </del> 
28	(Except canned)	Frankfurters (including wieners)	20155 33 9			1	<del> </del>
29		Hams, bologna, and luncheon meats	20155 34 7				1
30	CANNED MEATS (Excluding cat and dog food)	Baby food	20321 00 6				   
	CONTAINING 20 PERCENT OR						 
31 32	SAUSAGE	Other Natural (beef, hog, etc.)	20138 00 4 2011B 45 4			<u> </u> 	<u> </u> 
33	o, lonveo	Collagen	2013B 21 3			<u> </u> 	<u> </u> 
	OTHER PROCESSED,	Frozen ground meat patties	2013B 11 4			   	<u> </u>   
35	FROZEN, OR COOKED	Pork rind pellets, including pork cracklings	2013B 17 1			<u> </u>   	<u> </u>   
36	MEATS	Frozen portion control	2013B 13 0			   	   
37		Subprimal and fabricated cuts packaged in plastics (boxed beef) made from purchased carcasses	95120 11 9				   
		Other processed, frozen, or cooked meats, such as corned beef, frozen primal and fabricated cuts, frozen variety meats, etc. (made from purchased meat) - <i>Specify type of product</i>					     
38			2013B 18 9			 	 <del> </del>
39	Lard		20137 41 0				1
	ALL OTHER PRODUCTS MADE IN THIS ESTABLISH- MENT	Describe and report separately each product with a sales value of \$50,000 or more which cannot be assigned to one of the lines above. For all remaining products, write "Other" and report a single total value.	18			   	   
40			26			 	1 <del>1</del>
41						 	 <del> </del>
42			34			 	 <del> </del>
43			42 59			1	 
44			67				 
45						1	 
46			75			 	 
47			83			1	<u> </u>
		CONTINUE WITH ITEM 18B	ON PAGE 9				

### FORM MC-2002

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

#### ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

Name of establishment (Same as address box)

1992 CENSUS OF MANUFACTURES MEAT PROCESSING PLANTS – Continued

lt	em 18B. PROI	DUCTS AND SERVICE	S OF THIS ES	TABLISH	IMEN	T DURING	1992	- Cont	inued				
						Cens		Produ	ıcts ship	ped and	other	recei	pts
Line No.		Products and	services			prod	uct		antity Jusand	Val	ue, f.o <b>(E</b>		ant
ine						581	ie	583 po	unds)	584	1	Thou-	
		(A)				(В	)		(D)	Millic	ons s	sands	Dollars
48	CONTRACT WORK	Receipts for work don materials (except rece owned by others). Rep <i>Describe below produ</i>	pipts for slaught port this on line	er of anin 49	nals 		00 8			\$			
						_							
49	Receipts for sla	ughtering animals own	ed by others			20110	93 8				l		
50	MISCELLA- NEOUS RECEIPTS	Miscellaneous receipt work, etc.)		-		99980	00 5						
51	RESALES	Sales of products bou manufacture, process establishment. Include purchased carcasses. be reported in item 12	ing, or assembl e sales of fresh the cost of such	ly in this meat fron	n	99989	00.6						
51	TOTAL	· · · · ·				00000	000						
52		<b>alue of shipments an</b> nes 1–51, column (E)	a other receip	15		77000	00 8			\$	1	1	
It	ems 19–21 – ľ	Not applicable to this	report										
		FICATION – This report		•	te and	has been	· ·						
	ame of person to	o contact regarding this	s report (Print o	or type)		Telephone	Area 2	a code	Numb	er	E	Exten	sion
N	ame of company	/				ess (Numbe	er and	street, c	ity, Stat	e, ZIP Co	ode)		
	eriod covered	FROM: Month 666 1 prized person	Day	Yea     Title	r	TO: Mo	onth		Da 		Ye   Date	ear	
-													
		PLEAS	Е РНОТОСОР	Y THIS F	ORM	FOR YOU	REC	URDS					

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM	1992 CENSUS OF MAN DAIRY PRODUCTS	IUFACTURES	
MC-2004		OMB No. 0607-0733: Appr	oval Expires 06/30/94
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to:			2004
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001			
Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1-800-233-6136			
Please read the accompanying instructions on page 4 before answering the questions.			
Census use only			
	(Please correct any err	or in name, address, and ZIP (	Code)
that receive this questionnaire to answe YOUR CENSUS REPORT IS CONFIDE only for statistical purposes. Further, cop Item 1A. EMPLOYER IDENTIFICATION NU Is the Employer Identification (EI) No establishment on its latest 1992 Em	vies retained in respondents' files ar MBER Imber shown in the label the SA	e immune from legal process. ME as the one used for this	
$2\square$ No – <i>Enter current</i> <i>El Number (9 digits)</i> $\longrightarrow$			
<ul> <li>a. Is this establishment's physical local (P.O. box and rural route addresses are □Yes □No - Enter physical location →</li> <li>b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?</li> </ul>	not physical locations) Number and street City, village, or other place <b>c. In what type of municipality</b> 096 1 City, village, or borough 3	State	ZIP Code
<sup>095</sup> 1 Yes 3 No legal boundaries 2 No 4 Do not know	d. In what county is this establi	ishment located?	
Item 2. EMPLOYMENT IN 1992		Кеу	Number
a. Number of PRODUCTION WORKERS period including the 12th of month	during pay (1) <u>March 12</u>	301	
(Include both full- and part-time employ	ees) (2) May 12	302	
	(3) August 1	2 303	
	(4) Novembe	er 12 304	
<b>b.</b> Total (Sum of lines (1) through (4))		305	
	mit functional		
c. Average number (Divide line b by 4 – c		306	
d. All OTHER EMPLOYEES (Pay period in	cluding March 12)	307	
e. Total (Sum of lines c and d) Item 3A. PAYROLL IN 1992 (before deduct)	ons)	308 Key	Mil. <sup>†</sup> Thou.
a. Production workers' wages	510,	309	
<ul> <li>b. All other salaries and wages</li> </ul>		310	
c. Total (Sum of lines a and b) Item 3B. FIRST OUARTER PAYROLL IN 199	2 (before deductions)	311	
Payroll for the first quarter (Januar Item 4. PLANT HOURS WORKED BY PRO	-	315	 Plant hours
TEANT HOURS WORKED BY PRO	COLICIA MORKERS IN 1992 (ANNI	JAL) Key	Mil. Thou.
Total plant hours worked by produ Items 3C, 5, 6B, 8, 10, 11, 13, 14, and 1		320 CONT	TINUE ON PAGE 2

Form MC-2004									Page 2
	XPORTED total value of shipments report S SHIPPED FOR EXPORT. Includ			ustome	re	Key	199	2	Mark (X) if
in the Panama Canal Zone, the	Commonwealth of Puerto Rico hipped to exporters or other wh	, and ່ ເ	J.S. posses	ssions,	as		Mil.	Thou.	"0"
include the value of products s	old to the U.S. Government to DE PRODUCTS SHIPPED FOR FU	be ship	oped to for	eign		399			□o
Item 7A. CAPITAL EXPENDITURES	5 FOR 1992						N 4:1		Mark
a. Capital expenditures for N	EW buildings and NEW mac	ninerv	(exclude	land)		Кеу	Mil.	Thou. 	(X) if "0"
(1) Buildings and other str	C C	,	(0.010000			342			□o
(2) Machinery and equipme								1	
						343			
(3) Total new capital e	expenditures (Sum of lines (1)	and (2	2))			344			
b. Capital expenditures for U			-		)	347		<u></u>	
Item 7B. GROSS VALUE OF ALL D		cost) a	at end of 19	992		Кеу	Mil.	Thou.	
Buildings, machinery, and Item 9. RENTAL PAYMENTS FOR						356		<u> </u>	Mark
	1002					Key	Mil.	Thou.	(X) if "0"
Buildings, machinery, and	equipment (include land)					362		1	□o
Item 12. COST OF MATERIALS AN	ND CONTRACT WORK FOR 1992	2				Key	Mil.	Thou.	Mark (X) if "0"
a. Cost of materials, parts, c	ontainers, etc., used (Report	detail	in item 17)			321			
<b>b.</b> Cost of products bought a (Report sales in item 18B)	nd sold without further proc	essin	g or asse	mbly		322			□o
c. Cost of fuels consumed fo	r heat and power					323		i I	□o
d. Cost of purchased electric	ity					324			□o
e. Cost of contract work don	e for you by others on your	mater	rials			325			□o
f. Total cost (Sum of lir	es a through a)					326		1	
Item 15A. INVENTORIES OF THIS E	STABLISHMENT AT END		END	OF 199	2	520	END	OF 199	1
OF YEAR (Report both year Report inventories at cost or market using generally accepted accounting methods.	ears)	Key	Mil.	  Thou. 	Mark (X) if "0"	Key	Mil.	  Thou. 	Mark (X) if "0"
Are inventories of this	a. Finished goods	335			□o	331			□o
establishment subject to the LIFO method of	b. Work-in-process							İ	
<b>valuation?</b> $1 \square$ Yes – Use the sum of the	c. Materials, supplies,	336				332			
LIFO amount plus the LIFO reserve	fuels, etc. d. Total inventories	337				333		<u> </u>	
for completing a through e(2).	(Sum of lines a, b, and c) e. Of the value on line d,	338		<u> </u>		334		<u> </u>	
Note: If you changed to LIFO for calendar	report:								
year 1992, specify in the REMARKS	(1) Amount not subject to LIFO costing	368			□o	364			□o
section. 2□ No – <i>Complete only lines</i>	(2) Amount subject to LIFO costing (gross)	369			□o	365		1	□o
a through e(1).	f. Report the following applicable to line e(2):			1				1	
should equal line d.	(1) Amount of the								
	LIFO reserve (2) LIFO value of	370		+		366			
	line e(2) (net)	371			□0	367		 	□0
	CONTINUE ON	PAGE	3						

Items 3C, 5, 6B, 8, 10, 11, 13, 14, and 15B - Not applicable to this report

						Page 3
FORM MC-2004 U.S. D	EPARTMENT OF COMMERCE BUREAU OF THE CENSUS		STABLISHMENT'S			
1992 CENSUS OF MAN DAIRY PRODUCTS – C			ishment (Same as			
Item 16A.         LEGAL FORM OF ORG. Mark (X) the ONE box which bes           003         1         Individual proprietorship           2         Partnership         3         Cooperative association (t           4         Cooperative association (t         4	st describes this establish 5	ernment – <i>Specify</i>		f cooperative as	sociation)	
Item 16B.       OPERATIONAL STATU         Mark (X) the ONE box which bes         001       1 □ In operation         2 □ Temporarily or seasonally i         3 □ Ceased operation - Give da         4 □ Sold or leased TO another of         5 □ Acquired or leased FROM a         Name of new/former owned         Number and street         Item 16C.       OWNERSHIP, CONTRO         a. Is the FIRST DIGIT of your C	t describes this establish nactive te at right operator – Give date at rig nother operator – Give d name, r or operator	ght AND enter nan late at right AND e etc., below City OPERATIONS	ne, etc., below nter	GIVE DATE Enter figures only 002 ts) State	Month ZIP Cod	Day Year
<ul> <li>Yes - Answer parts b-d</li> <li>No - SKIP to item 17</li> <li>097</li> <li>b. Is this company 1 □ Yes → owned or controlled by another company?</li> <li>098</li> <li>c. Does this 1 □ Yes →</li> </ul>	Name and address of c			El Number Kind of busin	(9 digits)	
company own or control any other company or companies?       2 □ No ▼         d. Did this company operate at (If more space is needed, attack 2 □ No − SKIP to item 17	h a separate sheet)	ion during 1992	27	El Number	(9 digits)	
Physical address of business loca (Number and street, city, State, ZIP (1)	Code) location au Identificat	ness (KB) at this nd Employer tion Number (2)	Sales and receipts (3) Mil.   Thou.	Annual	Number of employees during pay period including March 12 (5)	Are these figures included in other items on this report? (6)
	КВ					□ Yes □ No □ Yes □ No
	КВ — — — — — — — — — — — — — — — — — — —					□ Yes □ No
	CON7 and 15B – Not applicat	TINUE ON PAGE 5	5			

### INSTRUCTIONS

If you require an extension of time to complete this report, or if there are any other questions regarding this report, please write to:

# Bureau of the Census 1201 East 10th Street Jeffersonville, IN 47134-0001

Please include the 11-digit Census File Number which appears in the address box of this report form on any correspondence.

You may also call our toll free number 1-800-233-6136.

**DETAILED INSTRUCTIONS FOR ITEMS 2 THROUGH 15A** 

#### Item 2 – EMPLOYMENT IN 1992

Report all employees at this establishment who received pay for part of the pay period including the 12th of the specified months. Include officers at this establishment, if a corporation; if an unincorporated concern, exclude proprietor or partners.

Line a, (1) through (4) – Number of production workers during the pay period including 12th of month – Report workers (up through the working supervisor level) engaged in fabricating, processing, assembling, inspecting, and other manufacturing.

**Line d – All other employees –** Report nonproduction personnel, including those engaged in supervision (above the working supervisor level), installation and servicing of own product, sales, delivery, professional, technical, administrative, etc.

#### Item 3A – PAYROLL IN 1992 (before deductions)

Follow the definition of salaries and wages used for calculating the Federal withholding tax. Report gross earnings prior to deductions paid in the calendar year to those employees reported in item 2. Include commissions, dismissal pay, bonuses, and vacation pay.

# Item 4 – PLANT HOURS WORKED BY PRODUCTION WORKERS IN 1992 (ANNUAL)

Include all production hours worked, including overtime hours, but excluding paid vacations, etc. These should be reported as actual hours worked, not straight-time equivalent hours.

#### Item 6A – VALUE OF PRODUCTS EXPORTED

Item 6A - VALUE OF PRODUCTS EXPORTED Report as exports those shipments going directly for export, including shipments to foreign subsidiaries or foreign divisions of your company and their affiliates. Include value of products shipped to exporters or other wholesalers for export. Also include the value of products sold to the U.S. Government to be shipped to foreign governments. Do not include products shipped for further manufacture, assembly, or fabrication in the United States. Shipments to customers in the Panama Canal Zone, the commonwealth of Puerto Rico, and the United States possessions are considered exports. Before completing this item, note that the value of exports should not exceed the total value of shipments and other receipts reported in item 18B. item 18B.

# Item 7A – CAPITAL EXPENDITURES FOR 1992 (Exclude expenditures for land)

Include all costs actually incurred during 1992 chargeable to the fixed assets accounts and of the type for which depreciation or amortization accounts are ordinarily maintained. This should include construction and repair work performed by your own forces.

#### Item 7B – GROSS VALUE OF DEPRECIABLE ASSETS

Report the original cost of depreciable assets on the books of this establishment such as buildings, structures, machinery, and equipment for which depreciation or amortization reserves are maintained. Improvements and new construction in progress, but not completed at year-end, should be included in fixed assets at a value equal to the cumulative expenditures to the end of the year. This procedure should be followed even though the asset is not in use and is not yet being depreciated.

#### Item 9 – RENTAL PAYMENTS FOR 1992

Report rental payments made during the year to other companies for use of such fixed assets as buildings, structures, and equipment (including land). If the parent or subsidiary rents property for use of this establishment and pays the rent, the rents should be reported as if the establishment paid them.

We estimate that it will take from one-half hour to six hours to complete this form, with 3.4 hours being the average. This includes time to read instructions, develop or assemble material, conduct test, organize and review the information, and maintain and report the information. If you have any comments regarding these optimates or any other conset of this query cond them estimates or any other aspect of this survey, send them to the Associate Director for Management Services, Paperwork Reduction Project 0607-0733, Room 2027, FB3, Bureau of the Census, Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0607-0733, Washington, DC 20503.

# Item 12 – COST OF MATERIALS AND CONTRACT WORK FOR 1992

Report total delivered cost after discounts and include freight of the materials actually consumed or put in production during the year. Include purchases, interplant transfers, and withdrawal from inventories.

If there are no records of consumption, purchases may be reported instead for minor items. This can also be done for major items if purchases do not differ significantly from the amounts actually used. Where consumption of major items differ significantly from purchases, consumption may be estimated by adding beginning inventories to the amount purchased and subtracting ending inventories.

Line a – Cost of materials, parts, containers, etc., used – The delivered cost figures should cover all raw materials, containers, scrap, supplies, etc., which were: (1) put into production, (2) used as operating supplies, or (3) used in repair and maintenance. Item 12, line a should be consistent with the data in item 17.

Line b – Cost of products bought and sold without further processing or assembly – Report the cost of all products bought and sold in the same condition as when purchased and not made part of another product manufactured by this establishment. (Total sales value of all such products is to be reported in item 18B on the line for resales.)

Line c – Cost of fuels consumed for heat and power – Report the total cost of all fuels consumed for heat, power, transportation, or the generation of electricity. Do not include the estimated cost of fuels, such as sawdust or blast furnace gas, produced as a byproduct of your manufacturing activities. Include anthracite and bituminous coal, coke, natural and manufactured gas, fuel oil, liquefied petroleum gas, gasoline, and all other fuels, including purchased steam. Be sure to include fuel used to power delivery trucks, fork lifts, or other motor vehicles associated with the establishment.

Line d – Cost of purchased electricity – Report the total cost of electric energy purchased from other companies or received from other establishments of your company. Exclude the value of electricity generated and used at this establishment.

Line e – Cost of contract work done for you by others on your materials – If any contract work was done by others on materials furnished by your establishment, report the total payments made during the year for such work, including freight out and in. Exclude the cost of materials worked on, which should be included in item 12, line a.

# Item 15A – INVENTORIES OF THIS ESTABLISHMENT AT END OF YEAR (Report both years)

Report the value of all inventories owned by this Report the value of all inventories owned by this establishment regardless of where the inventories are held. If this establishment is part of a multiestablishment company, the company should assign to each establishment those inventories that the establishment is responsible for, as if it owned them. For example, in completing the report of a manufacturing establishment or sales branch, report those inventories that are attributable to its operations, even if the inventories are held elsewhere e d, at a warehouse onerated by your elsewhere, e.g., at a warehouse operated by your company or in a public warehouse. These inventories of an operating establishment held elsewhere should not be reported on the report of the warehouse where they are actually stored. **Inventories should not be duplicated on establishment reports.** 

	DAIRY	PRODUCTS – Continued						
lte	em 17. CONS	JMPTION OF SELECTED MATERIALS						
	below are the manufacture, listed in item report separa you do not co parts, and su report them i at the end of \$25,000 of a I of all other m 970099 8. Report mater transferred fr withdrawn fro If quantities a measure spec	e materials, parts, and supplies listed be commonly consumed in the processing, or assembly of the products 18B. Please review the entire list and tely each item consumed. Leave blank if onsume the item. If you use materials, oplies which are not listed, describe and n the "Cost of all other materials " line this section. If you consumed less than isted material, include the value with "Cost aterials ," Census material code als, parts, and supplies purchased, om other plants of your company, or om inventory. re requested, please use the unit of cified. tion as requested cannot be taken directly ok records, REASONABLE ESTIMATES ARE	compan (the valu freight a lf purch- the amo the cost consum purchas adjusted inventor amount inventor <b>3. Contra</b> you pur- under or contract should i material in makir	y should be ue assigned and other ha ases or trans- of purchase ption differs ed or transfe ies by addin purchased or y. <b>ct Work</b> – In chased for us ontract. Amo work should nclude freigh s owned by g products 1	om other plants reported at their by the shipping indling charges). affers do not diffe / put into produc s or transfers. Hisignificantly from arred, these amo s in the materials g the beginning or transferred and clude as materials se by others make unts paid to the l be reported in in t in and out. On others but used a be excluded.	full econom plant, plus t r significant ction, you m owever, if m the amou unts should s and suppli inventory to d subtracting lls consume companies item 12, line the other ha at this estab	nic valu he cost ly from ay repo nts be es o the g endin d those s for yo doing th e, and and, lishmer	of ort g u ie
:	materials, etc delivered cos discounts and	Materials Consumed – The value of the , consumed should be based on the t; i.e., the amount paid or payable after i including freight and other direct charges equiring the materials.	transfer and sold assemb item 17 this esta	red from oth d without fur ly should be below. The v ablishment sl	roducts bought a er establishment ther manufacture reported in item value of these pro- nould be reported 99989 00 6, "Re	s of your co e, processing 12, line b, n oducts shipp d in item 18 sales."	g, or ot in bed by B under	
No.		Materials, parts, and supplies	Census material code	Unit of measure for	Consumption and of materia establishme	Is received ints of your Cost, inclu	from o compa	ther אי elivery
Line N			571	quantities	Quantity 573	574	(E)	1
_		(A)	(B)	(C)	(D)	Millions	sands	Dollars
1	Whole milk		024111 7			\$		
2	Fluid skim milk		202612 8	Cwt.				 
3	Cream		202613 6	↓ ↓			1	1
4	Butter		202101 2					
5	Condensed and	evaporated milk	202301 8	Thousand pounds				 
6	Dry milk		202311 7					 
7	Natural cheese,	other than cottage cheese	202210 1	↓ ↓				 
8	DAIRY PRODUCT	Ice cream mixes	202403 2	] ↑				 
9	MIXES	Sherbet mixes	202404 0	Thousand			1	1
10		Ice milk mixes	202405 7	gallons			1	i
11		Frozen yogurt mixes	202407 3	1 ↓				
12	Fats and oils. al	l types (purchased as such)	207006 8	<b>↑</b>			1	1
13	SWEETENERS	High fructose corn syrup (HFCS) (in terms of sugar solids)	204604 3	Thousand				 
14		Crystalline fructose (dry fructose)	204611 8	pounds				
15		Dextrose and corn syrup including corn syrup solids (dry weight)	204612 6	] ↓				
16		Sugar (cane and beet) (in terms of sugar solids)	206011 9	Short tons				
17	Whey, liquid, co products in terr	ncentrated, dried, and modified whey ns of solids	202302 6	↑ Thousand pounds				

190035 6

¥

ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

Name of establishment (Same as address box)

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

**1992 CENSUS OF MANUFACTURES** 

FORM MC-2004

CONTINUE ON PAGE 6

Page 5

18 Casein and caseinates

1

tem 17. CONSUMPTION OF SELECTED MATERIALS DURING 1992 - Continued         Operation of purchased materials, parts, and supplies         Consumption of purchased materials of vious formpane material code         Consumption of purchased materials of vious formpane material code         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Consumption of purchased materials         Plastics resins consumed in the form of granules, ports, liquids         Plastics foil, and coated paper         Contrainers         Plastics foil, and coated paper         Contrainers         Plastics consumed in the form of sheets, ages plastics, foil, and coated paper         Contrainers         Plastics containers         Plastics containers, except bags	lte	em 17. CONSU	JMPTION OF SELECTED MATERIALS	DURING 1992 -	- Continued	1			
0     Materials, parts, and supplies     Census code     Unit of materials     and of materials received from ot supplies       0     Materials, parts, and supplies     Census code     Census for quantities     Cost, including de costing, chocolate flavoring, etc.)       0     Chocolate (compounds, cocoa, chocolate liquor, coatings, chocolate flavoring, etc.)     206601 7     Thousand     Cost, including de coatings, chocolate flavoring, etc.)       1     Flavorings (natural, artificial, imitation, etc.), except chocolate, supplies, powders, liquids, etc., but excluding sheets, palets, powders, liquids, etc., but excluding sheets, palets, powders, liquids, etc., but excluding sheets, palets, powders, liquids, etc., but excluding sheets, rods, tubes, and shapes     Thousand pounds     Image: state in the pounds       12     Plastics resins consumed in the form of granules, palets, powders, liquids, etc., but excluding sheets, rods, tubes, and other shapes     287101 4     Image: state in the pounds       12     Fackaging paper and plastics film, coated and reminated     267301 0     Image: state in the pounds     Image: state in the pounds       13     Bags; plastics, foil, and coated paper     267301 0     Image: state in the palets, product consumed in the form of sheets, rods, tubes, and other shapes     308007 4       14     Plastics containers     322101 7     Image: state in the palets product consumed in the form of sheets, rods, tubes, and other shapes     308007 8       15     Contrainers, part, can lids, and ends     341101 4					-	-			
B         Channel of the standard	ö	I	Materials, parts, and supplies	material	measure	and of materi	als received ents of your Cost, inclu	from ot compar uding de	her y eliver
G         (A)         571 (B)         (C)         573 (D)         574 Millions         Thous Millions           9         Chocolate (compounds, cocoa, chocolate liquor, coatings, chocolate flavoring, etc.)         206601 7         Thousand pounds         \$         1           9         Flavorings (natural, artificial, imitation, etc.), except chocolate         190036 4         1         1         1           9         Flavorings (natural, artificial, imitation, etc.), politics, powders, liquids, etc., but excluding sheets, politics, powders, liquids, etc., but excluding sheets, politics, tobs, and shapes         282104 9         Thousand pounds         1         1           12         Packaging paper and plastics film, coated and laminated         267101 4         1         1         1           13         Bags; plastics, foil, and coated paper         267301 0         1         1         1           14         Cost of all other materials, except bags         308007 4         1         1         1           15         Cost of all other materials, parts, containers, except bags         308015 7         1         1         1           16         Cost of all other materials, parts, containers, and supplies consumed         341101 4         1         1         1           17         Secot of all other materials, etc., included in this value.	ž			code		Quantity	cost (	-	in)
(A)       (B)       (C)       (D)       Millions       sands         Chocolate (compounds, cocoa, chocolate liquor, coatings, chocolate flavoring, etc.)       206601 7       Thousand pounds       s       1         Plastics resins consumed in the form of granules, prode, these, and shapes       190036 4       1       1         Plastics resins consumed in the form of granules, prodet, these, and shapes       282104 9       Thousand pounds       1         Plastics resins consumed in the form of granules, prodet, these, and shapes       287101 4       1       1         Packaging paper and plastics film, coated and laminated       267101 4       1       1       1         Plastics products consumed in the form of sheets, rods, tubes, and shapes       308007 4       1       1       1         Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4       1       1       1         Plastics containers       322101 7       1       1       1       1       1         Plastics containers, boxes and corrugated paperboard       265001 8       1       1       1       1       1       1         Cost of all other materials, parts, containers, and supplies consumed in materials, etc., included in this value.       970099 8       1       1       1       1       1	Ē						574	Thou-	1
9       coatings, chocolate flavoring, etc.)       206601 7       pounds       \$       I         •       Flavorings (natural, artificial, imitation, etc.), except chocolate       190036 4       I       I         •       Plastics resins consumed in the form of granules, puelets, powders, liquids, etc., but excluding sheets, and shapes       282104 9       Thousand pounds       I         2       Packaging paper and plastics film, coated and liaminated       267101 4       I       I         3       Bags: plastics, foil, and coated paper       267301 0       I       I         4       Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4       I       I         5       CONTAINERS       Glass containers       322101 7       I       I       I         7       Rest containers, except bags       308015 7       I       I       I       I         8       Cost of all other materials, park, containers, not       265001 8       I       I       I         9       Store of all other materials, park, containers, and spectore on the three principal materials, etc., included in this value.       970099 8       I       I       I         9       TOTAL       Sum of lines 1-29 should equal item 12, line a       I       I       I       I	_		(A)	(B)	(C)	(D)	Millions	sands	Doll
Flavorings (natural, artificial, imitation, etc.), except chocolate       190036 4         Plastics resins consumed in the form of granules, pellets, powders, liquids, etc., but excluding sheets, rods, tubes, and shapes       7         Bags: plastics, foil, and coated paper       267101 4         Bags: plastics, foil, and coated paper       267301 0         Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4         CONTAINERS       Glass containers       322101 7         Image: Contrainers       322101 7         Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4         CONTAINERS       Glass containers       322101 7         Plastics containers, except bags       308015 7       1         Paperboard containers, boxes and corrugated paperboard       265001 8       1         Metal cans, can lids, and ends       341101 4       1         Supplies consumed       970099 8       1         Describe the three principal materials, etc., included in this value.       970099 8       1         O       TOTAL Sum of lines 1–29 should equal item 12, line a       \$       \$		Chocolate (com	pounds, cocoa, chocolate liquor,					1	1
0       except chocolate       190036 4       Image: Chocolate	9	coatings, choco	late flavoring, etc.)	2066017	pounds		\$		
Plastics resins consumed in the form of granules, pellets, powders, liquids, etc., but excluding sheets, 10, cost, tubes, and shapes       282104 9       Thousand pounds         Packaging paper and plastics film, coated and laminated       267101 4       11         Bags: plastics, foil, and coated paper       267301 0       11         Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4       11         CONTAINERS       Glass containers       322101 7       11         Plastics containers, boxes and corrugated paperboard       265001 8       11         Paperboard containers, boxes and corrugated paperboard       265001 8       11         Scot of all other materials, parts, containers, and spupies consumed in this value.       970099 8       11         Describe the three principal materials, etc., included in this value.       11       11         In this value.       11       11       11         In this value.       11       11       11         In this value.       11       11       11         In this value.       11       11       11         In this value.       11       11       11         In this value.       11       11       11         In this value.       11       11       11		Flavorings (natu	ural, artificial, imitation, etc.),	190026 4				1	1
1       Pellets, powders, liquids, etc., but excluding sheets, rods, tubes, and shapes       282104 9       Thousand pounds         2       Packaging paper and plastics film, coated and laminated       267101 4       1         3       Bags; plastics, foil, and coated paper       267301 0       1         4       Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4       1         5       Glass containers       322101 7       1       1         6       Plastics containers, except bags       308015 7       1       1         7       Ratic containers, except bags       308015 7       1       1         9       Cost of all other materials, parts, containers, and super containers, and super containers, and super containers, and super containers, and super containers, except bags       341101 4       1       1         9       Sost of all other materials, parts, containers, and super containers, and super containers, and super containers, and super containers, except incipal materials, etc., included in this value.       1       1       1         10       Total       1       1       1       1       1       1         10       Total       1       1       1       1       1       1       1       1         10       Total       1		except chocolat	6	190030 4					 
22       Laminated       267101 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       267301 0       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       308007 4       Image: Contrainers of the form of sheets, rods, tubes, and other shapes       Image: Contrainers of the form of sheets, rods, tubes, and rods, tubes, and other shapes       Image: Contrainers of the form of sheets, rods, tubes, and rods, and ends       341101 4       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       341101 4       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       341101 4       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       341101 4       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of sheets, rods, and ends       Image: Contrainers of the form of the form of the rods, rods, and ends	21	pellets, powders	s, liquids, etc., but excluding sheets,	282104 9				   	   
Plastics products consumed in the form of sheets, rods, tubes, and other shapes       308007 4         CONTAINERS       Glass containers       322101 7         Image: Contrainers       Glass containers       322101 7         Image: Contrainers       Paperboard containers, except bags       308015 7         Image: Contrainers       Paperboard containers, boxes and corrugated paperboard       265001 8         Image: Contrainers       Metal cans, can lids, and ends       341101 4         Image: Contrainers       Paperboard containers, and corrugated paperboard       970099 8         Image: Contrainers       Paperboard containers, and corrugated paperboard       970099 8         Image: Contrainers       Image: Containers       Image: Containers         Image: Contrainers       Image: Containers       Image: Containers         Image: Contrainers       Image: Containers       Image: Containers         Image: Cont all other materials, parts, containers, and supplies consumed       Image: Containers       Image: Containers         Image: Cont all other materials       Image: Containers       Image: Containers       Image: Containers       Image: Containers         Image: Cont all other materials       Image: Containers       Image: Containers       Image: Containers       Image: Containers         Image: Cont all other materials       Image: Contain	2	Packaging pape laminated	r and plastics film, coated and	267101 4					   
4       rods, tubes, and other shapes       308007 4         5       CONTAINERS       Glass containers       322101 7         6       Plastics containers, except bags       308015 7       1         7       Paperboard containers, boxes and corrugated paperboard       265001 8       1         8       Metal cans, can lids, and ends       341101 4       1         9       Supplies consumed       970099 8       1         9       Describe the three principal materials, etc., included       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1       1       1         1       1 <td< td=""><td>3</td><td>Bags; plastics, f</td><td>oil, and coated paper</td><td>267301 0</td><td></td><td></td><td></td><td></td><td>l L</td></td<>	3	Bags; plastics, f	oil, and coated paper	267301 0					l L
5       Glass containers       322101 7         6       Plastics containers, except bags       308015 7         7       Paperboard containers, boxes and corrugated paperboard       265001 8         8       Metal cans, can lids, and ends       341101 4         9       Cost of all other materials, parts, containers, and supplies consumed	4	Plastics product rods, tubes, and	s consumed in the form of sheets, other shapes	308007 4				   	   
Paperboard containers, boxes and corrugated paperboard 265001 8 Metal cans, can lids, and ends 341101 4 Cost of all other materials, parts, containers, and supplies consumed	25	CONTAINERS	Glass containers	322101 7				1	1
Paperboard containers, boxes and corrugated paperboard 265001 8 Metal cans, can lids, and ends 341101 4 Cost of all other materials, parts, containers, and supplies consumed	6		Plastics containers, excent hads	308015.7				1	1
7       corrugated paperboard       265001 8       Image: Corrugated paperboard       Image: Corrugated paperboard         8       Metal cans, can lids, and ends       341101 4       Image: Corrugated paperboard       Image: Corrugated paperboar	Ŭ			3000137				 	 
8       Metal cans, can lids, and ends       341101 4         9       Cost of all other materials, parts, containers, and supplies consumed	7		Paperboard containers, boxes and corrugated paperboard	265001 8				1	I
Cost of all other materials, parts, containers, and supplies consumed	8			341101 4					1
TOTAL Sum of lines 1–29 should equal item 12, line a	1	Cost of all other supplies consur	materials, parts, containers, and						   
Sum of lines 1–29 should equal item 12, line a s		in this value.							         
Item 18A – Not applicable to this report		Sum of lin					\$	   	   
		<b>9m 18A</b> – Not	applicable to this report						
			CONTINUE W	/ITH ITEM 18B C	ON PAGE 7				
CONTINUE WITH ITEM 18B ON PAGE 7									

FOR	MC-2004	0.5.	DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS ES 11-DIGIT CENS	TABLIS US FILE		NT'S VIBER		
	1992 CEN	SUS OF MAN	UFACTURES	Name of establi	shment	(San	ne as address b	ox)	
	DAIRY	PRODUCTS -	Continued						
lt	em 18 <b>B.</b> PROD	UCTS AND SE	RVICES OF THIS ESTA	ABLISHMENT D	JRING	1992	2		
				STRUCTIONS					
	listed below a make product them in the "A establishment DO NOT COM If quantities a	re generally ma s that are not lis All other product " section at the IBINE PRODUCT re requested, ple	end of item 18B. PLEASE	u those P TRANSI YOUR ( MANUF	RODUCT ERRED OMPAN ACTURE	TS BO FRO NY AI E. Re	port on the spec DUGHT AND SO M OTHER ESTAI ND SOLD WITHC port only a valu 00 6, "Resales."	LD ÒR BLISHMENT DUT FURTHI	S OF ER
	measure spec If the informa	tion as requeste	d cannot be taken directly		na otot	lone	– Establishment	a which do	not have
i	ACCEPTABLE 2. Valuation of products ship selling value, discounts and charges and e	<b>Products</b> – Re ped and services f.o.b. plant to th allowances, and excise taxes.	SONABLE ESTIMATES AF port the value of the s performed at the net e customer; i.e., after d exclusive of freight	bottling bulk an- manufa on 1992 Establis in the b wholes	or paste d ship it, cturing p Econon hment F usiness ale, with Census	eurin , with plants nic C Repor of bu out p out B	g operations but out processing t s of the same co ensuses Form Et t." Establishmen tying bulk fluid n rocessing or bot usiness Form CE	receive flui to bottling o mpany, sho S-9200 "Aux ts which are nilk and sell tling, should	d milk in r other uld report iliary e engaged ing it at d report
;	your company to the transfei production an and profits. <b>3. Contract Wo</b> FOR YOU FRC as if they wer hand, do not PRODUCTS T OWNED BY C	<pre>/, you should as rred products; i.e d a reasonable p ork – Report PRC DM YOUR MATE e made in this e report on the sp HAT YOU MADE THERS. Report of THERS. Report of</pre>	er establishments within sign the full economic va s., include all direct costs proportion of all other cost DUCTS MADE BY OTHEF RIALS on the specific line stablishment. On the othe ecific product lines FROM MATERIALS only the amount that you	lue of sts <b>6. Distrib</b> maintai RS facilitat es location er establis primary consum	ution p n outlyir e house- s shoulo hment ir activity ers. Any	oints ng dis to-ho d be d n pre is th y sucl	s (relay stations stribution points buse delivery in a considered as pa paring this repoi e distribution of h locations distri tores, etc.) shou	(relay static nearby cities int of this t, provided goods to ho buting prim	ons) to s. Such their ousehold arily at
	received for "	commission or c ct code 93000 0	ontract receipts" under	manufa	cturer's	sales	branches and li y and Dairy Proc	sted separa	
				Census	Unit	of	Products ship		· · ·
		Products and	l services	product code	measu for	r	Quantity	Value,	f.o.b. plant <b>(E)</b>
Line				581 <b>(B)</b>	quanti		583	584 Millions	   Thou-   sands Dolla
1	BUTTER (Churned in this plant) (20210)	(A) (Report butter churned elsewhere and repackaged in this plant as resale on line 96) Shipped in bulk (containers more than 3 pounds) Shipped in consumer packages (containers 3 pounds or less)				,	(D)	\$	
3		Anhydrous but		20210 21 7	4				
		manufactured e resale on line 96	sewhere and repackaged )	1					
4	NATURAL CHEESE, EXCEPT COTTAGE CHEESE (Cheddar, brick, grated,	Shipped in con containers (3 p	sumer packages or ounds or less)	20223 01 2					
5	cream, Swiss, Italian, etc.) <b>(20223)</b>	more than 3 pc	kages or containers of ounds or in bulk	20223 02 0	Thous				
6	Process Cheese and Related Products	PROCESS CHEESE	Shipped in consumer packages or containers (3 pounds or less)	20224 11 9		ius			
7	(Pasteurized and blended) (20224)		Shipped in packages o containers of more tha 3 pounds or in bulk	r n 20224 13 5					
8		Cheese food		20224 23 4					
9		Cheese spread		20224 25 9					
o		Other related c flavored chees	heese products (including e dips)	g 20224 29 1	]				
1	CHEESE SUBSTITUTES		ituting for natural cheese		1				
•	AND IMITATIONS		itating for natural cheese	20225116	1			1	- <b> </b>
2	(20225)	or related prod	ituting for processed che ucts	20225 21 5	$\left  \right $			<u> </u>	
~	RAW LIQUID W	HEY	20226 00 7	↓			1	I I	

lt	em 18B. PROD	OUCTS AND SE	RVICES OF THIS ESTABLI	SHMENT DU	RING 19	992	– Continued			l uge e
				Census	Unit of	f	Products ship	ped and oth	er recei	pts
No.		Products and	services	product	measur for		Quantity	Value, 1	f.o.b. pl <b>(E)</b>	ant
Line				581	quantiti	es	583	584	Thou-	
	Dry Milk	(A) SHIPPED IN		(B)	(C)		(D)	Millions	sands	Dollars
14	Products and	CONSUMER TYPE	Nonfat dry milk	20235 11 5				\$	 	 
15	Mixtures (Report soy	PACKAGES (Containers 3 pounds	Infants' formula	20235 22 2					 	 
16	base or other substitutes on lines 37–40) (20235)	or less)	Other dry milk products (instant chocolate milk, weight control products, whole milk powder, malted milk powder, powdered cream, etc.)	20235 29 7					       	     
		SHIPPED IN BULK (Containers larger than 3 pounds)	Food grade (bakeries, confectioners, meat packers, etc.):						     	     
17			Dry whole milk	20235 42 0					1	1
18			Nonfat dry milk	20235 43 8					 	
19			Dry whey	20235 45 3					<u> </u>	
20			Modified dry whey products (lactose, milk albumin, etc.)	20235 47 9	Thousa	nd			 	 
21			Other food grade dry milk products	20235 49 5	pound					
22			Feed grade (dry milk, dry buttermilk, dry whey, etc.)	20235 51 1					   	   
23	CANNED MILK PRODUCTS	Evaporated mill	<	20236 12 1					1	
24	(Consumer type cans) (Report soy	Condensed milk	(	20236 16 2					i I	
25	base or other substitutes on	Canned dietary supplements, weight control products		20236 21 2					1	1
26	lines 41–42) <b>(20236)</b>	Infants' formula	, liquid	20236 26 1					1	
27			ilk products (including	20236 28 7					1	
28	Concentrated Milk	Feed grade (incl and buttermilk)	luding concentrated whey	20237 12 9					1	
29	Products Shipped in Bulk (Barrels, drums, and tanks)	FOOD GRADE (Except ice cream and ice milk mixes)	Concentrated whey in terms of solids	20237 17 8				   		
30	(20237)		All other	20237 19 4	<b>•</b>				   	   
31	ICE CREAM MIXES AND	Ice cream		20238 01 0	↑				1	
32	RELATED PRODUCTS (20238)	lce milk		20238 03 6					 	
33		Sherbet		20238 05 1	Thousa				1	
34		Frozen yogurt		20238 07 7	gallon					
35		Milkshake		20238 13 5					1	
36		Other mixes		20238 19 2	↓				1	
37	Products That	DRY	Coffee whiteners	20239 21 6	<b>↑</b>				   	
38	Substitute For Dairy Products		Infants' formula	20239 23 2					   	
39			Sour cream substitutes	20239 25 7					 	
		Sour cream substitutes Other dry dairy product substitutes (including whipped topping, etc.) – Specify product			Thousan				     	     
40				20239 28 1					   	

## FORM MC-2004

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

#### ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

Name of establishment (Same as address box)

**1992 CENSUS OF MANUFACTURES** 

# DAIRY PRODUCTS – Continued

lt	em 18B. PRC	DUCTS AND	SERVICES OF	THIS ESTABLI	SHMENT DU	JRING 1992	2 – Continued			
					Census	Unit of	Products ship	oped and oth	er rece	ipts
No.		Products a	nd services		product code	measure for	Quantity	Value, 1	f.o.b. pl <b>(E)</b>	ant
Line					581	quantities	583	584	   Thou-	
	Products	(A CANNED	<b>A)</b>		(B)	(C)	(D)	Millions	sands	Dollars
41	That Substitute	CANNED	Liquid infants'	formula	20239 32 3			\$	 	 
42	for Dairy Products – Continued		Other canned substitutes (in supplements a control produc	cluding dietary and weight	20239 38 0	Thousand pounds			   	   
		OTHER	Perishable	Flavored		Thousand			+	+
43				dips Whipped topping (including	20267 11 8	quarts Thousand pounds			   	
44				pressure can type)	20267 13 4				l I	i i
45				Coffee whiteners	20267 14 2	<b>↓</b>				 
46				Flavored milk drinks (chocolate drink, etc.)	20267 17 5	Thousand quarts			   	   
47				Sour cream substitutes	20267 16 7					
				Other perishable dairy product substitutes – <i>Specify</i> <i>products</i>					       	       
48					20267 18 3				1	
49			Frozen	Whipped topping	20384 51 7	Thousand pounds				
				Other frozen dairy product substitutes (except mellorine and similar frozen desserts)					       	     
50					20384 59 0				 	 
51	Ice Cream and Ices (20240)	ICE CREAM (Including custards)	Shipped in bu 3 gallons or m	ore)	20240 14 9	l î			1	
52		custatus/	Shipped in cor (less than 3 ga		20240 15 6				i	i
53			Novelty forms		20240 16 4					1
54		ICE MILK	Shipped in bu 3 gallons or m	lk (containers ore)	20240 21 4				1	1
55			Shipped in cor (less than 3 ga		20240 22 2				1   	
56			Novelty forms		20240 23 0					I
57		FROZEN YOG	URT (Report oth 79)	er	20240 31 3	Thousand gallons				
58		SHERBET	Shipped in bu 3 gallons or m	ore)	20240 94 1					
59			All other sizes novelty forms	(including	20240 96 6				1	
60		ICES	Water ices cor real fruit or fru	lit juice	20240 52 9				 	
61			Ices containing fruit or fruit ju		20240 54 5					 
62		Mellorine and containing fats (including tofu	similar frozen d s other than but ı-type)	esserts terfat	20240 71 9					

CONTINUE ON PAGE 10

lt	em 18B. PROD	UCTS AND SERVICES OF THIS ESTABLI	SHMENT DU	ABLISHMENT DURING 1992 – Continued							
				l lucito e f	Products ship	ped and oth	er rece	ipts			
No.		Products and services	Census product	Unit of measure for	Quantitu	Value,	f.o.b. pl	lant			
Line			code <sup>581</sup>	quantities	Quantity 583	584	(E)	1			
		(A)	(B)	(C)	(D)	Millions	sands	Dollars			
	Ice Cream and Ices			Thousand			1				
63	(20240) – Continued	Other frozen desserts (frozen pudding, etc.)	20240 99 0	gallons		\$	1	l			
	BULK FLUID			1			+				
64	MILK AND CREAM (Sales and transfers	Fluid whole milk, bulk sales	20261 12 9				+				
65	to other plants and	Fluid skim milk, bulk sales	20261 15 2	Thousand pounds			1	1			
66	dealers) (20261)	Fluid cream and buttermilk, bulk sales	20261 16 0				1	 			
67		Other bulk fluid milk and cream (eggnog, lowfat, etc.)	20261 19 4	<b>↓</b>			1				
68	PACKAGED FLUID MILD AND RELATED	Fluid whole milk, packaged (including U.H.T.)	20262 12 7	Î			'   	   			
69	(including	Lowfat milk, packaged (including U.H.T.)	20262 23 4				1				
70	cartons, bottles, cans, and	Skim milk, packaged (including U.H.T.)	20262 25 9				 	 			
71	dispenser cans) <b>(20262)</b>	Cream, heavy (whipping cream, containing 36 percent butterfat or more)	20262 32 5	Thousand quarts			 	 			
72	, <b>_</b> ,	Cream, light (coffee cream, containing less than 36 percent butterfat)	20262 43 2				 				
73		Cream, sour, unflavored (Report flavored dips on line 80)	20262 45 7								
74		Half and half	20262 52 3				1				
75		Whipped topping, butterfat base	20262 63 0	Î Î							
76	COTTAGE CHEESE (Including	Creamed in this plant from purchased curd	20263 18 2					 			
77	bakers' cheese,	Manufactured and creamed in this plant	20263 13 3	Thousand pounds			1	1			
78	farmers' cheese) (20263)	Manufactured in this plant, sold as curd (not creamed)	20263 16 6				1				
79	YOGURT, EXCE yogurt on line 5	PT FROZEN (Report frozen 7)	20265 00 5	Ļ			1				
80		Flavored sour cream dips	20268 13 2	Î							
81	MILK PRODUCTS, N.E.C.	Flavored milks (chocolate milk, etc.)	20268 15 7	Thousand quarts							
82	(20268)	Other milk products (eggnog, buttermilk, acidophilus milk, reconstituted milk, etc.)	20268 19 9	↓			1	1			
		GE JUICE, SINGLE STRENGTH,	2033A 25 2	Ť			1				
84	ALL SIZES FRESH FRUIT JUICES AND	Orange	2033A 23 2								
84 85	NECTARS (Single strength)	Orange	2033B 12 8				 	 			
	(2033B) FRUIT DRINKS,	Other		Thousand gallons			   	<u> </u>			
60	COCKTAILS, AND ADES, CONTAINING	16.9 oz (1/2 liter) containers or less	20866 01 8				   	   			
87	SOME REAL JUICE (With added sugar,	Other size containers (cartons, bottles, cans, etc.)	20866 02 6				 	 			
88	citric acid, etc.) (20866)	Concentrates	20866 03 4	↓			 	 			
	ALL OTHER PRODUCTS MADE IN THIS ESTABLISH- MENT	Describe and report separately each product with a sales value of \$50,000 or more which cannot be assigned to one of the lines above. For all remaining products, write "Other" and report a single total value.						- - -			
89			18				 	 			
90			26				 				
91			34								
92			42				1				
			59								
93								:			

	FORM	М	C-2	20	04
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U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992 - Continued

# ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

Name of establishment (Same as address box)

**1992 CENSUS OF MANUFACTURES DAIRY PRODUCTS – Continued** 

			Census	Unit of	Products ship			
Line No.		Products and services	product code	measure for	Quantity	Value,	r.o.b. pl (E)	ant
ne			581	quantities	583	584	1	Ι
		(A)	(B)	(C)	(D)	Millions	Thou-   sands	Dollars
	CONTRACT	Receipts for work done for others on			(/		1	 
94	WORK	their own materials	93000 00 8			\$	+	
		Describe below products worked on and kind of work.					1	I
							1	1
								1
							1	1
							i	1
							I.	I
							1	1
								1
	MISCELLA- NEOUS						1	1
95	RECEIPTS	Miscellaneous receipts (including receipts for repair work, scrap, refuse, etc.)	99980 00 5				Ì	1
	RESALES							
		Sales of products bought and sold without further manufacture, processing,					I.	l .
		or assembly in this establishment. The					1	1
96		cost of such items should be reported in item 12, line b.	99989 00 6				1	1
	TOTAL						Ì	
97		alue of shipments and other receipts nes 1–96, column (E)	77000 00 8				I.	I
						\$	591	421 8
		YEES ENGAGED IN TRANSPORTATION blishment have any employees on the		ed in trans	portation in 19	927		
592	1 🗌 Yes – <i>Re</i>	port below the number and payroll of empl	oyees (includin	g drivers/sa	lespeople) of thi			
		ablishment engaged in the delivery of prod	ucts sold by th	is establishr	nent.			
	2 🗌 No <i>– Cor</i>	ntinue with item 22					umber	
	b. Number of e	mployees (These employees should also b				593	umber	
	b. Number of e					593		1
	b. Number of e	mployees (These employees should also b				593 594	Thou-	Dollars
	b. Number of e reported in ite	mployees (These employees should also b em 2, page 1)				593 594 Millions	Thou-	  Dollars
	b. Number of e reported in ite	mployees (These employees should also b				593 594 Millions	Thou-	  Dollars 
	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> </ul>	mployees (These employees should also b em 2, page 1)				593 594 Millions	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also b em 2, page 1) payroll should also be included in the figur	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars 
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	Dollars
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars 
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars 
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars 
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	Dollars
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars 
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt	<ul> <li>b. Number of e reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> </ul>	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in	item 3A, pag	ge 1)	593 594 Millions . <b>\$</b>	Thou-	  Dollars   
lt R	b. Number of e reported in ite c. Payroll (This ems 20 and 2 EMARKS – Plea	mployees (These employees should also been 2, page 1) payroll should also be included in the figur 1 – Not applicable to this report	es reported in may be essenti	item 3A, pag	ge 1)	593 594 Millions	Thou-   sands 	
It R	<ul> <li>b. Number of e reported in ite reported in ite</li> <li>c. Payroll (This ems 20 and 2</li> <li>EMARKS – Pleas</li> <li>EMARKS – Pleas</li> </ul>	mployees (These employees should also be om 2, page 1)	es reported in may be essenti	item 3A, pag ial in unders been prepa	ge 1)	. 593 594 Millions . <b>\$</b>	Thou-   sands 	15.
It R It N 667	<ul> <li>b. Number of e reported in ite reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> <li>EMARKS – Pleas</li> <li>em 22. CERTIF</li> <li>ame of person to</li> </ul>	mployees (These employees should also be om 2, page 1)	es reported in may be essenti urate and has	item 3A, pag ial in unders been prepa	red in accordar	593 594 Millions . <b>\$</b> ported data.	Thou- sands	15.
It R It N 667	<ul> <li>b. Number of e reported in its reported in its</li> <li>c. Payroll (This ems 20 and 2</li> <li>EMARKS – Pleas</li> <li>EMARKS – Pleas</li> <li>em 22. CERTIF</li> <li>ame of person to</li> </ul>	mployees (These employees should also be om 2, page 1)	es reported in may be essenti urate and has	item 3A, pag ial in unders been prepa	ge 1)	593 594 Millions . <b>\$</b> ported data.	Thou- sands	15.
It R It N 667	<ul> <li>b. Number of e reported in ite reported in ite</li> <li>c. Payroll (This</li> <li>ems 20 and 2</li> <li>EMARKS – Pleas</li> <li>EMARKS – CERTIF</li> <li>em 22. CERTIF</li> <li>ame of person to ame of company</li> </ul>	mployees (These employees should also be orn 2, page 1)	es reported in may be essenti urate and has	item 3A, pag ial in unders been prepa	red in accordar	borted data.	Thou- sands	15.

Title

Page 11

Signature of authorized person

Date

		U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM MC-1001	<b>IRON, FERROA</b>	IS OF MINERAL INDUSTRIE LLOY, URANIUM, AND US METAL ORES	S	
	OF THE COM	INIC-1001		OMB No. 0607-0736	8: Approval E	xpires 06/30/94
lf th Bi re (C	you have iis report, ureau. In fer to the FN) print	E: FEBRUARY 15, 1993 questions about completing please call or write the Census any communication, be sure to 11-digit Census File Number ed in the label to the right. r completed form to:			MC-1001	
	1201	AU OF THE CENSUS East 10th Street sonville, IN 47134-0001				
To ea	oll-free as astern tim	sistance, 8:00 a.m. to 8:00 p.m., e, Monday through Friday: 1-800-233-6136				
		read the accompanying ions before answering stions.				
		Census use only				
			(Please	correct any error in name, address, and	l ZIP Code)	
	that rece YOUR C	ive this questionnaire to answe ENSUS REPORT IS CONFIDE	r the questions and r NTIAL. It may be se	States Code, requires businesses and o eturn the report to the Census Bureau. I en only by Census Bureau employees a indents' files are immune from legal pro	By the same nd may be	izations e law, used
		MPLOYER IDENTIFICATION NU				
1	ls the Er establis	nployer Identification (EI) N hment on its latest 1992 Em	umber shown in the ployer's Quarterly	e label the SAME as the one used fo Federal Tax Return, Treasury Form S	r this 941?	
094	1 🗌 Yes					
	2∟No	−Enter current El Number (9 digits)>	_			
Ite	<b>m 1B.</b> P	HYSICAL LOCATION – Answer	parts a–d			
				e address shown in the label?		
		and rural route addresses are r	Number and street			
	∐ Yes □ No	– Enter physical location —>	Number and street			
			City, village, or other p	blace State	ZIP C	Code
Ь.	ls this e	stablishment physically	c. In what type of	municipality is this establishment	physically	located?
	located of the ci	inside the legal boundaries ity, town, village, etc.?	096 1 City, village, 2 Town or to	or borough 3□Other – <i>Specify</i> wnship 4□Do not know		
095	1∐Yes 2∐No	s 3⊡No legal boundaries 4⊡Do not know	d. In what county	is this establishment located?		
Ite	m 1C PF	BINCIPAL ACTIVITY – $Mark(X)$	 the ONE box which h	est describes the PRINCIPAL kind of		
		business	or industrial activity o	of this establishment.		
070	exp	nerals extraction, quarrying, pro loration, mining contract servic l gas field operations and servic	es, or oil	4 ☐ Wholesale operations 5 ☐ Retail operations 6 ☐ Other		
	pro incl	nufacturing (fabrication, assem cessing materials into new pro ude such activities as: logging bing, publishing, printing, and u	ducts. Also apparel	lf you have marked (X) in boxes 2 to describe your principal activity belo		
	sub	nstruction (including general co contracting, home building, an I development)	ntracting, d land subdividing			
<b>_</b>					Kow	Number
		MPLOYMENT IN 1992			Key	Number
	AND EX	of PRODUCTION, DEVELOP PLORATION WORKERS duri ncluding the 12th of month	MENT, ng pay	(1) <u>March 12</u> (2) May 12	301	
	(Include	both full- and part-time employ	ees)			
				(3) August 12	303	
				(4) November 12	304	
ь.	Total (	Sum of lines (1) through (4))			305	
C.	Average	e number (Divide line b by 4 –	omit fractions)		306	
d.	ΑΙΙ ΟΤΗ	ER EMPLOYEES (Pay period in	ncluding March 12)		307	
е.	Total (	Sum of lines c and d)			308	
		•				ON PAGE 2

Form MC-1001												Page 2
				s rounded correct c		usands. B 5.	e carefu	ıl to		Millions (000)	Thou- sands (000)	
HOW TO REPORT	Exampl	e: If a fig	ure is \$	1,125,628	– Repo	ort				1	126	
		If item	value is	equal to "0	" (or les	s than \$500	) or 500	hours) – <i>Ma</i>	rk (X) -		<u> </u> ►	X0
Item 3A. PAYROLL (Exclude s	IN 1992 (befor upplemental la			ed in item	n 3C)				Key	Mil.	   	Mark (X) if "0"
<b>a. Production, o</b> (For employee				on worke	rs' wa	ges			309	\$		□o
b. All other sala (For employee			ie d)						310		1	□o
c. Total (Sum o	of lines a and l	o)							311			□o
Item 3B. FIRST QUA	ARTER PAYRO								315		1	□o
Item 3C. EMPLOYE a. Legally requi (Exclude from	R'S COST FOR red expendit	FRINGE	BENEFI	TS (annua	al suppl		abor co	sts)	212			
b. Payments for	r voluntary p	rograms							312		<u> </u>	
(Exclude from									313			
	of lines a and l ORKED BY PRC		DEVE	OPMENT					314	Hour	 s work	0 ed
	IN 1992 (ANNI		, DEVEL	OF MENT,	AND E.	AFLORATI	ON		Key	Mil.	  Thou.	Mark
Total hours	worked by pr	oduction	, devel	opment, a	and exp	loration	worker	s in 1992			+	
Items 5 and 6 – Not	es reported in i applicable to th		e C)						320			
Item 7. ASSETS, C		Building	s and	Maahina	m cond	Mine	ral	Mineral I	and		DTAL	
RETIREME	URES, AND NTS	other stru (Exclude items 7	land in	Machine equipr		explorati develop		Mineral I and righ			f colum ough (4	
		(1		(2)	)	(3)	)	(4)			(5)	Mark
		Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	(X) if
a. Gross value of and/or depleta		339		340		270		271		341		
(acquisition co beginning of t	ost) at the	\$		\$		\$		\$		\$		□ <b>0</b>
b. Total capital expenditures		378		379	Ì	273	Ì	274		350		
during the yea		342		343								
(1) Capital ex for new bu and machi	ildings	345	 	346	 		 				   	
(2) Capital exp for used by and maching	uildings	345		346								
c. Retirements ar disposition of and/or depleta	depreciable ble assets	351		352		276		277		353		
(i.e., gross value sold, retired, des abandoned, scra	stroyed,	(	   )	(	)	(	   )	(	)	(	   )	<b>□</b> 0
d. Gross value o and/or depleta	f depreciable	354		355		279		280		356		
<b>at the end of</b> (Line a plus b r	the year										1	   □o
DEPLETION	TION AND/OR	357	   	358		282	   	283		359		
FOR THE Y Item 9. RENTAL PA		360		361			1			362	1	
DURING YE BUILDINGS MACHINER	EAR FOR S AND						 					   □o
	ACCOUNT JRES DURING FOR MINERAL					285		286		287		
PROPERTIE									_			
									Key	Mil.	   Thou.	Mark (X) if "0"
Item 11A. LEASE REN	ITS FOR MINE	RAL PROP	ERTIES						288	\$		
							EGRAP		392	\$		

FORM MC-10		RTMENT OF COMMERCE		F0=-	DUCUT						Page
		BUREAU OF THE CENSUS	ENTER THIS 11-DIGIT CEI	NSUS	FILE NU	MBER					
	NSUS OF MINERAL		Name of esta	blish	ment (Sar	ne as a	ddress	box)			
	FERROALLOY, URAN										
Item 12. COS <sup>-</sup>	T OF SUPPLIES, ETC., F	OR 1992									
		INS	STRUCTIONS								
purchase co preparation used or pro interplant tr	reported should repres ost of supplies, minerals , machinery installed, fu peessed during 1992. Inc ransfers, and withdrawa	ent the total s received for uels, etc., actually lude purchases, ils from inventories.	materi purcha signifi consur purcha	ases n cantly mptio ases, o	there are nay be rep from the n of majo consumpt nventories	oorted i amoun r items ion mav	nstead ts actu differs / be es	if the ally u signi timat	ey do not ised. Wh ficantly f ed by ad	differ ere from ding	
after discou	vered cost; i.e., the amo ints and including freigh surred by the establishm	nt and other direct	subtra	cting	ending in panying in	ventori	es.				n.
								Key	Mil.	  Thou.	Marl (X) i "0"
	supplies used, mineral ry installed (Report det		paration, and	purc	hased			321	\$		
	products bought and s ales in item 18B as resal		er processing	_				322			
c. Cost of p	ourchased fuels consu on of electricity (Repo	med for heat, pow rt detail in item 17B)	er, or the					323			
<u> </u>	ourchased electricity (		em 14, line a)					324			
	contract work done for	,	,/					325		1	
_											
	(Sum of lines a through applicable to this repor							326			
	NTITY OF ELECTRICITY								Kilo	watthou	irs
											11/000
								Key	Mil.	Thou.	(X) i "0"
a. <u>Purchase</u>	ed electricity (Quantity	comparable to cost	as reported in	item	12, line d)	,		<b>Кеу</b> 327	Mil.	Thou. 	(X) i "0" □ 0
	ed electricity (Quantity		·	item	12, line d)	,			Mil.	Thou. 	
b. Generate c. Electricit	ed electricity (Gross les	ss generating station	nuse) ments					327	Mil.	Thou.       	
b. Generate c. Electricit	ed electricity (Gross le	ss generating station to other establish ABLISHMENT AT ENI	n use) ments D OF YEAR (Re					327 328	Mil.	Thou.       	
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing	ed electricity (Gross les	to other establish ABLISHMENT AT ENI Network of the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment,	ments D OF YEAR (Re STRUCTIONS operat e.g., at storag establi the rep stored ON ES	eport ions, t a wa e area shme port o . INVE TABL		e inven central ventor sewher blishme SHOU REPOF	ly locat ies of a e shou ent whe LD NO RTS. Se	327 328 329 329 are h ted st an op Id no are th T BE ae aco	eld elsev ockpile, erating t be repo ley are a DUPLIC/	vhere; or borted on ctually ATED	
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories ent regardless of where establishment is part o he company should ass ent those inventories that ble for, as if it owned th the report of a minerals e inventories that are at	to other establish ABLISHMENT AT ENI National Station National States ABLISHMENT AT ENI INS Sowned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its	ments D OF YEAR (Re STRUCTIONS operat e.g., at storag establi the rep stored ON ES	eport ions, t a wa e area shme port o . INVE TABL	even if th arehouse, a. These in nt held el f the esta ENTORIES ISHMENT for additi	e inven central ventor sewher blishme SHOU REPOF	ly locat ies of a e shou ent whe LD NO RTS. Se formati	327 328 329 329 are h ted st an op Id no are th T BE ae aco	eld elsev ockpile, erating t be repo iey are a DUPLIC/ company	vhere; or borted on ctually ATED	
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those Report inv	ed electricity (Gross lest ty sold or transferred NTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part o he company should ass ent those inventories that ble for, as if it owned th the report of a minerals	to other establish ABLISHMENT AT ENI INS owned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its ket using	ments D OF YEAR (Re STRUCTIONS operat e.g., at storag establi the rep stored ON ES	eport ions, t a wa e area shme port o . INVE TABL	even if th arehouse, a. These in nt held el f the esta ENTORIES ISHMENT for additi	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locat ies of a e shou ent whe LD NO RTS. Se formati	327 328 329 329 are h ted st an op Id no are th T BE ae aco	eld elsew ockpile, j erating t be repo ley are a DUPLIC/ company	vhere; or borted on ctually ATED ving	
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those Report inv generally Are inver establish	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part o he company should ass ent those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting me intories of this imment subject to the	to other establish ABLISHMENT AT ENI INS owned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its ket using	ments D OF YEAR (Re STRUCTIONS operat e.g., at storag establi the rep stored ON ES	ions, t a wa e area shme oort o . INVE TABL ttions	even if th arehouse, a. These in nt held el f the esta ENTORIES ISHMENT for additi	e inven central ventor sewher blishme SHOU REPOF onal int	y locat ies of a e shou ent whe LD NO RTS. Se formati	327 328 329 329 are ho ted st an op Id no Pre th T BE se acc	eld elsev ockpile, erating t be repo iey are a DUPLIC/ company	vhere; or ctually ATED ving	(X) i ""0" □ c c □ c c □ c c □ c c
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those Report inv generally Are inver establish LIFO met	ed electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part or he company should ass ant those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting me intories of this ment subject to the thod of valuation?	to other establish ABLISHMENT AT ENI INS owned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its ket using	ments D OF YEAR (Re STRUCTIONS Operat e.g., at storag establi the rep stored ON ES instruc	ions, t a wa e area shme oort o . INVE TABL ttions	even if th arehouse, a. These in nt held el f the esta ENTORIES ISHMENT for additi	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locat ies of a e shou ent whe LD NO RTS. Se formati <b>2</b> Mark (X) if	327 328 329 329 are ho ted st an op Id no Pre th T BE se acc	eld elsew ockpile, j erating t be repo ley are a DUPLIC/ company	vhere; or borted on ctually ATED ving	(X) ( ""0" 
b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those Report inv generally Are inver establish LIFO met	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA Value of all inventories of ent regardless of where establishment is part of he company should ass ant those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting me intories of this ment subject to the thod of valuation? Use the sum of the LIFO amount plus the LIFO reserve	to other establish ABLISHMENT AT ENI ABLISHMENT AT ENI INS owned by this the inventories are f a multiunit ign to each at the establishment, establishment, tributable to its ket using ethods. a. Mined or quarri b. Supplies, parts,	ments D OF YEAR (Re STRUCTIONS Operat e.g., at storag establi the rep stored ON ES instruct	eport t a wa e area shme port o . INVE TABL	both years arehouse, a. These in nt held el ENTORIES ISHMENT for additi <b>End</b> Mil.	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locat ies of a e shou LD NO TS. Se formati <b>2</b> <i>Mark</i> (X) if "0"	327 328 329 329 329 329 329 329 329 329 329 329	eld elsew tockpile, terating t be repo ey are a DUPLICA company <b>Enc</b> Mil.	vhere; or borted on ctually ATED ving	(X) i ""0" C C C C C C C C C C C C C C C
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b. Generate c. Electricit Item 15. INVE Report the establishme held. If this company, ti establishme is responsit completing report those Report inve generally Are inver establish LIFO met	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA Value of all inventories of ent regardless of where establishment is part of he company should ass ant those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting me intories of this ment subject to the thod of valuation? Use the sum of the LIFO amount plus the LIFO reserve for completing a through d(2). Note: If you changed to LIFO for	to other establishing ABLISHMENT AT ENI owned by this the inventories are f a multiunit ign to each at the establishment tributable to its ket using ethods. a. <u>Mined or quarri</u> b. <u>Supplies, parts,</u> c. <u>Total invent</u> (Sum of lines d. Of the value on report: (1) Amount not	ied products , fuels, etc. ories a and b) ied pict to y	ions, t a wa e area shme ort o INVE TABL ttions <b>Key</b>	both years arehouse, a. These in nt held el ENTORIES ISHMENT for additi <b>End</b> Mil.	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locat lies of a e shou LD NO STS. Set formati 2 Mark (X) if "0" 0 0	327 328 329 329 329 329 329 329 329 329 329 329	eld elsew tockpile, terating t be repo ey are a DUPLICA company <b>Enc</b> Mil.	vhere; or borted on ctually ATED ving	(X) i ""0"       0     0       0     0       0     0       0     0       0     0       0     0       0     0
<ul> <li>b. Generate</li> <li>c. Electricit</li> <li>Item 15. INVE</li> <li>Report the stablishme held. If this company, ti establishme is responsit completing report those</li> <li>Report invegenerally</li> <li>Are inverestablish</li> <li>LIFO met</li> <li>30 1 Yes -</li> </ul>	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part of he company should ass ent those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mari accepted accounting me interies of this iment subject to the the difference of the LIFO amount plus the LIFO reserve for completing a through d(2). Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section.	to other establish to other establish ABLISHMENT AT ENI ABLISHMENT AT ENI interior and the establishment at the establishment, the establishment, the establishment, tributable to its ket using ethods. a. Mined or quarri b. Supplies, parts, c. Total inventor (Sum of lines d. Of the value on report: (1) Amount not	ied products , fuels, etc. ories a and b) b line c, subject to ject to	ions, t a wa e area shme port o TABL tions <b>Key</b> 336 337 338	both years arehouse, a. These in nt held el ENTORIES ISHMENT for additi <b>End</b> Mil.	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locati lies of a e shousent whee LD NOORTS. Se formati 22 Mark (X) if "0" 0 0 0	327 328 329 329 329 329 329 329 dd no ere th ee accons an op ld no ere th see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an op ld no see accons an accons accons an accons an ons accons	eld elsew tockpile, terating t be repo ey are a DUPLICA company <b>Enc</b> Mil.	vhere; or borted on ctually ATED ving	I         Marri         I         Marri         I
<ul> <li>b. Generate</li> <li>c. Electricit</li> <li>Item 15. INVE</li> <li>Report the stablishme held. If this company, ti establishme is responsit completing report those</li> <li>Report inverses and the stablish of the stablishme is the stablishme is the stablishme is the stablishme is the stablish LIFO met</li> <li>1 Yes -</li> </ul>	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part of he company should ass ent those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting mention ntories of this soment subject to the thod of valuation? Use the sum of the LIFO amount plus the LIFO reserve for completing a through d(2). Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section. Complete only lines a through d(1).	to other establish to other establish ABLISHMENT AT ENI ABLISHMENT AT ENI owned by this the inventories are f a multiunit ign to each at the establishment, tributable to its ket using ethods. a. Mined or quarri b. Supplies, parts, c. Total invent (Sum of lines d. Of the value on report: (1) Amount not LIFO costing (2) Amount sub	ied products , fuels, etc. ories a and b) o line c, subject to g (gross) o DOF YEAR (Re operat e.g., at storag establic the reg. stored ON ES instruct ories a and b)	ions, t a wa e area shme ort o INVE TABL ttions 336 337 338	both years arehouse, a. These in nt held el ENTORIES ISHMENT for additi <b>End</b> Mil.	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locati lies of a e shousent whee LD NOCRTS. See formati 22 Mark (X) if "0" 0 0 0 0	327 328 329 329 329 329 329 329 329 329 329 329	eld elsew tockpile, terating t be repo ey are a DUPLICA company <b>Enc</b> Mil.	vhere; or borted on ctually ATED ving	"0" 0 0 0 0 0 0 0 0 0 0 0 0 0
<ul> <li>b. Generate</li> <li>c. Electricit</li> <li>Item 15. INVE</li> <li>Report the stablishme held. If this company, ti establishme is responsit completing report those</li> <li>Report inverses and the stablish of the stablishme is the stablishme is the stablishme is the stablishme is the stablish LIFO met</li> <li>1 Yes -</li> </ul>	ad electricity (Gross lest ty sold or transferred ENTORIES OF THIS ESTA value of all inventories of ent regardless of where establishment is part or he company should ass ent those inventories that ble for, as if it owned th the report of a minerals e inventories that are at ventories at cost or mar accepted accounting me ntories of this ment subject to the thod of valuation? Use the sum of the LIFO amount plus the LIFO reserve for completing a through d(2). Note: If you changed to LIFO for calendar year 1992, specify in the REMARKS section.	to other establishm ABLISHMENT AT ENI ABLISHMENT AT ENI owned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its ket using ethods. a. Mined or quarri b. Supplies, parts, c. Total invent (Sum of lines d. Of the value on report: (1) Amount not LIFO costing (2) Amount sub LIFO costing e. Report the follo	ied products , fuels, etc. ories a and b) fine c, subject to g (gross) built of the reg stored on ES instruct ories a and b)	ions, t a wa e area shme ort o INVE TABL ttions 336 337 338	both years arehouse, a. These in nt held el ENTORIES ISHMENT for additi <b>End</b> Mil.	e inven central ventor sewher blishme SHOU REPOF onal int <b>of 199</b>	y locati lies of a e shousent whee LD NOCRTS. See formati 22 Mark (X) if "0" 0 0 0 0	327 328 329 329 329 329 329 329 329 329 329 329	eld elsew tockpile, terating t be repo ey are a DUPLICA company <b>Enc</b> Mil.	vhere; or borted on ctually ATED ving	I         Marri         I         Marri         I

F-140 APPENDIX F

Form MC-1001								Page 4
Item 16A. LEGAL FORM OF ORGANIZA								
Mark (X) the ONE box which best descr		-						
1 Individual proprietorship 2 Partnership	₅			form of	coope	rativo	association)	
$3 \square$ Cooperative association (taxable					coope		33001411011/	
4 Cooperative association (tax-exe		· · ×						
Item 16B. OPERATIONAL STATUS								
Mark (X) the ONE box which best descri	bes this establishment a	t the end o	of 1992.					
001 1 🗌 In operation (Include operations ur	nder development, explo	ration, or o	construction	ר)				
2 Temporarily or seasonally inactive							Month	Day Year
3 ☐ Ceased operation – <i>Give date at rig</i> 4 ☐ Sold or leased TO another operato	-				GIVE D	4 <i>TE</i>		
$_5 \square$ Acquired or leased FROM another	-			<u> </u>	Enter fig only	gures		
Name of new/former owner or op	name, etc., b	elow			002			
	erator		El Numbe	r (9 digit		-		
Number and street		City	1		St	ate	ZIP Cod	le
		TIONO						
Item 16C. OWNERSHIP, CONTROL, AND			addraaa ba	W "0"7				
a. Is the FIRST DIGIT of your Census	rile Number (imprint	ed in the	address bo	(x) Ur				
$\square$ No – SKIP to item 17A								
097 Name					Kin			
<b>b. Is this company</b> $_1 \square Yes \rightarrow$	and address of owning	g or contro	olling com	bany	Kin	a ot bu	siness of thi	s company
owned or								
controlled by 2 🗆 NO 🔽 another					EI	Numbe	er (9 digits)	
company?						-		
098 Name	and address of owned	or contro	lled comp	anv	Kin	d of bu	siness of thi	s company
<b>c. Does this</b> $1 \square \text{Yes} \rightarrow$		or contro	neu compe					,
company own or control <sup>2</sup> <sup>No</sup> <del>7</del>								
any other						Numbe	er (9 digits)	
company or companies?						-		
d. Did this company operate at more or development, during 1992? <i>If n</i>					r expl	oration	1	
079 1 □Yes – List additional locations bo 2 □No – SKIP to item 17A	elow.						1	1
							Number of employees	Are these figures
Physical address of business location	Kind of business (K location and Em		Sales rece		Anr pay		during pay period	included in
(Number and street, city, State, ZIP Code)	Identification Nu	imber			. ,		including March 12	other items on this
	(0)		(3		(4		-	report?
(1)	(2) KB		Mil.	Thou.	Mil.	Thou.	(5)	(6)
								□ Yes
	_							🗌 No
	КВ					<u> </u>		
								🗌 Yes
	_							🗌 No
	КВ							□ Yes
						1		
								_
	КВ							
								☐ Yes ☐ No
				i l		Ì		
	КВ	I		1		1		
						1		☐ Yes
						1		🗌 No
						1	L	1
	CONTINUE WITH IT	EM 174	ON PAGE	5				
		/A	//OL	-				

FOR	MC-1001	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS		TER THIS EST DIGIT CENSU					
	IRON, FEF	JS OF MINERAL INDUSTRIES RROALLOY, URANIUM, AND COUS METAL ORES – Continued	Nar	me of establis	hment (Sam	ne as address bo	x)		
It	em 17A. SUPF	LIES USED, ORES FOR TREATMENT	, AN	D PURCHAS	ED MACHI	NERY INSTALL	ED DURIN	G 1992	2
	Part I. ITEMS PU	JRCHASED OR RECEIVED FROM OTHER E			S AND USED	)			
	Report:	INS	STRU	JCTIONS Include: (	Con				
	<ul> <li>Delivered cos</li> </ul>	t of individual items listed below.		<ul> <li>Supplie</li> </ul>	es purchased	d by this establis			
	<ul> <li>Estimated cos</li> </ul>	the unit of measure specified in column ( st of ores received for treatment on a cust		compa Exclude:	nies perform	ning contract wo	rk at this est	ablishr	nent.
		as if purchased. ucts in item 18B.		<ul> <li>Associ</li> </ul>		osts of the kind r	eported in it	ems 3/	۹,
	Include:			• Payme	d 12, line e. nts made fo	r contract service	es performe	d,	
		l for treatment which were used in 1992. elow whether charged to current or capit	al			s for supplies an ontractor inciden			
	<ul><li>accounts.</li><li>Cost of items</li></ul>	for which less than \$25,000 worth was us supplies," line 16.		informatic	on cannot be	ructions for item taken directly fr are acceptable.	12. If the om your rec	ords,	
						Received from of this comp			
				Census	Unit of		nd ores recei	ved for	-
	Ores treated	l, machinery installed, and supplies used		material code	measure for quantities		Cost, inclu	ding d	elivery
Line No.					quantities	Quantity	cost (f	reight-i (E)	n)
Li		(A)		571 ( <b>B</b> )	(C)	573 <b>(D)</b>	574 Millions	Thou-	   Dollars
1	ORES AND CONCENTRATES	Crude <b>iron ore</b> for concentration ( <i>Repol</i> concentrates in item 18B, lines 3 and 4.)	rt	101112 1	<u>(</u> €,		\$		
2	RECEIVED FOR TREATMENT	<b>Iron ore</b> concentrates for agglomeration (Report agglomerates in item 18B, line 5	า	101112 1	Long tons		-2	   	   
3		Bauxite (crude or dried) for treatment	,	109902 7	Ļ			   	 
4		Other ores and concentrates for treatme	nt	100097 5	Short tons				
5		ACHINERY INSTALLED, including transportation, and other equipment operation		353020 1				   	   
6	for mining, min	TACHMENTS (except those listed elsewhere eral preparation, construction, and ninery and equipment	ere)	353030 0				   	-
7	SUPPLIES USED	Bentonite and other clay nonmetallic minerals		145000 6					
8		Explosive materials (except ammonium nitrate) and blasting accessories		289218 0				   	   
9		Ammonium nitrate		289212 3				 	
10		Industrial chemicals (chemical reagents, calcium chloride, fatty acids, etc.) except explosive materials and blasting accesso	ries	280110 8				   	
11		Lubricating oils and greases (including hydraulic oils)		290000 9				   	1
12		Tires and inner tubes		301100 4				 	
13		Iron and steel castings		332002 5					-
14		Iron and steel forgings		346211 6					
		Steel shapes and forms (except castings and forgings) such as plates, sheets, stri piling, bars, rails, wheels, track	p,					   	
15		accessories, pipe, tubing, wire, wire products, and structural shapes		331066 1					
16		All other supplies – <i>List the three princip</i> <i>types of supplies included here</i>	oal •••	970098 0				 	
								I I	I I
								 	1
								l I	
17	<b>TOTAL</b> Sum of line	es 1 – 16 should equal item 12, line a (page	3)				\$	   	 

**CONTINUE ON PAGE 6** 

Item 17A. SUPP	LIES USED,	ORES FOR	TREATMENT,	AND	PURCHASED	MACHINERY
INSTA	ALLED DURIN	NG 1992 –	Continued			

Part II. QUANTITY OF ORES MINED AND TREATED AT THIS ESTABLISHMENT

#### INSTRUCTIONS

• Report below the quantity of each listed item mined and also treated at this establishment. Purchases or receipts of such items should be reported only in part I.

- Ores mined for sale as such and not treated at this establishment should only be reported in item 18B.
- Report treated products in item 18B.

Line No.	ltem			material m		quar	sure or ntities		antities mine ed at this est (D)			
	ORES AND CONCENTRATES MINED AND	AND ENTRATES Crude <b>iron ore</b> for concentration ( <i>Report</i>				<b>↑</b>			(2)			
1	TREATED				01113 9 Lo		tons					
3		Bauxite (crude or dried) for treatment			9903 5		ļ					
4		Other ores and concentrates for treatment			0098 3	Shor	t tons					
	em <b>17B.</b> FUEL	S USED DURING 1992		100	0098 3	31101						
Line No.				us e	for quantities		Quar 3 ( <b>C</b>	ntity	Cost, inclu cost (f	Inou-		
	(A)		(B)		(C)		(L	,	Willions			
1	and anthracite			54	Short tons				\$			
2	FUEL OIL	Distillate (light) grade numbers 1, 2, 4, and light diesel fuel	29114	Darrois								
3		Residual (heavy) grade numbers 5 and 6 and heavy diesel fuel		19	(42 gal) ↓				     			
4	<b>4</b> Gas – natural, manufactured, and mixed			96	Million cubic feet							
5	5 Gasoline			13	Thousa gallon							
6	Other fuels – liquefied petroleum gas, coke, wood, and other			8 0								
7	<b>TOTAL</b> Sum of lines 1–6 should equal item 12, line c (page 3)								\$			
Item 18A. TYPE OF OPERATION DURING 1992 (Include production, development, and exploration operations.)												
Line No.	Z Z Item							Key	Mark (X) appropriate boxes			
	MINING METHODS Mark (X)	METHODS performed, indicate method most likely to be used when production is Mark (X) started or resumed.)										
1	one or more	Open-pit and/or dredge						401	6205 🗌			
2		Underground						402	6304 🗌			
3	Other, such as in situ solution, etc.							403	6395 🗌			
4	4 No mine or abandoned mine							404	6106 🗌			
5	TREATMENT METHODS AT PLANT	Agglomeration	405			68	6841					
6	Mark (X) one or both	Mark (X)						406	69	6999 🗖		
7						407	6601					
									CONTINU	E ON PAGE 7		

FORM MC-1001 U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS													
1992 CENSUS OF MINERAL INDUSTRIES IRON, FERROALLOY, URANIUM, AND				ES 🔽	Name of	estab	lishment (Same	as address bo	x)				
MISCELLANEOUS METAL ORES - Continued				ed									
Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992													
	INSTRUCTIONS Report: Include: Con.												
	allowances a	ies f.o.b. mine oi nd exclusive of f		• Products transferred for treatment or other use to other									
	taxes. • Long tons eq	ual to 2,240 pou	nds.		<ul> <li>Bonuses or other credits for metal contained, as well as royalties.</li> </ul>								
	Short tons ec	jual to 2,000 pou	ınds.				duction of crude blishment in co		treatment a	t this			
	Include: • All products i	produced or phy	sically shipped f	rom this	Exclude:								
	establishmen		<i>,</i>		<ul> <li>From crude ore shipped any material mined and also treated at this establishment. Report these on the appropriate line for the treated or concentrated product.</li> <li>Penalties for impurities.</li> </ul>								
		pped on consign	•										
<ul> <li>Concentrated ores, metals, and agglomerates from ore mined at this establishment, purchased, or received fro other establishments of your company.</li> <li>Quantity and estimated value of products treated on a custom or toll basis.</li> </ul>					om generally collects detailed figures on the mineral products listed here. This item provides only summary figures which will serve to relate the statistics compiled from the								
								Shipments and interplant transfers					
		Description			mea	it of sure	Quantity of	Quantity	Value, f.o.b. mine or plant				
Line No.	Description			product code	1	for ntities	production		584	(E)	1		
Lir		(A)	(B)	(	C)	(D-1)	(D-2)	Millions	Thou- sands	Dollars			
1	Iron Ore and Concentrates	IRON ORE CONCEN- TRATES (INCLUDING WASHED MATERIAL)	Direct shipping ore	10111 21	9	1			\$	i 1	 		
2	Containing Less Than 5 Percent		Ore for concentration	10111 23	5					 	 		
3	Manganese		For consumer	10112 03	5					1			
			For							1			
			agglomeration plants not at blast			ong ons				l I	1		
4			furnaces	10112 05	0					 <del> </del>	 		
5		Iron ore agglon pellets, sinter, k and other	10112 07	07 6					 	 			
6	BAUXITE	Bauxite, undried Bauxite (dried, activated, or calcined)		10992 11		3				1	1		
7				10992 21		Ļ				1 	1		
F	FERROALLOY ORES AND					1				1	1		
	CONCEN- TRATES	Crude ferroalloy ores: manganese and manganiferous ores, molybdenum, chromium, cobalt, columbium, nickel, tantalum, and tungsten Molybdenum concentrates Other ferroalloy concentrates: manganese, chromium, cobalt, columbium, nickel, tantalum,				 Short tons					 		
	(EXCEPT VANADIUM)			10011-1-						- 			
8	INCLUDING MANGANESE			10611 00		♥ 00 lb,				<u> </u> 	 		
	AND MANGANI- FEROUS ORES				cont	ained olyb-				1	 		
9	CONTAINING 5 PERCENT			10612 31	5 dei	num ∱				<u> </u> 	 		
10	OR MORE MANGANESE									l I			
⊢	Uranium	and tungsten Crude uranium and vanadium ores		10612 29	9					<u> </u> 	 		
11				10941 02	9					 	l I		
12	Ores and Concen- trates	URANIUM CONCEN-	From crude ore	10942 03		 nort ons							
		TRATES	From other							1			
			processes such							1			
13			as in situ solution mining, etc. 10	10942 04	3						 		
14		Vanadium conc		10942 05		Ļ				+ 	 		
<u> </u>	10042				-	-	1	1					

## Form MC-1001

lt	em 18 <b>B.</b> PROI	DUCTS AND SERVICES OF TH	IS ESTA	ABLIS	SHMENT D	URING 1992	– Continued				
							Shipments a	and interplant transfers			
Line No.		Description	Censu produ code	ct	Unit of measure for	Quantity of production	Quantity	Value, f or	.o.b. m plant <b>(E)</b>	ine	
ine			581		quantities	582	583	584	Thou-		
		(A)	(B)		(C)	(D-1)	(D-2)	Millions	sands	Dollars	
	MISCELLA- NEOUS METAL ORES AND CONCEN- TRATES	Other crude ores, such as mercury, titanium (ilmenite and rutile) antimony, beryllium, rare-earth metals, and tin – Specify kind and unit of measure							     	     	
15			10998 1	110				\$	1		
		Other concentrates, such as mercury metal, titanium (ilmenite and rutile) antimony, beryllium, rare-earth metals, and tin – Specify kind and unit of measure								         	
16		2 11 1	10998 2	219					1		
	ALL OTHER PRODUCTS OF THIS ESTABLISH- MENT	Describe and report separately each product with a value of \$50,000 or more which cannot be assigned to lines 1–16 above. Specify unit of measure for quantity. For all remaining products, write "Other" and report a single total value.							       	       	
17			18						1	1	
18			26								
19			34							 	
13	<b>D</b>									 	
20	for other establi	rk or services performed ishments. <i>Exclude receipts</i> on of ores on a custom or	10810 0	00 0					 	   	
21	RESALES	Sales of products bought and sold without further processing. The cost of such items should be reported in item 12, line b (page 3).	99989 (	00 6						     	
22	<b>TOTAL va</b> Sum of lin	llue of shipments and receipts es 1–21, column (E)	77000 0	8 00				\$	   	1	
Ite	ems 19–21 – N	lot applicable to this report	•								
RE	<b>MARKS</b> – Pleas	e use this space for any explana	ations tha	at ma	ay be essent	ial in understa	nding your repo	orted data.			
		ICATION – This report is subst	-		rate and ha				-		
Name of person to contact regarding this report (Print o					Tele	ephone 2	code Numbe	r	Exten	sion	
N	ame of company	/			Address	(Number and s	street, city, State	e, ZIP Code,	)		
P		FROM: Month	Day	Ye	ear 1	O: Month	Dav	y I	Year		
	gnature of autho		Т	itle	2	·	· ·	Date			
L							COPDE				

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	1992 CENSU	JS OF MINERAL INDUSTRIE	S
Decare of the canage of t			
And a price characterized by the control of the second secon			
If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to: BUREAU OF THE CENSUS	Γ-		MC-1301
Jeffersonville, IN 47134-0001 Toll-free assistance, 8:00 a.m. to 8:00 p.m.,			
instructions before answering			
Control the density     Control the density     Control the density     Control the density     Control the density     Control to the density     Cont			
Due Date of the capacity     Market 2019			
that receive this questionnaire to answer YOUR CENSUS REPORT IS CONFIDE only for statistical purposes. Further, co	er the questions and re ENTIAL. It may be set pies retained in respo	eturn the report to the Census Bureau. E en only by Census Bureau employees a	By the same law, nd may be used
Is the Employer Identification (EI) N	umber shown in the	e label the SAME as the one used for Federal Tax Return, Treasury Form 9	r this 941?
2 No – Enter current	-		
		rations are located <b>offshore.</b>	nment are
<b>a.</b> Onshore – Enter name of State, use 2-le	etter postal abbreviatio	on	
<b>b.</b> Offshore – <i>Mark (X) ONE box – Refer to appropriate offshore area.</i>	map on page 6 of the	e instruction sheets to determine	
		828863 Northern Gulf of	Pacific offshore
minerals extraction, quarrying, pr	oduction,	5 🗌 Retail operations	
processing materials into new pro Include such activities as: logging	ducts). J, apparel		
subcontracting, home building, ar	ontracting, Id land subdividing		
Item 2. EMPLOYMENT IN 1992			Key Number
AND EXPLORATION WORKERS duri		(1) March 12	301
	vees)	(2) <u>May 12</u>	302
<b>b</b> Total (Sum of lines (1) through (4))		(4) November 12	
	omit fractions)		
e. Total (Sum of lines c and d)			308
L		(	CONTINUE ON PAGE 2

Form MC-1301										Page 2
	ort dollars and er your figures				Be car	eful to		Millions (000)	Thou- sands (000)	Mark
HOW TO REPORT	mple: If a figure	e is \$1,125	,628 – <i>R</i>	eport —				1	126	
	lf item val	lue is equal	to "0" (or	less than \$	500 or 50	0 hours) – <i>Mai</i>	-k (X) -		+ <b>+</b> → >	Χo
Item 3A. PAYROLL IN 1992 (be (Exclude supplement			item 3C	)			Key	Mil.	  Thou. 	Mark (X) if "0"
a. Production, developme (For employees reported			orkers'	wages			309	\$		□o
<b>b.</b> All other salaries and v (For employees reported	wages						310			□o
c. Total (Sum of lines a a	• -	_,					311		 	
Item 3B. FIRST QUARTER PAY	ROLL IN 1992			)			315		   	
Total payroll for the f Item 3C. EMPLOYER'S COST F a. Legally required expen	FOR FRINGE BE	ENEFITS (a	nnual su		l labor (	costs)	315		   	
(Exclude from items 3A a b. Payments for voluntary	-						312		<u> </u> 	
(Exclude from items 3A a							313		<u> </u>	
c. Total (Sum of lines a an item 4. HOURS WORKED BY I	-				TION		314	Hour	s work	□ □ 0
Item 4. HOURS WORKED BY WORKERS IN 1992 (AI		JEVELOPINI	ENT, AN	D EXPLORA	TION		Key	Mil.	  Thou.	Mark
Total hours worked by	production, d	levelopme	nt, and	exploratio	n work	ers in 1992				-
(For employees reported Items 5 and 6 – Not applicable t		C)					320		1	0 □
Item 7. CAPITAL EXPENDITU	•									
BUILDINGS, MACHIN EQUIPMENT, AND M EXPLORATION AND		Building other stru (Exclude	uctures	Machiner equipn		Mineral exploration developme	and	Sum o	DTAL f colum ough (3	
DEVELOPMENT		(1)	)	(2)	1	(3)			(4)	0.4
		Mil.	Thou. 	Mil.	Thou. 	1	Γhou.		Thou.	Mark (X) if "0"
		378	l l	379		273		350	1	
Total capital expenditu during the year	ires	\$		\$		 \$		\$	1	□o
		342		343		1			1	
(a) Capital expenditure buildings and mach					i I				-   	
		345		346	   				1	
(b) Capital expenditure buildings and mach									   	
<b>Item 8 –</b> Not applicable to this rep	port									
Item 9. RENTAL PAYMENTS D	DURING YEAR F	OR BUILDIN	NGS ANE	MACHINE	RY		Key	Mil.	  Thou. 	Mark (X) if "0"
a. Buildings and other	structures						360	\$		
b. Machinery and equi	pment						361		 	
c. Total (Sum of line	-						362		 	□ <b>0</b>
							302			Mark
Item 10. CURRENT ACCOUNT (							Key	Mil.	Thou. 	(X) if "0" □0
MINERAL EXPLORATIO							285	\$	1	
Item 11A – Not applicable to this	report						-			
							Key	Mil.	   Thou. 	Mark (X) if "0"
Item 11B. COST OF PURCHASED		TION SERVI	ICES (TE	LEPHONE, 1	ELEGRA	APH, ETC.)	392	\$	   	□o
				M 12 ON P		·				•

											Page 3
FORM MC-1301	U.S. DEPA	RTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS 11-DIGIT CE								
1992 CENSUS OIL AND GAS FIE			Name of est	ablish	ment (Sar	ne as a	ddress	box)	1		
Item 12. COST OF S	UPPLIES, ETC., F	OR 1992									
		IN	STRUCTIONS	5							
repressuring, mac used or processed interplant transfer Cost is delivered o after discounts an	upplies, gas purc hinery installed, f I during 1992. Incl s, and withdrawa cost; i.e., the amo d including freigh	hased for gas lift and uels, etc., actually	d purch signif consu purch begin subtra	iases r icantly umptic iases, ning i acting	f there are may be rep / from the on of majo consumpt nventories ending in panying in	oorted i amour r items ion ma to the ventori	nstead its actu differs y be es amour es.	if the ally u sign timat nt pur	ey do not used. Whe ificantly fr ted by ado rchased ar	ere om ling nd	n.
								Key	Mil.	  Thou. 	Mark (X) if "0"
(Report detail in	item 17A)	chased machinery i						321	\$	 	
	item 18B as resal	sold without furthe es)	er processing	9				322		1	
		<b>med for heat, pow</b> rt detail in item 17B)	er, or the					323			
d. Cost of purcha	sed electricity (	Report quantity in it	em 14, line a)					324			□o
e. Cost of contra	ct work done fo	or you by others						325		1	□o
f. Total (Sum o	of lines a through	e)						326			
Item 13 – Not applic	able to this repor	t									
Item 14. QUANTITY	OF ELECTRICITY								Kilov	vatthou	
								Key	Mil.	<sup> </sup> Thou. 	Mark (X) if "0"
a. Purchased elec	ctricity (Quantity	comparable to cost	as reported ir	n item	12, line d)	)		327		 	□o
b. Generated elec	stricity (Gross les	ss generating station	i use)					328			□o
c. Electricity solo	d or transferred	to other establish	ments					329			□o
Item 15. INVENTORI	ES OF THIS ESTA				both years	s)					
held. If this establ company, the con establishment tho is responsible for, completing the re report those inver	ardless of where ishment is part or opany should ass se inventories tha as if it owned th port of a minerals ntories that are at	owned by this the inventories are f a multiunit ign to each at the establishment em. For example, in s establishment, tributable to its	e.g., a storag estabi the re stored ON E	tions, at a wa ge are lishme port c d. INV STABI	even if th arehouse, a. These if ant held el of the estal ENTORIES ISHMENT for additi	central nventor sewher blishme SHOU REPOI	ly locatives of a should be the should be th	ted st an op Ild no ere th T BE ee ac	tockpile, o berating of be repon tey are ac DUPLICA companyi	r rted on tually TED	
	es at cost or mar ed accounting me			Key		1	Mark	Key		1	Mark
Are inventories establishment LIFO method o	subject to the	a. Crude petroleu	m, including		Mil.	Thou.   	(X) if "0"		Mil.	Thou.   	(X) if "0"
230 1 Yes – Use t	he sum of the	lease condensa		336	\$	 		332	\$	 	
the Li	amount plus IFO reserve ompleting	b. Supplies, parts, c. Total invent		337		 		333		<u> </u>	
a thro	bugh d(2). If you	(Sum of lines d. Of the value on	a and b)	338		 		334		<u> </u>	
chang calen	ged to LIFO for dar year 1992, fy in the	(1) Amount not LIFO costing	subject to	368		1	 □ □ 0	364		 	 □ □ 0
REM4	ARKS section.	(2) Amount sub LIFO costing	ject to	369		<u> </u> 		365		<u> </u> 	
2 🗌 No – Comp	olete only lines ough d(1).	e. Report the follo	owing	369				305		1	
Line	d(1) should l line c.	applicable to lin (1) Amount of t	he	070		l l	 □ □ 0			l I	 □ □ 0
		LIFO reserve (2) LIFO value o	of	370		 		366		 	
1		line d(2) (net	t)	371	1	1	□o	367		1	□o

Form MC-1301								Page 4
Item 16A. LEGAL FORM OF ORGANIZAT								
Mark (X) the ONE box which best descri		-						
1 Individual proprietorship	₅			, forma a	face	a rativa d		
$_{2} \square$ Partnership $_{3} \square$ Cooperative association (taxable)			mark if an	y torm c	or coope	erative a	association)	
4 Cooperative association (taxable)								
Item 16B. OPERATIONAL STATUS								
Mark (X) the ONE box which best descri								
1 In operation (Include operations un	der development, explo	ration, or	constructio	n)				
<ul> <li>2 Temporarily or seasonally inactive</li> <li>3 Ceased operation – Give date at rig</li> </ul>	ht						Month	Day Year
4 Sold or leased TO another operator				elow		ATE	▶	-
5 Acquired or leased FROM another of			) enter		Enter fi only	gures		
Name of new/former owner or ope	<i>name, etc., b</i> erator	eiuw			002			
			El Numbe	er (9 dig				
Number and street		City			5	tate	ZIP Coc	le
Item 16C. OWNERSHIP, CONTROL, AND a. Is the FIRST DIGIT of your Census Yes – Answer parts b–d No – SKIP to item 17A			address bo	ox) <b>"O"?</b>			·	
b. Is this company 1 □ Yes →	and address of owning	g or contr	olling com	pany	Kin	d of bu	siness of thi	s company
owned or $2 \square NO \not$						Numbe	er (9 digits)	
another company?								
098     Name       c. Does this     1 □ Yes →       company own     2 □ No ★	and address of owned	or contro	olled comp	any	Kin	d of bu	siness of thi	s company
or control 2 🗆 NO 🖌 any other					EI	Numbe	er (9 digits)	
company or companies?						-		
d. Did this company operate in more	than one state or of	fshore a	rea during	1992?				
If more space is needed, attach a sepa 079 1 □ Yes – List additional locations be 2 □ No – SKIP to item 17A								
Physical address of business location (Number and street, city, State, ZIP Code)	Kind of business (K location and Em Identification N	ployer	Sales rece	eipts	рау	nual /roll 4)	Number of employees during pay period including March 12	Are these figures included in other items on this report?
(1)	(2)		Mil.	<sup> </sup> Thou.	Mil.	<sup> </sup> Thou.	(5)	(6)
	КВ					1		
				1				☐ Yes ☐ No
				Ì		i		
	КВ			1		1		
				1		1		│
				Ì		1		
	КВ					1		☐ Yes
				1		I		
				1		1		
	КВ							☐ Yes
				1		1		
				I				
	КВ			1		1		☐ Yes
	-			1				
	CONTINUE WITH IT	EM 17A	ON PAGE	5				
L								

							Page 5
FO	тм <b>MC-1301</b>	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS ESTABLISHMENT 11-DIGIT CENSUS FILE NUMB				
	1992 CENS	JS OF MINERAL INDUSTRIES	Name of establishment (Same a	as address bo	x)		
	OIL AND GAS	FIELD OPERATIONS – Continued					
lt	em 17A. SUP	PLIES USED AND PURCHASED MACH		992			
	Report delivered	cost of individual items listed below	STRUCTIONS Exclude:				
	which were used	during 1992.	<ul> <li>Associated labor costs of 3B, and 12, line e.</li> </ul>	of the kind rep	orted in item	ıs 3A,	
	<ul> <li>Items listed b</li> </ul>	elow whether charged to current or capita	<ul> <li>Payments made for con</li> </ul>				g
	<ul><li>accounts.</li><li>Cost of items</li></ul>	for which less than \$25,000 worth was use	ed payments for supplies a contractor incidental to		furnished b	y the	
	<ul> <li>Supplies pure</li> </ul>	upplies," line 11. hased by this establishment for use by	For valuation, see instruction				
	companies pe establishmen	erforming contract work at this t.	information cannot be taken reasonable estimates are ac		n your record	ds,	
					Received establis this co	hments	s of
					purcha		
No.		Machinery installed and supplie	es used	Census material	Cost, inclu cost (fr	ding de	
S S				code		(E)	
Line		(A)		571 <b>(B)</b>	574 Millions	Thou- sands	l Dollars
	PURCHASED M	ACHINERY INSTALLED, including mobile	loading, transportation, and			 	
	other equipmer and well survey	nt installed at the operation. Also include machinery; drilling rigs; flow tanks; oil a	such equipment as exploration nd gas separators; pumping			1	
1		lhead fittings; gauges, gas traps; control ( transportation equipment for use on leas		353020 1	\$	1	' 
2	PARTS AND AT	TACHMENTS (except those listed elsewh	ere) for renewals and repairs	353030 0			
3	SUPPLIES USED	Industrial chemicals, including acidizing drilling fluids)	materials (except	280111 6			 
4		Drilling fluids (drilling mud and drilling thickeners, and purifiers)	mud materials; mud thinners,	289910 2			
5		Lubricating oils and greases, including	hydraulic oils	290000 9		 	 
6		Cement		324100 7			 
7		Steel shapes and forms (except castings tubing, pipe, plates, sheets, piling, bars, structural shapes		331066 1		   	   
8		Valves and pipe fittings		349020 8			
9		Drill bits and reamers		353010 2			
10		Water purchased		494100 1			
11		All other supplies (such as castings and principal types of supplies included here	forgings) – <i>List the three</i> e	970098 0		 	
						1	
				1			l
12	<b>TOTAL</b> Sum of lir	nes 1–11 should equal item 12, line a (pag	ge 3)		\$		
		CONTINUE WI	TH ITEM 17B ON PAGE 6				

# Form MC-1301

lt	em 17B. FUEL	S USED DURING 1992						
		Kind of fuel		Unit of	199:	2 Consumpti	on	
Line No.	Fuels rece company value. Ad	total delivered cost, not cost per unit. ived from other establishments of your should be included at estimated market just all gas volumes to a pressure base 14.73 pounds absolute at 60°F.) (A)	Census fuel code 561 ( <b>B</b> )	for quantities	Quantity 563 ( <b>D</b> )	Cost, inclucost (1	freight-i (E) Thou-	elivery n)
1	FUEL OIL	Distillate (light) grade numbers 1, 2, 4, and light diesel fuel	291141 0	∱ Barrels		\$		1
2		Residual (heavy) grade numbers 5 and 6 and heavy diesel fuel	291151 9	(42 gal) ↓				
3	Gas – natural, n	nanufactured, and mixed	131159 6	Million cubic feet				1
4	Gasoline		291111 3	Thousand gallons				 
5	Other fuels – liq wood, and othe	uefied petroleum gas, coke, r	960018 0					
6	<b>TOTAL</b> Sum of lin	es 1 – 5 should equal item 12, line c (page 3)				\$		 
7	Fuels Produced and Used at This	Crude petroleum, including lease condensate	131106 7	Thousand barrels	563			
8	Establish- ment for Power or Heat	Natural gas	131108 3	Million cubic feet	563			

Item 18A – Not applicable to this report

### Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992

## INSTRUCTIONS

## Report:

- Net total values f.o.b. wells after discounts and allowances and exclusive of freight charges and excise taxes.
- Quantities in the unit of measure specified in column (C).All crude petroleum figures in thousands of barrels. For
- example, if complete figure to be reported is 210,697 barrels, enter 211.
- All natural gas figures in millions of cubic feet. For example, if complete figure is 310,293,000 cubic feet, enter 310.
- Include:
  - All products produced or physically shipped from this establishment in 1992.
  - Products shipped on consignment, whether or not sold at the end of 1992.
  - The entire output of wells operated by you, including royalty interests and subsidy payments.

#### Include: – Con.

- Material produced at this establishment and transferred for processing or use by your company at other establishments, such as your natural gas liquids plants, pipelines, petroleum refineries, other manufacturing establishments, or separate sales branches.
- In the selling value, royalty, if any

**Line 2** – Report sales volumes from leases whose average daily production of crude petroleum and petroleum condensates per well did not exceed 10 barrels per day during the preceding calendar year. Reasonable estimates for the year are acceptable if data are not available from bookkeeping records.

Lines 8-10 – Report total amounts received or due for oil and gas field contract work done during 1992, including receipts for supplies and equipment furnished by you incidental to this work. Exclude amounts received for work done prior to 1992. See instruction sheets for detailed list of items to be reported on line 10.

No.				Census	Unit			icts at wells ices perform							
Line N		l services	product code	for quantities				for quantities		for quantities		Quantity		.o.b. w ( <b>E)</b>	/ell
Ē.		(A)		581 <b>(B)</b>	(C		583 (D)	584 Millions	Thou- sands	l Dollars					
	Products	CRUDE PETROLEUM, INCLUDING LEASE CONDENSATE	Shipped	13111 00 0	Î			\$	     	   					
2		condensate (Report volumes corrected to 60°F.)	From stripper well leases (included in line 1)	13111 04 2	Thous barre				   	     					
3			ISATE PRODUCED (also ) (Report volumes F.)	13111 07 5	] ↓				   	   					
4		pressure base of at 60°F.) Shipped to co commercial, a own refinerie transmission gas liquids pl company and any volume o	(Adjust volume to a f 14.73 pounds absolute onsumers (domestic, and industrial, including s), distributors, companies, and natural ants operated by your operated by others, less of residue gas returned to or lease operations	13115 00 1	Milli				           	           					
			CONTINUE WITH IT	EM 18B ON F	PAGE 7	7				<u> </u>					

## FORM MC-1301

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992 - Continued

#### ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

**1992 CENSUS OF MINERAL INDUSTRIES** 

**OIL AND GAS FIELD OPERATIONS – Continued** 

lame of establishment	(Same as	address	box)
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Products at wells and Unit of services performed Census °Z measure Value, f.o.b. well (E) product Products and services for Line code Quantity quantities 581 583 584 Thousands | Dollars (B) (D) (A) (C) Millions Describe and report separately the quantity and value of each product with a value of \$50,000 or more which cannot be assigned to lines 1–4 above. Specify unit of measure for quantity. For all remaining products, write "Other" and report a single total value. ALL OTHER PRODUCTS OF THIS ESTABLISH-MENT 18 \$ 5 26 6 34 7 SERVICES Thousand PERFORMED FOR OTHER 8 Drilling oil, gas, dry, or service wells 13810 11 4 feet I ESTABLISH 9 Pumping wells but not operating leases 13890 35 5 MENTS Other oil and gas field services - Specify kind 10 1389000 9 RESALES Sales of products bought and sold without further processing. The cost of such products should be reported in item 12, line b (page 3). Т T 99989 00 6 11 T I **TOTAL value of shipments and receipts** Sum of lines 1–11, column (E) 12 77000 00 8 \$ Item 19. QUANTITY OF SHIPMENTS DURING 1992 BY OWNERSHIP Operator account Total Sum of Unit Oil and gas °Z Account Net columns Description Code of production of operator measure (E)-(H)Royalty payments others Line accounts 591 592 593 594 595 596 (A) (B) (C) (D) (G) (H) (E) (F) Crude petroleum, including lease condensate – Total in column (D) should equal item 18B, column Thousand 891 2 1 barrels (D), line 1. Natural gas – Total in column (D) should equal item 18B, column (D), line 4.\_\_\_\_ Million 893 8 cubic feet 2 Items 20 and 21 - Not applicable to this report **REMARKS** – Please use this space for any explanations that may be essential in understanding your reported data. Item 22. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions. Name of person to contact regarding this report (Print or type) Area code Number Extension 667 1 Telephone 2 Name of company Address (Number and street, city, State, ZIP Code) FROM: Month Day Year TO: Month Day | Year Period covered 666 1 T Т - E L 2 Title Signature of authorized person Date

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

Page 7

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	1992 CENSU	JS OF MINE	RAL INDUSTRIE	S
MC-1401	STONE, SAND,	AND GRAVE		
DUE DATE: FEBRUARY 15, 1993			OMB No. 0607-0736	: Approval Expires 06/30/94
If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to:	[			MC-1401
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001				
Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday: 1-800-233-6136				
Please read the accompanying instructions before answering the questions.				
Census use only				
	(Please	correct any erro	r in name, address, and	I ZIP Code)
YOUR RESPONSE IS REQUIRED BY that receive this questionnaire to answe YOUR CENSUS REPORT IS CONFID only for statistical purposes. Further, co Item 1A. EMPLOYER IDENTIFICATION NU Is the Employer Identification (EI) N establishment on its latest 1992 Em	r the questions and re ENTIAL. It may be se pies retained in respo JMBER umber shown in the	eturn the report t en only by Censu ondents' files are	to the Census Bureau. E us Bureau employees an immune from legal pro	By the same law, nd may be used ocess.
094 1 Yes				
2□No −Enter current El Number (9 digits) →				
Item 1B. PHYSICAL LOCATION – Answer a. Is this establishment's physical loca P.O. box and rural route addresses are □Yes □No – Enter physical location →	ation the same as th	•	vn in the label?	ZIP Code
<ul> <li>b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?</li> </ul>		or borough 3	<b>s this establishment p</b> ]Other – <i>Specify</i> ]Do not know	
095 1 ☐ Yes 3 ☐ No legal boundaries 2 ☐ No 4 ☐ Do not know	d. In what county	is this establis	hment located?	
	the ONE box which b or industrial activity o			
070 1 ☐ Minerals extraction, quarrying, pro exploration, mining contract servi and gas field operations and servi	ces, or oil	4	•	
2 Manufacturing (fabrication, assem processing materials into new pro include such activities as: logging jobbing, publishing, printing, and	ducts. Also , apparel		narked (X) in boxes 2 th r principal activity belo	
3 ☐ Construction (including general co subcontracting, home building, an and development)	ntracting, d land subdividing			
Item 2. EMPLOYMENT IN 1992				Key Number
a. Number of PRODUCTION, DEVELOF	MENT	(1) March 10		
AND EXPLORATION WORKERS duri period including the 12th of month		(1) <u>March 12</u> (2) May 12		301
(Include both full- and part-time employ	vees)	(3) August 12		303
		(4) November	12	304
b. <u>Total</u> (Sum of lines (1) through (4))				305
c. Average number (Divide line b by 4 –	omit fractions)			306
d. All OTHER EMPLOYEES (Pay period i	ncluding March 12)			307
e. Total (Sum of lines c and d)				308

Andrea your flagmen in the correct columns.         HOW TO REPORT         Example: If a figure is \$1,129,628 - Report         If the value is equal to 2° for test that \$500 or \$500 hours) - Mark (20         Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test test that \$500 or \$500 hours) - Mark (200)         It is value is equal to 2° for test test that \$500 or \$500 hours) - Mark (200)         It is value is that \$500 or \$500 hours) - Mark (200)         It is value is that \$500 or \$500 hours) - Mark (200)         It is value is that \$500 or \$500 hours) - Mark (200)         It is value is that \$500 or \$500 hours) - Mark (200)	Form MC-1401												Page
Parameter         Production         Producti								Be carefi	ul to			Isands	(X) if
tem 3A. EXYROLL IN 1092 (before deductiona) (for amployees reported in item 3C)     Key     Mil.     Them.       a. Production, development, and exploration workers' wages (for amployees reported in item 2, line c)     30     30     30       b. Correst (Sum of lines a and b)     311     30     30     30       c. Total (Sum of lines a and b)     311     312     312     312       c. Total (Sum of lines a and b)     313     314     312       a. Legally required expenditures, including Social Security (Exclude from lines 3A and 3B)     313     312       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       c. Total (Sum of lines a and b)     314     314       tem 7. ASSET, CAPTAL     Buildings and (1)     (2)     (3)       r. Total registal     323     320     320       tem 7. ASSET, CAPTAL     Buildings and (1)     (2)     (3)       r. Total capital torquistion excluses of depreciable (aquistion excluses)     321     322       r. Total capital correst excluses     321<	HOW TO REPORT	Exampl	e: If a fig	ure is \$	1,125,628	– Repo	ort —			>	1	126	
Exclude supplemental labor costs reported in tem 30'       Key       Mil. <td></td> <td></td> <td>If item</td> <td>value is</td> <td>equal to "C</td> <td>)" (or les</td> <td>s than \$50</td> <td>0 or 500</td> <td>hours) – <i>Ma</i></td> <td>rk (X) -</td> <td></td> <td><math>\xrightarrow{ }</math></td> <td>Xo</td>			If item	value is	equal to "C	)" (or les	s than \$50	0 or 500	hours) – <i>Ma</i>	rk (X) -		$\xrightarrow{ }$	Xo
(for employees reported in item 2, line c)     -     90     -     10       b. All other salaries and by     310     -     00       c. Total (Sum of lines and b)     311     -     00       Total payrelit or the first quarter (January-March)     310     -     00       tem 38. FIRST OUARTER PAYROL IN 1992 (before deductions)     311     -     00       Total payrelit or the first quarter (January-March)     312     -     00       tem 30. Explore quarter or payrenes     313     -     00       text (Sum of lines and b)     313     -     00       e. Total (Sum of lines and b)     313     -     00       tesct(def from item 35 And 38)     313     -     00       tesct(def from item 35 And 38)     313     -     00       tesct(def from item 35 And 38)     313     -     00       tem 7     ASSETS, CAPITAL     Buildings and other structure from item 37 and 81     -     00       tem 7     ASSETS, CAPITAL     Buildings and other structure from item 37 and 81     -     00       tem 7     ASSETS, CAPITAL     Buildings and other structure from item 37 and 81     -     00       tem 7     ASSETS, CAPITAL     Buildings and other structure from item 37 and 81     -     00       texplore structure of depre					ed in iten	n 3C)				Key	Mil.	   	Mark (X) if "0"
(Eor amployases reported in Term 2, line d)     31     31     31       1tem 36, FIRST QLARTES PAYROLL IN 1992 (before daductions)     311     315     0       1tem 36, EMPLOYER'S COST FOR FINGE BENEFITS (annual supplemental labor costs)     315     0     0       1tem 36, EMPLOYER'S COST FOR FINGE BENEFITS (annual supplemental labor costs)     315     0     0       1tem 36, EMPLOYER'S COST FOR FINGE BENEFITS (annual supplemental labor costs)     314     0     0       1tem 36, EMPLOYER'S COST FOR FINGE BENEFITS (annual supplemental labor costs)     314     0     0       1tem 40, Exclude from terms 3A and 380     313     0     0     0       1tem 40, Exclude from terms 3A and 380     314     314     0     0       1tem 41, HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION     HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORA					on worke	ers' wa	ges			309	\$		□o
Test 30, FIRST OLARTEE PAYROLL IN 1992 (before deductions)       0       0         Total payrolf or the first quarter JJanuary Amarch)       915       0         Item 30.: EMPLOYER'S COST FOR FINGE BENETIS (annual supplemental labor costs)       1       0         Item 30.: Employed for the first quarter JJanuary Amarch)       915       1       0         Item 30.: Employed from thems 3A and 30)       912       1       0         Item 30.: Total four secondad by production, development, and exploration workers in 1992       914       0         Item 4.: HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION       Hours worked by production, development, and exploration workers in 1992       920       920         Item 5 and 6 - Not applicable to this report       Execute from thems 2, line 6;       920       920       920         Item 5 and 6 - Not applicable to this report       6       \$       \$       \$       \$       \$         Item 7. ASSETS, CAPTAL END BUILDING TO THE Exclude land in the first quarter for evaluation and exploratis and and exploration and exploration and expl				ie d)						310		Thou. A Thou. A Thou. A A A Thou. A A Thou. A Columns ough (4)	□o
Total payroll for the first quarter (January-March)       315       10         a. Legally required expenditures, including Social Security       312       1       0         b. Payments for voluntary programs       313       10       0         fieldule from terms And 38)       313       10       0         c. Total Sum of lines a and b)       313       10       0         c. Total New WORKED P RODUCTION, DEVELOPMENT, AND EXPLORATION       Hours worked       Hours worked         WORKERS IN 1982 (ANNUAL)       Key       Mili.       Thou K/A/         Total hours worked by production, development, and exploration workers in 1992       320       50       500         Total hours worked by production, development, and exploration	c. Total (Sum of lin	es a and l	<b>c</b> )							311		1	□o
tem 3C.       EMPLOYER'S COST FOR FININGE BENEFITS (annual supplemental labor costs)       a12       1       0         i.       Legaly required synaphicatics, including Social Security       a12       0         i.       Legaly required synaphicatics, including Social Security       a12       0         i.       Degeneratives, including Social Security       a12       0         i.       Degeneratives, including Social Security       313       0       0         itsent for volumers programs       (fisclude from items 3A and 3B)       314       0       0         itsent for volumers and by production, development, and exploration workers in 1992       200										315		1	
b. Payments for voluntary regrams (Exclude from items 3A and 3B)       313       313         c. Total (Sum of lines a and b)       314       314         Item 4.       HOURS WORKED BY PRODUCTION, DEVELOPMENT, AND EXPLORATION WORKERS IN 1992 (ANNUAL)       Hours worked Mill. Thou. (Mill. Mill. Mill. Thou. (Mill. Mill. Thou. (Mill. Mill. Thou. (Mill. Mill. Mill. Thou. (Mill. Mill. Mill. Thou. (Mill. Mil	Item 3C. EMPLOYER'S ( a. Legally required	COST FOR expendit	FRINGE ures, inc	BENEFI	TS (annu	al suppl		abor co	sts)				
C. Total (Sum of lines a and b)     C. Total (Sum of lines a and b)     Site and b)     S	<u>-</u>		-							312			
them 4.       Hours worked by production, development, and exploration workers in 1992       Hours worked         Total hours worked by production, development, and exploration workers in 1992       Hours worked         Total hours worked by production, development, and exploration workers in 1992       Image: Complexes representation workers in 1992         Items 5 and 6 - Not applicable to this report       Mineral equipment       Mineral equipment       Mineral equipment         RETREMENTS       ASERS, CAPTALL       Mechinery and equipment       Mineral equipment       Mineral equipment       Mineral equipment         a.       Gross value of depreciable by server       S       S       S       S       Complexes representations         b.       Total equipment       Total       Total       Total equipment       Mineral equipment       Mineral equipment       Mineral equipment       S       S       S       Complexes       S       S       S       Co	(Exclude from item	s 3A and	3B)							313		1	
Amount of the second										314	Hou		
Total hours worked by production, development, and exploration workers in 1992       320       0         Item 5 and 6 - Not applicable to this report         Total Action and Action action and Action and Action and Action and Action and Action ac				, DEVEL	OPMENT,	, AND E	XPLORAT	ION		Key			Mari (X) i
Items 5 and 6 - Not applicable to this report         Item 7. ASSETS, CAPITAL EXPENDITURES, AND RETIREMENTS       Muldings and (Exclus 1 and and) (Exclus 1 and and (Exclus 1 and and) (Exclus 1 and a					opment, a	and exp	oloration	worker	s in 1992			+	-
Item 7.       ASSETS. CAPITAL. EXPENDITURES. AND RETIREMENTS       Buildings and items 7 and 80 (5)       Machinery and equipment (5)       Mineral exploration and and rights       Mineral and rights       Sum of colurns (1)       Sum of colurns (1)       TOTAL Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       TOTAL Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       TOTAL Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       TOTAL Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Total (1)       Sum of colurns (1)       Sum of colurns (1)       Sum of colurns (1)       Mineral (2)				ec)						320			
a. Gross value of depreciable assets (acquisition cost) at the beginning of the year       339       340       270       271       341       Thou.       Mii.       Thou.	Item 7. ASSETS, CAPI EXPENDITURE	TAL S, AND	Building other stru (Exclude	land in			explorat	ion and			Sum o	f colum	
Mil.       Thou.       Mil. </td <td></td> <td></td> <td>(1</td> <td>)</td> <td>(2</td> <td>)</td> <td>(3</td> <td>;)</td> <td>(4)</td> <td></td> <td></td> <td>(5)</td> <td>Mark</td>			(1	)	(2	)	(3	;)	(4)			(5)	Mark
in and/or depletable assets       intermediation			Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	Mil.	Thou.	(X) i
b. Total capital expenditures during the year (1) Capital expenditures for used buildings and machinery (2) Capital expenditures for the year for buildings and machinery (2) Capital expenditures (2) Capital expenditures (2) Capital expenditures (2) Capital expenditures (2) Capital expenditures (2) Capital expenditures (2) Capital expenditures (2) Capital e	and/or depletable (acquisition cost)	assets at the										 	
expenditures during the year (1) Capital expenditures for new buildings and machinery (2) Capital expenditures for used buildings and machinery (2) Capital expenditures for used buildings and machinery (2) Capital expenditures for used buildings and machinery (2) Capital expenditures for used buildings and machinery (2) Capital expenditures for suballings and machinery (2) Capital expenditures for suballings and machinery (2) Capital expenditures for used buildings and machinery (2) Capital expenditures for suballings and machinery (2) Capital expenditures for suballings and machinery (2) Capital expenditures for suballings and machinery abandoned, scrapped, etc.) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)		vear					- · ·				-	<b> </b>	
(1) Capital expenditures and machinery       345       346       1<	expenditures											 	
(2) Capital expenditures and machinery       .	for new buildir	ngs										 	
aisposition of depreciable and/or depletable assets sold, retired, destroyed, abandoned, scrapped, etc.)       (       )	for used buildi	ngs	345		346								
d. Gross value of depreciable and/or depletable assets at the end of the year (Line a plus b minus c equals d)       355       279       280       356       1	disposition of depr and/or depletable a (i.e., gross value of a sold, retired, destroy	ssets ssets ed,	351	   	352		276		277		353	   	
at the end of the year (Line a plus b minus c equals d)       i	d. Gross value of de	preciable	( 354	) 	( 355	)	( 279	)	280	)	( 356	) 	
Item 8.       DEPRECIATION AND/OR DEPLETION CHARGES FOR THE YEAR 1992       357       358       282       283       359       0         Item 9.       RENTAL PAYMENTS DURING YEAR FOR BUILDINGS AND MACHINERY       360       361       362       0	at the end of the y (Line a plus b minus	year		 								i I	
Item 9.       RENTAL PAYMENTS DURING YEAR FOR BUILDINGS AND MACHINERY       360       361       361       362       1	Item 8. DEPRECIATION DEPLETION CH	ARGES	357		358		282		283		359	   	
Item 10. CURRENT ACCOUNT EXPENDITURES DURING THE YEAR FOR MINERAL PROPERTIES       285       286       287         Image: Strain	Item 9. RENTAL PAYMI DURING YEAR BUILDINGS AN	ENTS FOR	360	   	361			   			362	   	
Key       Mil.       Thou.       Mark (X) i         Item 11A. LEASE RENTS FOR MINERAL PROPERTIES       288       \$       □ 0	Item 10. CURRENT ACCO EXPENDITURES THE YEAR FOR	<b>DURING</b>		   			285		286		287	 	
Item 11A. LEASE RENTS FOR MINERAL PROPERTIES	THOI ENTIES				1		1		<u> </u>	Key	Mil.	  Thou.	Mar (X) i
	Item 11A. LEASE RENTS F	OR MINE	RAL PROP	ERTIES						288	\$	+ 	
Item 11B. COST OF PURCHASED COMMUNICATION SERVICES (TELEPHONE, TELEGRAPH, ETC.)   392   \$   🗌 🛛											\$	<u>.</u> 	

										Page
FORM <b>MC-1401</b> U.S. DEF	PARTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS 11-DIGIT CE								
1992 CENSUS OF MINERAI			ablishment (Same as address box)							
STONE, SAND, AND GRAVE	L – Continued									
em 12. COST OF SUPPLIES, ETC.,	FOR 1992									
	INS	STRUCTIONS								
The figures reported should repre purchase cost of supplies, minera preparation, machinery installed, used or processed during 1992. It interplant transfers, and withdraw Cost is delivered cost; i.e., the an after discounts and including frei- charges incurred by the establish	Ils received for fuels, etc., actually nclude purchases, vals from inventories. mount paid or payable ght and other direct	purcha signifi consu purcha beginr subtra	ases n cantly mptio ases, o ning in cting	there are nay be rep from the on of majo consumpt nventories ending in panying ir	ported i amour r items ion ma s to the ventori	nstead its actu differs y be es amour es.	if the ally u sign timat nt pur	ey do not used. Wh ificantly f ted by ad rchased a	differ ere rom ding nd	n.
							Key	Mil.	  Thou. 	Ма (X) "С
a. Cost of supplies used, miner machinery installed (Report d	etail in item 17A)		purc	hased			321	\$		
. Cost of products bought and (Report sales in item 18B as res	ales)						322			
Cost of purchased fuels cons of electricity (Report detail in i		er, or the gen	erati	on			323			
. Cost of purchased electricity	(Report quantity in it	em 14, line a)					324			
. Cost of contract work done	for you by others						325			
. Total (Sum of lines a throug	jh e)						326			
em 13 – Not applicable to this rep	ort									
m 14. QUANTITY OF ELECTRICIT	Y							Kilo	watthou	irs Ma
<b>.</b> Purchased electricity (Quanti	ty comparable to cost	as reported in	item	12, line d	)		327		Thou. 	(X) "C
. Generated electricity (Gross	ess generating station	use)					328			
Electricity sold or transferre	d to other establish	ments					329			
em 15. INVENTORIES OF THIS ES	TABLISHMENT AT EN	D OF YEAR (Re	eport	both year	s)					
Report the value of all inventorie: establishment regardless of wher held. If this establishment is part company, the company should as establishment those inventories t is responsible for, as if it owned completing the report of a minera report those inventories that are Report inventories at cost or ma	e the inveritories are of a multiunit ssign to each hat the establishment them. For example, in als establishment, attributable to its	e.g., at storag establi the rep stored ON ES	t a wa e area shme port o . INVE TABL	even if th arehouse, a. These i int held el f the esta ENTORIES ISHMENT for additi	central nventor sewher blishme SHOU REPOI	ly locatives of a should be the should be th	ted st an op Ild no ere th T BE ee ac	tockpile, o perating of be repo ney are ad DUPLICA company	or orted on ctually ATED	
generally accepted accounting r			Key	Mil.	  Thou.	Mark	Key	Mil.	  Thou.	Má
Are inventories of this establishment subject to the					+	"0"			+	""
LIFO method of valuation? 1 □ Yes – Use the sum of the	a. Mined or quarri	ied products	336	\$			332	\$		
LIFO amount plus the LIFO reserve	b. Supplies, parts,		337		1		333			
for completing a through d(2).	c. Total invento (Sum of lines	a and b)	338				334			
Note: If you changed to LIFO for calendar year 1992,	d. Of the value on report: (1) Amount pat	-			1					
specify in the REMARKS section.	(1) Amount not LIFO costing	1	368				364			
	(2) Amount sub LIFO costing		369			□o	365			
2 □ No – Complete only lines a through d(1). Line d(1) should	e. Report the follo applicable to li				1					
equal line c.	(1) Amount of t LIFO reserve		370			□o	366			
	(2) LIFO value o line d(2) (net		I –		1		367		1	

Item 16A. LEGAL FORM OF ORGANIZAT								Page 4
Mark (X) the ONE box which best descr		-						
1 Individual proprietorship	5 Governme							
<sup>2</sup> Partnership	0 Corporatio		mark if any	/ form o	f coop	erative a	ssociation)	
<sup>3</sup> Cooperative association (taxable)		pecify 🖌						
4 Cooperative association (tax-exe	mpt)							
Item 16B. OPERATIONAL STATUS								
Mark (X) the ONE box which best descri	ibes this establishment a	at the end o	of 1992					
$001$ 1 $\Box$ In operation (Include operations ur				ו)				
2 Temporarily or seasonally inactive								
3 Ceased operation – Give date at rig	ght						Month	Day Year
4 Sold or leased TO another operato	-				GIVE D Enter fi		•	
5 Acquired or leased FROM another	operator – Give date at name, etc., b		enter		only	0		
Name of new/former owner or op					002			
			El Numbe	r (9 digi	ts)	-		
Number and street		City			S	tate	ZIP Coc	le
Item 16C. OWNERSHIP, CONTROL, AND	LOCATION OF OPERA	TIONS						
a. Is the FIRST DIGIT of your Census	File Number (imprint	ted in the	address bo	x) <b>"0"?</b>				
☐ Yes – Answer parts b–d								
□ No – <i>SKIP to item 17A</i>								
097 Name	and address of owning	a or contro	lling com	2201	Kin	d of bu	siness of thi	scompany
<b>b.</b> Is this company $_1 \square Yes \rightarrow$	and address of owning	g or contro	Shing com	Jany			siness of th	scompany
owned or								
another					EI	Numbe	r (9 digits)	
company?								
	and address of owned	l or contro	lled compa	any	Kin	id of bus	siness of thi	s company
c. Does this 1 ☐ Yes → company own								
or control $2 \square NO \overrightarrow{r}$					EI	Numbe	r (9 digits)	
any other company or								
companies?						-		
d. Did this company operate at more or development, during 1992? If n					er expl	oration	l i i i i i i i i i i i i i i i i i i i	
1 ☐ Yes – List additional locations be 2 ☐ No – SKIP to item 17A	elow.							
							Number of	
Physical address of husiness location	Kind of business (k							A
Physical address of pusiness location   Ning of pusiness (NB) at this   Sales and   Annual   during pay instructed								
	location and Em	ployer	Sales rece			nual yroll	employees during pay period	Are these figures included in other items
(Number and street, city, State, ZIP Code)		ployer	rece	ipts	рау	yroll	employees during pay period including	figures included in other items on this
(Number and street, city, State, ZIP Code)	location and Em Identification N	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report?
	location and Em Identification No (2)	ployer	rece	ipts	рау	yroll	employees during pay period including	figures included in other items on this
(Number and street, city, State, ZIP Code)	location and Em Identification N	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6)
(Number and street, city, State, ZIP Code)	location and Em Identification No (2)	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6)
(Number and street, city, State, ZIP Code)	location and Em Identification No (2)	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6)
(Number and street, city, State, ZIP Code)	location and Em Identification No (2)	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6)
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2)	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6)
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2)	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) U Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No
(Number and street, city, State, ZIP Code)	location and Em Identification N (2) КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) U Yes No Ves No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) U Yes No Ves Ves No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) U Yes No Ves No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification N (2) КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ	ployer	rece	ipts	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Ni (2) КВ КВ КВ КВ КВ КВ КВ		(3 Mil.	ipts   Thou.	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Nr (2) КВ КВ КВ КВ КВ КВ		(3 Mil.	ipts   Thou.	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Ni (2) КВ КВ КВ КВ КВ КВ КВ		(3 Mil.	ipts   Thou.	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Ni (2) КВ КВ КВ КВ КВ КВ КВ		(3 Mil.	ipts   Thou.	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No
(Number and street, city, State, ZIP Code)	Iocation and Em Identification Ni (2) КВ КВ КВ КВ КВ КВ КВ		(3 Mil.	ipts   Thou.	pay (4	yroll 4)	employees during pay period including March 12	figures included in other items on this report? (6) Yes No Yes No Yes No Yes No

FOR	MC-1401	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	ENTER THIS ES 11-DIGIT CENS	TABLISHME US FILE NUI				
	1992 CENS	JS OF MINERAL INDUSTRIES	Name of establis			ox)		
	STONE, SA	ND, AND GRAVEL – Continued						
lt		LIES USED, MINERALS FOR PREPAR, INERY INSTALLED DURING 1992	ATION, AND PU	RCHASED				
		INS	STRUCTIONS					
	<ul> <li>Quantities</li> <li>The estima custom</li> <li>Include:</li> <li>Minerals 1992.</li> <li>Items liste accounts.</li> <li>Cost of ite</li> </ul>	cost of individual items listed below. s in the unit of measure specified in column lated cost of minerals received for preparatio or toll basis, as if purchased. received for preparation which were used in ed below whether charged to current or capi tems for which less than \$25,000 worth was u	(C). use this on on <b>Exclude</b> • Asso 3B, a • Payn payn tal cont For valua informati	plies purcha by companie establishme ciated labor ind 12, line en nents for sup ractor incider tion, see inst on cannot be	costs of the kind	ontract work reported in it ces performen nent furnished 12. If the	at ems 3A d, incluc d by the	ling
					Received fro			
			Canaua	Unit of	of this compar and minerals on a ci	received for ustom or toll	prepara	ation
No.		inerals received and processed, ninery installed, and supplies used	Census material code	measure for quantities	Quantity	Cost, inclu cost (1	freight-i	
Line			571 <b>(P</b> )		573	574	(E)	   Dollars
	MINERALS RECEIVED FOR	(A)	(B)	(C) ↑	(D)	Millions		
1	PREPARATION (Estimate value of minerals	Rough blocks used to produce dressed stone	141101 6			\$		; ; ;
2	received for custom preparation.)	Broken stone received for crushing, screening, or washing	142101 5	Short tons				
3		Sand and gravel	144191 4	↓ ↓			1	 
4		ACHINERY INSTALLED, including mobile ortation, and other equipment operation	353020 1				   	   
5		TACHMENTS for mining, mineral nstruction, and conveying equipment	353030 0					   
6	SUPPLIES USED	Explosive materials, except ammonium nitrate	289211 5					 
7		Ammonium nitrate	289212 3				 	 
8		Blasting accessories	289214 9					 
9		Steel shapes and forms (except castings and forgings) such as plates, sheets, strip, piling, bars, rails, wheels, track accessories, pipe, tubing, wire, wire products, and structural shapes	331066 1				     	     
10		Rubber and plastics products, including tires and tubes	300167 4				 	1
11		All other supplies (such as timber and lumber purchased, forgings, castings, drill bits, other tools, lubricants, water purchased, and chemicals) – <i>List the</i> <i>three principal types of supplies</i> <i>included here.</i>	970098 0					         
12	<b>TOTAL</b> Sum of lir	nes 1–11 should equal item 12, line a (pag	e 3)			s	   	   

## Form MC-1401

Page	6
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İt	em 17B. FUE	LS USED DURING 1992							
						1992	CONSUMPTI	ON	
Line No.	Fuels r	Kind of fuel total delivered cost, not cost per unit. received from other establishments ur company should be included at estimated market value.)	Census fuel code	Unit of measure for quantities	Qua 563	ntity		ding de reight-i (E)	
Ξ		(A)	(B)	(C)		<b>D</b> )	564 Millions	Thou-	 Dollars
1	Coal – bitumino	us, subbituminous, lignite, and anthracite	120005 4	Short tons		-,	\$	1	 
2	FUEL OIL	Distillate (light) grade numbers 1, 2, 4, and light diesel fuel	291141 0	 Barrels					
3		Residual (heavy) grade numbers 5 and 6 and heavy diesel fuel	291151 9	(42 gal.) ↓					
4	Gas – natural, n	nanufactured, and mixed	131159 6	Million cu. ft.					
5	Gasoline		291111 3	Thousand gallons				1	
6	Other fuels – liq	uefied petroleum gas, coke, wood, and other	960018 0						
7	<b>TOTAL</b> Sum of lir			\$	   	   			
lt	em 18A. TYPE	E OF OPERATION DURING 1992 (Include	production,	developme	nt, and	explor	ration opera	tions)	
Line No.		Key	M	ark (X) appro	priate k	юx			
Ξ		(A)					(B)		
	MINING METHODS Mark (X) one or more	(If mine is under development or exploration is being performed, indicate method most lii when production is started or resumed.)					_	-	
1		Open-pit, quarry, bank, wet pit, or dry pit			401		6205	]	
2		Underground			402		6304	]	
3		River, lake, or ocean			403		6254 🗌	]	
4		rry or abandoned mine or quarry			404		6106	]	
5	PROCESSING METHODS AT PLANT	Dimension stone dressing (sawing, turning,	planing)		405		6882	]	
6	Mark (X) one or both	Crushing, grinding, pulverizing, screening, w classifying, or other	406		6999	]			
7	No processing p	blant			407		6601	]	
lt	em 18B. PRO	DUCTS AND SERVICES OF THIS ESTABL	ISHMENT D	URING 199	2				
		INSTRU	JCTIONS						
	Report:		Include: – C				1111.		
	<ul> <li>Net total values f.o.b. quarry or plant after discounts and allowances and exclusive of freight charges and</li> <li>Products transferred for preparation, milling, or other use to other establishments of your company.</li> </ul>								

- and allowances and exclusive of freight charges and excise taxes.
- Short tons equal to 2,000 pounds.

## Include:

- All products produced or physically shipped from this establishment in 1992.
- Material withdrawn from stockpiles.
- Products shipped on consignment.
- Prepared minerals from crude materials mined at this establishment, purchased, or received from other establishments of your company.
- Quantity and estimated value of products prepared on a custom or toll basis.

- Bonuses or other credits for minerals contained, as well as royalties.
- Production of sand or other minerals mined for use in making ready-mixed concrete or other manufactured products at this establishment.

#### Exclude:

- From crude shipments any crude minerals mined and also prepared at this establishment. Report these on the appropriate line for the prepared product.
- Penalties for impurities.

The Bureau of Mines, U.S. Department of the Interior, generally collects detailed figures on the mineral products listed here. This item provides only summary figures which will serve to relate the statistics compiled from the Census of Mineral Industries to the statistics compiled from the Bureau of Mines surveys.

## **CONTINUE WITH ITEM 18B ON PAGE 7**

# FORM MC-1401

#### U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

## ENTER THIS ESTABLISHMENT'S 11-DIGIT CENSUS FILE NUMBER

Name of establishment (Same as address box)

**1992 CENSUS OF MINERAL INDUSTRIES STONE, SAND, AND GRAVEL – Continued** 

# Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992 – Continued Shipments and interplant transfers Unit of Value fob guarry

e No.	Pro	ducts and services	Census product code	Unit of measur for quantiti	e Quantity product	ion	Quantity	arry		
Line		(A)	581 (B)	(C)	582 (D-1)		83 (D-2)	584 Millions	   Thou-   sands	     Dollars
1	LIMESTONE, (Including dolomite,	Crushed or broken stone	14220 00 8	<b>≜</b>				\$	1	
2	cement rock, marl, travertine, and calcareous	Rough dimension stone	14110 11 8	Short to	ns					   
3	tufa)	Dressed dimension stone	32812 00 0	Cubic fe	et					 
4	GRANITE, (Including gneiss,	Crushed or broken stone	14230 00 7	A Short to	ns					 ↓
5	syenite, and diorite)	Rough dimension stone	14110 15 9	↓ Unore to						 
6		Dressed dimension stone	32811 00 2	Cubic fe	et					 
7	OTHER STONE, (Including slate, marble,	Crushed or broken stone	14290 00 1	Short to	ns			_		 
8	trap rock, sandstone, quartz, and miscellaneous	Rough dimension stone	14110 19 1						   	   <del> </del>
9	types of stone)	Dressed dimension stone	32813 00 8	Cubic fe	et					
10	CONSTRUCTION SAND	Run of pit or bank	14421 01 0	<b>∫</b>					i	 
11		Washed, screened, ground, or otherwise treated	14422 01 8							1
12	GRAVEL	Run of pit or bank	14421 05 1							 
13		Washed, screened, or otherwise treated	14422 05 9	Short to	ns					
14		nelting only (unground	14461 00 8							 
15		nground and ground)	14465 00 9						 	
16	Grinding, blast, fu other industrial sa	rnace, engine, filtration, oil, and nd (unground and ground)	14469 00 1	↓						1
17	ALL OTHER PRODUCTS	Lime (quicklime, hydrated lime, and dead burned dolomite)	32740 00 3							1
18	OF THIS ESTABLISH- MENT	Ready-mixed concrete	32730 00 4	1,000 cubic yar	ds					1
19		Asphalt and tar paving mixtures (including bituminous or asphaltic concrete) and asphaltic paving cements	29510 51 8							   
		Describe and report separately each product with a value of \$50,000 or more which cannot be assigned to one of the lines above. Specify unit of measure for quantity. For all remaining products, write "Other" and report a single total value.	18							
20										 
21			26							
22			34					\$		
		CON	TINUE WITH I	TEM 18B	ON PAGE 8					

Page 7

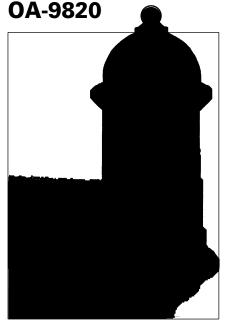
# Form MC-1401

lt	Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1992 – Continued										
							Shipments	and ir	nterplar	nt trans	fers
	Products and services	Cen	sus duct	Unit of measure	Quantity	y of		Va	alue, f.c or i	o.b. qu plant	arry
Line No.	Froducts and services	co	de	for quantities	producť		Quantity	504		E)	
Lin	(A)	581 (E	3)	(C)	582 (D-1)	_	(D-2)	584 Mi	llions	Thou- sands	Dollars
	Receipts for work or services performed for		-,	(0)		,	(0-2)				! 
	other establishments, such as hauling, stripping, pumping, and shop work ( <i>Exclude receipts for dressing, milling,</i>								i		
23	crushing, or other preparation on a custom or toll basis.)	14810	006					\$			1
	RESALES Sales of products bought and sold without further										
	processing. The cost of such products should be reported										 
24	in item 12, line b (page 3).	99989	00 6								 
25	<b>TOTAL value of shipments and receipts</b> Sum of lines 1–24, column (E)	77000	8 00 0					\$			l I
lt	ems 19–21 – Not applicable to this report			I	I						
R	EMARKS – Please use this space for any explar	nations	that m	ay be essen	tial in und	lerstand	ding your re	ported	data.		
It	em 22. CERTIFICATION – This report is subs	tantially	y accu	rate and ha	s been pro	epared	in accorda	nce wi	th inst	ructior	ıs.
N	ame of person to contact regarding this report (					Area co			_	Exten	
	ame of company					2   and stre	et, city, Sta	te, ZIP	Code)		
<u> </u>	FROM: Month	Day	Y	ear 7	TO: Mont	h	D	ay	,	Year	
	eriod covered 666 1				2			•	<u> </u>	-	
S	ignature of authorized person		Title						Date		

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

# U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

# FORM



# 1992 ECONOMIC CENSUSES OF PUERTO RICO

# PLEASE RETURN THIS REPORT FORM WITHIN THE NEXT 30 DAYS.

Include the Census File Number (CFN) shown on the mailing label of this report form with any correspondence.

Please complete this form and return to: DIRECTOR

DIRECTOR BUREAU OF THE CENSUS ATTENTION: OUTLYING AREAS 1201 East 10th Street Jeffersonville, IN 47133-0001

OMB No. 0607-0731: Approval Expires 12/31/93

	Census use only							
990	991	992						

YOU ARE REQUIRED BY LAW (title 13, U.S. Code and an Act of the Legislature of Puerto Rico No. 11 of March 27, 1950) to complete this report form for the establishment identified in the mailing label and return it to the Bureau of the Census. By the same law, your report to the Census Bureau is confidential. It may be seen only by sworn Census employees and may be used only for statistical purposes. The law also provides that copies retained in your files are immune from legal process.

# **REPORT DATA FOR CALENDAR YEAR**

**1992.** If records are not available, reasonable estimates are acceptable. If reporting on a calendar year will involve considerable additional cost and your fiscal year ended between October 31, 1992 and February 1993, you may report data on fiscal year basis, except for employment and payroll data. Calendar year employment and payroll data should be available from your tax records.

# ALL ESTABLISHMENTS COMPLETE

**SECTIONS A AND H.** Complete the ONE section (B–G) which best describes your kind of business or activity.

## IT IS VERY IMPORTANT THAT YOU READ THE ACCOMPANYING INSTRUCTIONS AS YOU ANSWER THE QUESTIONS.

Please correct any errors in name and address, including ZIP Code



		Secti	on A – GENER	AL INFOR	MATION				
ls th labe late	EMPLOYER IDENTIFICATION NUN le Employer Identification (EI) No I the same as that used for this st 1992 Employer's Quarterly Fe Isury Form 941PR?	umber sh establish	ment on its	HOW TO REPORT DOLLAR FIGURES	Report dollar values rounded to thousands. <b>EXAMPLE:</b> Report \$1,125,628 as	Mil- lions (000)	Thou- sands (000)	lars	
	1 ☐ YES 002 2 ☐ NO - <i>Report current</i>	2			OLLAR VOLUME OF BUSINESS	Mil. 010	Thou.	Dol.	
	El Number (9 digits) PHYSICAL LOCATION	-		merch opera	was the dollar volume of nandise sales and other ting receipts for this lishment in 1992?			 	
	e physical location of this estab he address shown in the mailing			Item 6. PA	AYROLL	Mil.	Thou.	Dol.	
	<ul> <li>NOTE – P.O. boxes or rural routes are not physical locations.</li> <li>1 YES</li> <li>2 NO – Report correct physical location below.</li> </ul>			payro	was the total ANNUAL II, before deductions for stablishment in 1992?	030	   	   	
	Number and street			(Janua) deduc	was the FIRST QUARTER ary–March) payroll, before ctions?	001			
	City or town	State	ZIP Code	Item 7. EN	MPLOYMENT	032	Number		
		Julie		part-t during	nany EMPLOYEES (full- and ime) were on your payroll g the pay period which led March 12, 1992?	032			
004	<ul> <li><b>b.</b> In what municipio is this establishment physically located?</li> <li>004</li> </ul>				nany PROPRIETORS and NERS worked 15 or more during the week which	036			
Item 3.	OPERATIONAL STATUS		Number of months		led March 12, 1992?	039			
firm this b. Whi	v many months during 1992 did or organization actively operate establishment? ch of the following best describ	e es the or	005 Derational	c. How many UNPAID FAMILY members worked 15 or more hours during the week which included March 12, 1992?					
stat	us of this establishment at the e	nd of 19	92? Mark (X)		RINCIPAL TYPE OF BUSINESS OR	ACTIVIT	Υ		
006	1 🗌 In operation 2 🗌 Temporarily or seasonally ina	ctive	007 Mo. Day Yr.	busin	n of the following best describes ess or activity being operated at (X) only ONE box.	the PRI the end	NCIPAL of 199	<u>.</u> 2?	
	$3 \square$ Ceased operation – <i>Give date</i>			, man (					
	4 Sold or leased to another operator – Enter name, etc. below AND give date			040 1 WHOLESALE Continue with section B, page 3					
	Name of new owner or operator			. 2	Continue with section C, page 5				
	Number and street			3 SERVICES Continue with section D, page 7					
	C'h e tran	Chata	710.0.1	4	HOTELS, MOTELS, AND OTHER L PLACES – Continue with section I				
	City or town	State	ZIP Code	5	MANUFACTURES Continue with section F, page 10				
Which status	ORGANIZATIONAL STATUS of the following best describes of this establishment at the end	the orgai of 1992	nizational ? Mark (X)	6	CONSTRUCTION Continue with section G, page 14				
only Ol 008	1 🗌 Individual proprietorship			7	Other – Specify in REMARKS belo skip to section H, page 17 complete item 50.	ow and 7, and			
	2 Partnership								
	<ul> <li>3 Cooperative association</li> <li>4 Corporation (Do not mark if an association)</li> </ul>	ny form o	f cooperative	REMARKS					
	5 Government – Specify								
	6 🗌 Other – <i>Specify</i>								

Sect	ion B –	WHOLESALE		
Item 9. KIND OF BUSINESS – WHOLESALE		Item 11. EMPLOYMENT BY PRINCIPAL ACTIVITY		
What was the PRINCIPAL kind of business for this estab in 1992 (or activity by which your business is known to or public)? Mark (X) only ONE box. 07	the trade	What was the approximate number of employees by principal activity during the pay period which included March 12, 1992?	Nuu	mber
Motor vehicles and automotive parts and supplies	- <u> </u>		130	
Furniture and home furnishings	5020	a. Selling	131	
Lumber and other construction materials		<ul> <li>Sales support (including office, clerical, warehouse, driver, and maintenance employees)</li> </ul>	131	
Photographic equipment and supplies	_	<b>c.</b> Central administrative and auxiliary	132	
Other commercial equipment (Include restaurant and hotel	_	d. Manufacturing	133	
equipment and store machines.)	5046 5047	e. Other – Specify	134	
Ophthalmic goods	5048			
Other professional equipment and supplies – <i>Specify</i>	5049			
		HOW TO REPORT	Per	rcent
Metals and minerals, except petroleum	5050	PERCENTS <b>EXAMPLE:</b> Report 38.76% as	3	39
Electrical apparatus and equipment, wiring supplies, and	<b>—</b>	Item 12. CLASS OF CUSTOMER		
construction materials	5063 5064	What was the percentage of 1992 sales (item 5) to each customer class?	Per	rcent
Other electronic parts and equipment – <i>Specify</i>	5064 5065	<b>a.</b> To farmers for farm use	140	Cont
		b. To builders and contractors	141	
Hardware	5072		142	
Plumbing and heating equipment and supplies	5074	c. To exporters (export sales)	143	
Warm air heating and air conditioning equipment and supplies	5075	d. To retailers and repair shops	144	
Industrial machinery and equipment	5084	e. To wholesale establishments		
Transportation equipment and supplies; construction, farm, garden, and other machinery and equipment – <i>Specify</i>	5089	f. To household consumers and individual users	145	
		g. To industrial users (manufacturing and mining)	146	
Other durable goods – <i>Specify</i>	5099	<ul> <li>h. To institutional, commercial, and professional users</li> </ul>	147	
Paper and paper products	5110	i. To governmental bodies (Federal, Commonwealth, and municipal)	148	
Drugs, drug proprietaries, and druggists' sundries	5120	j. TOTAL	1	00
Apparel, piece goods, and notions		(Sum of lines a through i should equal 100%)		00
Groceries and related products.		Item 13. OPERATING EXPENSES		
Farm-product raw materials	└ 5150 □ 5160	What were the TOTAL 1992 operating expenses, including payroll, but	Thou.	D
Petroleum and petroleum products (Include bulk	_	excluding the cost of goods sold and interest expense?	I I	l I
stations and terminals.)		Item 14. DOLLAR VOLUME OF BUSINESS	1	-
Farm supplies		a. Did this establishment sell merchandise for the		
Books, periodicals, and newspapers	_	others on a COMMISSION or BROKERAGE basis	3 in 1992	27
Flowers and florists' supplies	5193	150 1 $\square$ YES – Go to item 14b		
Tobacco and tobacco products	5194	2 🔄 NO – Skip to item 14d		
Paint, paint supplies, and wallpaper	5198	b. What was the gross selling value of Mil. business conducted on a commission 151	Thou.	
Other nondurable goods – <i>Specify</i>	5199 CODE	or brokerage basis for the account of others? (Included in item 5.)	l I	l I
		c. What was the dollar volume of 152	 	1
Item 10. TYPE OF OPERATION		commissions or brokerage received on transactions reported in item 14b?	1	1
Which of the following best describes the type of operat	ion	d. What percentage of the products sold by this		
on which the major portion of your business was conduct in 1992? Mark (X) only ONE box.	iea	establishment (including firms under common ownership or control) did your company	Per 153	rcent
100 1 🗌 Merchant (buying and selling on own account)		manufacture or mine in the United States, Puerto Rico, or U.S. territories?	155	
2 Manufacturers' sales branch or sales office		<b>NOTE</b> – If this is the only establishment of this firm,	skin to it	em 15
3		e. What was the dollar volume of Mil.	Thou.	
		transfer (billings) to other	+	+
		establishments within your company? (NOT included in item 5.)	1 	I I
		•		

%

%

%

%

%

%

%

%

%

%

%

Dol.

Dol.

%

Т Dol.

CONTINUE ON PAGE 4 ቅ

	lion	D - 1		ESALE (Continued)		
Item 15. INVENTORIES				Item 17. COMMODITY LINES (Continued)		
a. Did you have inventories at the end of 1992	27			Commodity lines	Perce of sa	
155 1 🗌 YES – Go to item 15b 2 🗌 NO – Skip to item 16				Plumbing and heating equipment and supplies (hydronics)	189	%
b. Are inventories of this establishment subject last-in, first-out (LIFO) method of valuation?	ct to th	ne		General-purpose industrial machinery, equipment, and parts	190	%
160 1 🗌 YES – Complete the remainder of this	item			Industrial valves and fittings	191	%
2 🗌 NO – Skip to item 15c	Mil.	Thou	ı. Dol.	Welding supplies (Exclude gases.)	192	%
(1) Amount subject to LIFO costing (gross)	162	1		Jewelry, watches, diamonds, and other precious stones and metals (Include silverware.)	193	%
(a) Amount of LIFO reserve	163	l l	I	Drugs, pharmaceuticals, cosmetics, and toiletries	194	%
	164	+		Men's and boys' wear	195	%
(b) LIFO value for line (1) (net)		1	İ	Women's and children's wear	196	%
(2) Amount not subject to LIFO costing	165		I		197	
c. What was the TOTAL value of all	166	+		Footwear	198	%
inventories for 1992?			I	Frozen foods, packaged	199	%
NOTE - (LIFO users only) The sum of (1)(a), (1)(	b), and	(2)		Dairy products, except dried or canned		%
should equal item 15c.				Poultry and poultry products (Exclude frozen packaged.)	200	%
				Confectionery	201	%
Did you have warehouse, stockroom, or other i storage space on December 31, 1992?	Invent	ory		Fish and seafoods (Exclude canned and frozen	202	
170 1 YES – Report usable under-roof floor space excluding space occupied by interior walls, permanent	17	Squar	e feet	packaged.) Meat and meat products (Exclude canned and frozen	203	%
aisles, elevator shafts, stairways, offices, shipping platforms, etc.				packaged.)	204	%
2 NO			Fresh fruits and vegetables	205	%	
Item 17. COMMODITY LINES				Coffee, tea, and spices (processed)	206	%
What was the estimated percentage of total 19	92 sal	es		Canned foods	200	%
What was the estimated percentage of total 19 (item 5) for each commodity line you specify for establishment?	992 sal or this	es		Canned foods Soft drinks	200	
establishment?	992 sal or this	Pe	rcent		207	%
establishment? Commodity lines	992 sal or this	Pe of	rcent sales	Soft drinks	207	%
establishment? Commodity lines New and used automobiles, motorcycles, buses,	992 sal or this	Pe		Soft drinks Other grocery specialties Grain and beans	207	%
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes	992 sal or this	Pe of	sales	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture,	207 208 209	% % %
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt)	992 sal	Pe of 172	sales %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms	207 208 209 210 211	% % %
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt) Used automotive parts, accessories, and equipment	992 sal	Pe of 172 173	sales % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture,	207 208 209 210 211 212	% % % %
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt) Used automotive parts, accessories, and equipment Tires and tubes	992 sal	Pe of 172 173 174	sales % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)	207 208 209 210 211 212 213	% % % % %
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt) Used automotive parts, accessories, and equipment Tires and tubes Household and lawn furniture	992 sal	Pe of 172 173 174 175 176	sales % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.) Petroleum products	207 208 209 210 211 212	% % % % % %
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt) Used automotive parts, accessories, and equipment Tires and tubes Household and lawn furniture Household china, glassware, crockery, and plastic	992 sal	Pe of 172 173 174 175 176 177	sales % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.) Petroleum products Beer and ale	207 208 209 210 211 212 213	9% 9% 9% 9% 9% 9%
establishment? Commodity lines New and used automobiles, motorcycles, buses, campers, and motor homes Automotive parts and supplies (new and rebuilt) Used automotive parts, accessories, and equipment Tires and tubes Household and lawn furniture Household china, glassware, crockery, and plastic housewares	992 sal	Pe of 172 173 174 175 176	sales % % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.) Petroleum products Beer and ale Wines and distilled alcoholic beverages Paint, paint supplies, and wallpaper Books, periodicals, newspapers, and miscellaneous	207 208 209 210 211 211 212 212 213 214	9% 9% 9% 9% 9% 9% 9%
commodity lines         Commodity lines         New and used automobiles, motorcycles, buses, campers, and motor homes         Automotive parts and supplies (new and rebuilt)         Used automotive parts, accessories, and equipment         Tires and tubes         Household and lawn furniture         Household china, glassware, crockery, and plastic housewares         Linens, domestics, curtains, and draperies	992 sal	Pe of 172 173 174 175 176 177	sales % % % %	Soft drinks Other grocery specialties Grain and beans Plastics materials and basic forms Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.) Petroleum products Beer and ale Wines and distilled alcoholic beverages Paint, paint supplies, and wallpaper Books, periodicals, newspapers, and miscellaneous printed materials	207 208 209 210 211 212 212 213 214 215	9% 9% 9% 9% 9% 9%
establishment?         Commodity lines         New and used automobiles, motorcycles, buses, campers, and motor homes         Automotive parts and supplies (new and rebuilt)         Used automotive parts and supplies (new and rebuilt)         Used automotive parts, accessories, and equipment         Tires and tubes         Household and lawn furniture         Household china, glassware, crockery, and plastic housewares         Linens, domestics, curtains, and draperies         Lumber: rough, dressed, and finished	992 sal	Pe of 172 173 174 175 176 177 178	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities – Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s)	207 208 209 210 211 212 213 214 215 216	9% 9% 9% 9% 9% 9% 9%
Commodity lines           New and used automobiles, motorcycles, buses, campers, and motor homes           Automotive parts and supplies (new and rebuilt)           Used automotive parts, accessories, and equipment           Tires and tubes           Household and lawn furniture           Household china, glassware, crockery, and plastic housewares           Linens, domestics, curtains, and draperies           Lumber: rough, dressed, and finished           Plywood and millwork	992 sal	Pe of 172 173 174 175 176 177 178 179	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities - Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).	207 208 209 210 211 212 213 214 215 216	% % % % % % % %
Commodity lines         Commodity lines         New and used automobiles, motorcycles, buses, campers, and motor homes         Automotive parts and supplies (new and rebuilt)         Used automotive parts, accessories, and equipment         Tires and tubes         Household and lawn furniture         Household china, glassware, crockery, and plastic housewares         Linens, domestics, curtains, and draperies         Lumber: rough, dressed, and finished         Plywood and millwork         Brick, stone, tile, sand, block, cement, and gravel	992 sal	Pe of 172 173 174 175 176 177 178 179 180	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities – Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)	207 208 209 210 211 212 213 214 215 216	9% 9% 9% 9% 9% 9%
Commodity lines         Commodity lines         New and used automobiles, motorcycles, buses, campers, and motor homes         Automotive parts and supplies (new and rebuilt)         Used automotive parts, accessories, and equipment         Tires and tubes         Household and lawn furniture         Household china, glassware, crockery, and plastic housewares         Linens, domestics, curtains, and draperies         Lumber: rough, dressed, and finished         Plywood and millwork         Brick, stone, tile, sand, block, cement, and gravel         Photographic equipment and supplies	992 sal	Pe of 172 173 174 175 176 177 178 179 180 181	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities – Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)         2)	207 208 209 210 211 212 213 214 215 216	% % % % % % % %
Commodity lines         Commodity lines         New and used automobiles, motorcycles, buses, campers, and motor homes         Automotive parts and supplies (new and rebuilt)         Used automotive parts, accessories, and equipment         Tires and tubes         Household and lawn furniture         Household china, glassware, crockery, and plastic housewares         Linens, domestics, curtains, and draperies         Lumber: rough, dressed, and finished         Plywood and millwork         Brick, stone, tile, sand, block, cement, and gravel         Photographic equipment and supplies         Office equipment and supplies	992 sal	Pe of 172 173 174 175 176 177 178 179 180 181 182	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities – Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)	207 208 209 210 211 211 212 213 214 215 216	9% 9% 9% 9% 9% 9% 9% 9% 9%
Eastablishment?           Commodity lines           New and used automobiles, motorcycles, buses, campers, and motor homes           Automotive parts and supplies (new and rebuilt)           Used automotive parts, accessories, and equipment           Tires and tubes           Household and lawn furniture           Household china, glassware, crockery, and plastic housewares           Linens, domestics, curtains, and draperies           Lumber: rough, dressed, and finished           Plywood and millwork           Brick, stone, tile, sand, block, cement, and gravel           Photographic equipment and supplies           Office equipment and supplies	992 sal	Pe of 172 173 174 175 176 177 178 179 180 181 182 183	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities – Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)         2)	207 208 209 210 211 212 213 214 215 216 216 216 216 216	9% 9% 9% 9% 9% 9% 9% 9% 9% 9% 9%
Commodity lines           Commodity lines           New and used automobiles, motorcycles, buses, campers, and motor homes           Automotive parts and supplies (new and rebuilt)           Used automotive parts, accessories, and equipment           Tires and tubes           Household and lawn furniture           Household china, glassware, crockery, and plastic housewares           Linens, domestics, curtains, and draperies           Lumber: rough, dressed, and finished           Plywood and millwork           Brick, stone, tile, sand, block, cement, and gravel           Photographic equipment and supplies           Office equipment and supplies           Surgical, medical, and hospital supplies           Electrical apparatus and equipment	992 sal	Pe of 172 173 174 175 176 177 178 179 180 181 182 183 184	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities - Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)         2)         3)	207 208 209 210 211 211 212 213 214 215 216	9% 9% 9% 9% 9% 9% 9% 9% 9% 9% 9% 9% 9% 9
establishment?           Commodity lines           New and used automobiles, motorcycles, buses, campers, and motor homes           Automotive parts and supplies (new and rebuilt)           Used automotive parts, accessories, and equipment           Tires and tubes           Household and lawn furniture           Household china, glassware, crockery, and plastic housewares           Linens, domestics, curtains, and draperies           Lumber: rough, dressed, and finished           Plywood and millwork           Brick, stone, tile, sand, block, cement, and gravel           Photographic equipment and supplies           Office equipment and supplies           Electrical apparatus and equipment           Electrical appliances, household		Pe of 172 173 174 175 176 177 178 179 180 181 182 183 184 185	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities - Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)         2)         3)         Service receipts and labor charges	207 208 209 210 211 211 212 213 214 215 216 216 216 216 216 216 216 211 212 211 212 214 215 216	%           %
Commodity lines           Commodity lines           New and used automobiles, motorcycles, buses, campers, and motor homes           Automotive parts and supplies (new and rebuilt)           Used automotive parts, accessories, and equipment           Tires and tubes           Household and lawn furniture           Household china, glassware, crockery, and plastic housewares           Linens, domestics, curtains, and draperies           Lumber: rough, dressed, and finished           Plywood and millwork           Brick, stone, tile, sand, block, cement, and gravel           Photographic equipment and supplies           Office equipment and supplies           Surgical, medical, and hospital supplies           Electrical apparatus and equipment		Pe of 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186	sales % % % % % % % % % % % % % % % % % % %	Soft drinks         Other grocery specialties         Grain and beans         Plastics materials and basic forms         Chemicals and allied products (Exclude agriculture, plastics, gases, and petroleum.)         Petroleum products         Beer and ale         Wines and distilled alcoholic beverages         Paint, paint supplies, and wallpaper         Books, periodicals, newspapers, and miscellaneous printed materials         Other commodities - Refer to the list of Wholesale Commodity Lines on page 18 to specify kind(s) and enter code(s).         1)         2)         3)         Service receipts and labor charges         Miscellaneous receipts	207 208 209 210 211 211 212 213 214 214 215 216 216 216 216 216 211 212 214 212 214 214 215 216 216 210 291 292 291	%           %

	Section C
Item 18. KIND OF BUSINESS – RETAIL	
What was the PRINCIPAL kind of business for this establishment in 1992 (or activity by which your busi is known to the trade or public)? <i>Mark (X) only ONE bo</i>	
Building materials, hardware, garden supply, mobile home	
	070
Wholesale lumber and other building material dealer	
Retail paint, glass, and wallpaper store	
Wholesale paint, glass, and wallpaper store	
Hardware store	🗌 5251
Retail nursery, lawn, and garden supplies store	🗌 5261
Mobile home dealer	🗌 5271
General merchandise	
Department store	🗌 5311
Variety store	🗌 5331
Miscellaneous general merchandise	🗌 5399
Food	
Grocery store	🗌 5411
Supermarket	🗌 5412
Cash and carry	🗌 5413
Meat and fish (seafood) market, freezer provisioners $\ . \ .$	🗌 5421
Fruit store and vegetable market	🗌 5431
Candy, nut, and confectionery store	🗌 5441
Dairy products store	5451
Retail bakery	
Other food store	🗌 5499
Automotive dealers and gasoline service stations	
Motor vehicle dealer – new and used cars	🗌 5511
Motor vehicle dealer – used cars only	🗌 5521
Auto and home supply store	🗌 5531
Gasoline service station	🗌 5541
Gasoline/convenience food store	
Recreational vehicle dealer	🗌 5561 🗌 5599
Apparel and accessories	
Men's and boys' clothing and furnishings store	🗌 5611
Women's ready-to-wear store	🗌 5621
Women's accessory and specialty store	🗌 5632
Children's and infants' wear store	🗌 5641
Family clothing store	🗌 5651
Shoe store	🗌 5661
Miscellaneous apparel and accessory store – Specify .	🔟 5699
Furniture, home furnishings and equipment	5712
Furniture store	
Floor covering store	D 5713
Miscellaneous home furnishings store	
Household appliance store	
Radio, television, and electronics store	
Computer and software store (selling primarily	
to individual home consumers)	🗌 5734
Record and prerecorded tape store	🗌 5735
Musical instrument store	🗌 5736
DRM QA-9820	

C – RETAIL	
Item 18. KIND OF BUSINESS - RETAIL (Continue	ed)
Eating and drinking places	
Eating place	070
Cafeteria	🗌 5811
Restaurant (full menu provided with	
waiter/waitress service and patrons seated)	🗌 5812
Refreshment place or other eating place providing a limited menu of food items (hamburgers,	
steak, seafood, chicken, pizza, pancakes, etc.)	🗌 5814
Fast food	_
Other – <i>Specify</i>	🔟 5816
Eating place with 25 or more guestrooms	
Drinking place (bar, cocktail lounge, etc.)	🗋 5813
Miscellaneous retail stores	
Drug and proprietary store	🗌 5912
Liquor store	🗌 5921
Sporting goods store and bicycle shops	🗌 5941
Book store	
Stationery store	🔟 5943
School supplies store	
Jewelry store	
Hobby, toy, and game shop	🛄 5945
Camera and photographic supply store	
Gift, novelty, and souvenir store	
Luggage and leather goods store	_
Sewing, needlework, and piece goods store	🔟 5949
Nonstore retailer	
Mail order (catalog selling)	
Operating merchandise vending machines	
House-to-house or telephone (direct selling)	
Fuel dealer	
Florist	
Cigar store and stand	
News dealer and newsstand	
Optician's goods store	
Other – <i>Specify</i>	<u>CODE</u>
	0022
Item 19. UNDER-ROOF FLOOR SPACE	
Did this establishment have any under-roof floor space used as a department, variety, or grocery	Square feet
space used as a department, variety, or grocery store in 1992?	301
300 1 🗌 YES – TOTAL floor space	
300 1 - 1 - 1 OTAL 1001 Space	302
Under-roof SELLING space	
	L
2 🗌 NO	
Item 20. FRANCHISE NAME	
Did this establishment use a name authorized by a	a
franchisor in 1992?	
305 1 YES – <b>Does the franchisor own or</b>	306
operate the establishment?	1 🗌 YES
_	2 🗌 NO
2 🗌 NO	
ie 5 CONTINUE	ON PAGE 6 📥

HISTORY-1992 ECONOMIC CENSUS

	Sec	tion C – F	ΚEΤ	AIL (Continued)		
HOW TO	Report percentages as whole numbers	Percent		Item 22. MERCHANDISE LINES (Continued)		
REPORT PERCENTS	<b>EXAMPLE:</b> Report 38.76% as	39	%	Merchandise line	Percer of sale	
	ASS OF CUSTOMER ne percentage of total 1992 sales			Sleep furniture and equipment	335	
	lass of customer?	Percent		All other furniture	336	
<b>a.</b> General p	ublic	307	%	Floor coverings	337	
<b>b.</b> Other		308	%	Home computer hardware, software, and other	338	
	ERCHANDISE LINES		70	calculating equipment and supplies	339	
What was th	ne estimated percentage of total 1992 s rchandise line you specify for this esta	sales (item 5)		Kitchenware and home furnishings	340	
Tor each me	rchandise line you specify for this esta			Jewelry	341	
	Merchandise line	Percent of sales		Photographic equipment and supplies	-	
Meat, fish, and	poultry	310	%	Optical goods	342	
Produce (fresh	fruits and vegetables)	311	%	Sporting goods and trophies	343	
Frozen foods		312	%	Recreational vehicles	344	
Dairy products	and related foods	313	%	Hardware, tools, plumbing, and electrical supplies	345	
Bakery product	s, except frozen	314	%	Lawn and garden equipment and supplies, cut	346	
	, excluding pet food	315	%	flowers, plants, shrubs, fertilizers, etc.	347	
Meals, snacks,	sandwiches, nonalcoholic beverages	316	%	Paint, paint sundries, glass, and wallpaper	348	
	d for consumption at this establishment	317		Lumber, millwork, building materials, and home repair and modernization equipment, and supplies	349	
Alcoholic drink	s (served at this establishment)	318	%	Mobile homes		
<u> </u>	r, wine, and beer	319	%	New automobiles, vans, and trucks	350	
(Exclude sales	tes, tobacco, and smokers' accessories from vending machines owned by others	.) 320	%	Used automobiles, vans, and trucks	351	
Prescription dr	ugs from a pharmacist	320	%	Other powered transportation vehicles	352	
	n medicines and vitamins, proprietary and er ethical medicines, and other health and	321	%	Gasoline	353	
	nte, and household cleaners	322	%	Diesel fuel	354	
	nts, and household cleaners	323		Other automotive fuel	355	
Paper products		324	%	Automotive lubricants (oils, grease, etc.)	356	
Men's and boy		325	%		357	
Women's and g	5	326	%	Automotive tires, tubes, batteries, parts, and accessories	358	
Nomen's acces	ssories	327	%	Household fuels All other merchandise	359	
Footwear		328	%	If sales of merchandise on this line exceed 5% of total, specify principal lines and estimated percent		
	g, needlework goods	329	%	of sales on next line	360	
blankets, table	es, shades, blinds, slipcovers, towels, sheet linens, etc.	s, 330	%	1)	361	
Major househo	Id appliances		%	2)	362	
Small electric a	appliances	331	%	3)	363	
Televisions, vic	deo recording devices, video tapes, etc.	332	%	Nonmerchandise receipts from customers		
Audio equipme	ent, musical instruments and supplies	333	%	TOTAL	100	0
Living room di	ining room, bedroom furniture (except	334	%	PROCEED TO SECTION H, PAGE 17, AND COMPLETE THE REST OF THE FOR		

# Section D – SERVICES

m 23. KIND OF BUSINESS – SERVICES		
Ihat was the PRINCIPAL kind of business for this stablishment in 1992 (or activity by which your busi known to the trade or public)? Mark (X) only ONE box	ness ‹.	
ravel agencies and other passenger ansportation services	070	
Travel agency		4724
Tour operator		4725
Other services in arranging passenger transportation		4729
ersonal services		
Power laundry, family and commercial		721 <sup>-</sup>
Garment pressing and cleaner's agents		7212
Linen supply		721:
Coin-operated laundry and cleaning		721
Dry cleaning plant, except rug		721
Carpet and upholstery cleaning		721
Industrial launderers		721
Other laundry and garment services including		_
hand laundry – <i>Specify</i>	• •	7219
	_	
Photographic studios, portrait		722
Beauty shop		723
Barber shop		724
Shoe repair and shoeshine parlors		725
Funeral service and crematory		726
Tax return preparation services		729
Other personal services – Specify		729
Advertising agency	 	☐ 731 ☐ 731
Radio, television, and publishers' advertising representatives		731
Other advertising services (except agencies) – <i>Specify</i>		7319
Adjustment and collection services	_	732
Mercantile credit reporting agency.		732
Direct mail advertising services		733
Photocopying and duplicating services		733
Commercial photography.		733
Commercial art and graphic design		733
Secretarial and court reporting services		733
Disinfecting and exterminating services		734
Cleaning and maintenance services		734
Medical equipment rental and leasing		735
Heavy construction and earthmoving equipment, rental and leasing		735
Other equipment rental and leasing (except computers or automotive)		735
Employment agency		736
Temporary help supply services		736
Computer programming services		737
Prepackaged software.		737:
Computer integrated systems design		737:

ERVICES	
m 23. KIND OF BUSINESS – SERVICES (Continued)	
Susiness services (Continued)	70
Data processing services	. 🗌 737
Information retrieval services	. 🗌 737
Computer facilities management services	. 🗌 737
Computer rental and leasing	. 🗌 737
Detective, guard, and armored car services	. 🗌 738
Security systems services	. 🗌 738
News syndicates.	. 🗌 738
Photofinishing laboratory.	
Other business services – <i>Specify</i>	. 🗌 738
Automobile repair and services	
Truck rental and leasing, without driver	75
Passenger car rental.	75
Passenger car leasing	75
Utility trailer and recreational vehicle rental	75
Automobile parking	. 🗌 752
Top, body, and upholstery repair and painting shop	. 🗌 75:
Auto exhaust systems repair shop	. 🗌 75:
Tire retreading and repair shop	. 🗌 75:
Automotive glass replacement shop	
Automotive transmission repair shop	
General automotive repair shop	
Carwash	754
Other automotive services – <i>Specify</i>	. 🗌 754
liscellaneous repair services	
<b>fiscellaneous repair services</b> Radio and television repair	. 🗌 762
Radio and television repair	762
Radio and television repair	
Radio and television repair	
Radio and television repair	762 762 763 764 764
Radio and television repair .         Refrigeration and air conditioning service and repair shop .         Electrical and electronic repair shop (except computer repair) .         Watch, clock, and jewelry repair .         Reupholstery and furniture repair .         Welding repair .         Armature rewinding shop .	762 762 763 764 764
Radio and television repair	. 762 . 763 . 763 . 764 . 764 . 764 . 765
Radio and television repair .         Refrigeration and air conditioning service and repair shop         Electrical and electronic repair shop (except computer repair)         Watch, clock, and jewelry repair         Reupholstery and furniture repair         Welding repair.         Armature rewinding shop         Other repair services, including sewer and septic tank cleaning services – Specify	762 762 762 763 763 763 
Radio and television repair .         Refrigeration and air conditioning service and repair shop         Electrical and electronic repair shop (except computer repair)         Watch, clock, and jewelry repair         Reupholstery and furniture repair         Welding repair.         Armature rewinding shop         Other repair services, including sewer and septic tank cleaning services – <i>Specify</i> Motion pictures         Motion picture, video production, and related services	. 762 . 762 . 763 . 764 . 765 . 765 . 765
Radio and television repair .         Refrigeration and air conditioning service and repair shop         Electrical and electronic repair shop (except computer repair)         Watch, clock, and jewelry repair         Reupholstery and furniture repair         Welding repair.         Armature rewinding shop         Other repair services, including sewer and septic tank cleaning services – <i>Specify</i> Motion pictures         Motion picture, video production, and related services         Film distribution and related services	. 762 . 762 . 763 . 764 . 765 . 765 . 765 . 765 . 765 . 765 . 785 . 787
Radio and television repair .         Refrigeration and air conditioning service and repair shop         Electrical and electronic repair shop (except computer repair)         Watch, clock, and jewelry repair         Reupholstery and furniture repair         Welding repair.         Armature rewinding shop         Other repair services, including sewer and septic tank cleaning services – <i>Specify</i> Motion pictures         Motion picture, video production, and related services	. 762 . 762 . 763 . 764 . 765 . 765 . 765

tem 23. KIND OF BUSINESS - SERVICES (Continued)       Prove preventages as whole numbers       Percent         Amazement and recreation services, comparison of the service	Section D – SERVICES (Continued)				
Amusement and recreation services, oxcept motion proteines       000         Dance studios, schools, and halls       000         The studio process and services       000         Bands, orchestras, actors, and other unstrainers       1792         Bands, orchestras, actors, and other unstrainers       1792         Bands, orchestras, actors, and other unstrainers       1792         Bands, orchestras, actors, and other unstrainers       1792         Bands, orchestras, actors, and other unstrainers       1792         Bands, orchestras, actors, and other unstrainers       1794         Bands, including stack operation       1794         Chifty agency (cosept histeral)       1794         Duties generate failup       1794         Duties generate failup       1794         Chifty agency (cosept histeral)       1794         Howard and costal laboratories       1796         Chifty agency (cosept histeral)       1796         Chifty agency (cosept histeral)       1796         Chifty agency (cosept histeral)       1796         Chifty agency (cosept histeral)       1796         Chifty agency (cosept histeral)       1796         Chifty agency (cosept histeral)       1797         Costing admets       17972         Detail alboratory	Item 23. KIND OF BUSINESS – SERVICES (Continued)			Report percentages as whole numbers	Percent
Dury studios, schools, and hulls     000       Theatricit products and schools, and other ententions     7931       Bandie, ordenticas, accors, and other ententions     7932       Bowling center     7932       Bowling center     7932       Protision of conservices     7932       Commercial sports clubs, managers, and sports promoters     7941       Protision of conservices     7932       Conservice sports clubs, managers, and sports promoters     7941       Policio gof conservices     7932       Conterport sports clubs, managers, and sports promoters     7941       Nuter value to accollation to accollation of the page 17     1000 - Skip to section the page 17       Nuter value to accollation to accollation of the page 17     1000 - Skip to section the page 17       Nuter value to accollation to accollation of the page 17     1000 - Skip to section the page 17       Medical and central laboratory     7976       Conterport sports and recreation services - Specify     7976       Other dental and medical services     5921       Dura dental laboratory     1017       Restrictural sports and recreation services     1017       Restrictural sports and recreation services     1017       Other dental and medical services     1017       Dental laboratory     1017       Strestrictural sports club accolligital genders     1017 <td></td> <td></td> <td></td> <td><b>EXAMPLE:</b> Report 38.76% as</td> <td>39 %</td>				<b>EXAMPLE:</b> Report 38.76% as	39 %
The strictical produces and services.       [] 322         Bands, crickstar, actors, and core nutrations:       [] 328         Bands, crickstar, actors, and core nutrations:       [] 329         Bands, crickstar, actors, and core nutrations:       [] 328         Commercial sports critical products:       [] 329         Bands, crickstar, including track operation       [] 328         Physical finase facility.       [] 329         Coin operated answerment devices       [] 328         Ansternet parks.       [] 329         Ansternet parks.       [] 328         Ansternet parks.       [] 329         Ansternet parks.       [] 329         Other anusement and recreation services - Specify       [] 3002         Other anusement and recreation services - Specify       [] 3002         Museums, art galleries, and botanical and medical services.       [] 3711         Ansteinal bozotary:       [] 3722         Other anusement and tectural services.       [] 3711         Ansteinal bozotary:       [] 3721         Dental laboratory.       [] 3002         Dental laboratory.       [] 3002         Dental and medical services.       [] 3711         Ansternet and train and tectural services.       [] 3712         Connercial cological graden	07		Item 24. M	IERCHANDISE SALES	
Bands, orchestras, actors, and other ontoriainers and entertaining genter       1939         Bowing center       1939         Bowing center       1939         Sports promoters       1939         Parking, including track operation       1940         Racing, including track operation       1940         Provise of the section of the se					
and entratialment groups       1729         Bowling certer       1729         Commercial sports protocysts       1741         Racing, netuding track operation       1741         Physical (intex damosement devices       1749         Provisod (intex damosement devices)       1749         Horseranc Hering agency       1784         Membership sports       1784         Membership sports       1784         Membership sports       1784         Medical and dental laboratories       1786         Dential laboratory       1786         Medical and dental laboratories       1786         Dental laboratory       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Sological gardens       18111         Legal services       18111         Commercid, hytical, and botanical and coological gardens		□ 7922			er-the-counter
above       1983         commercial sports clubs, managers, and sports promotes       1948         Pacing, Including track operation       1948         Projectal fines facility v       1948         Projectal fines facility v       1948         Con-operated amusement devices       1948         Conservations facility v       1948         Hoerscrabe betting agency       1948         Amusement parks.       1948         Conterpreting, architectures       1948         Methods and dental laboratories       1949         Dental laboratory       1949         Museums, et galleries, and botanical and zoological gardens       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Legal services       18111         Commercial services       18111         Commercial services       18111         Detra	and entertainment groups	7929	-		
Conserved as ports on use, interlegers, and presenting of total 1992 receipts (item 5) from the sale total 1992 receipts (item 5) from the sale percentage of total 1992 receipts (item 5) from the sale perceipts (item 5) from the sale percentage of		7933		, , ,	
Pacing including track operation       1754         Physical fitness facility       1799         Poble got course.       1799         Coin-operated amusement devices       1799         Lottary agency (except horse-col)       1799         Horserace batting agency       1799         Amusement parks.       1799         Amusement parks.       1799         Coin-operated amusement devices       1799         Museument parks.       1799         Contraction club.       1799         Other amusement and recreation club.       1799         Other amusement and recreation services - Specify       1807         Other dental laboratories       1811         Legal services       1811         Legal services       1811         Legal services       1811         Legal services       1811         Legal services       1811         Legal services       1812         Botanical and zoological gardens       1812         Surving services       1812         Commercial, hysiaal, and biological, and educational       1871         Architectural services       1871         Commercial, testing life hysiaal, and biological research.       1872         Commerci	Commercial sports clubs, managers, and	7941	2	NO – Skip to section H, page 17	
Projectal fines facility			b. What wa	as the estimated percentage of	
Public golf course.					
Coin-operated amusement devices       1983         Lottary agency (except horserace)       1983         Horserace betting agency       1983         Amusement parks.       1983         Membership sports and recreation club.       1983         Other amusement and recreation services - Specify       1989         Medical and dental laboratories       1980         Dental laboratories       1981         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1911         Legal services       1912         Surveying services       1912         Commercial regularies, and botanical       1942         Procearing, architectural, land asveying, research, management, and related services       1912         Commercial explories, and botanical       1912         Antectural services       1912         Commercial, provide, and bological research       1912         Commercial exproles       1913         Comme			percent,	describe the type of merchandise	
Horserice betting agency			sola in tr	The REMARKS Section below	·/0
Amusement parks		_	REMARKS		
Membership sports and recreation club.			_		
Cockfight arena		_			
Other amusement and recreation services - Specify       97999         Medical and dental laboratory       0072         Other dental and medical services - Specify       9001         Legal services       8111         Legal services       \$111         Legal services       \$111         Legal services       \$111         Legal services       \$111         Legal services       \$111         Services       \$112         Services       \$112         Botanical and zoological gardens       \$121         Architectural, land surveying.       \$122         Engineering services       \$121         Commercial, economic, sociological, and educational nonphysical feesarch.       \$121         Nareying services       \$12         Surveying services       \$12         Commercial, economic, sociological, and educational nonphysical feesarch.       \$173         Commercial, economic, sociological, and educational nonphysical feesarch.       \$174         Management services       \$174         Other kind of services - Specify       \$174         Other kind of services - Specify       \$174         Other kind of services - Specify       \$174         Other kind of services - Specify       \$174		_			
Dental laboratory       0         Other dental and medical services - Specify       9001         Legal services       8111         Legal services       8111         Legal services       9002         museums, art galleries, and botanical and zoological gardens       9002         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8711         Commercial, physical, and biological research.       8733         Commercial, economic, sociological, and educational anonphysical research, management consulting services       8744         Management consulting services       8742         Public relations services - Specify       8744         Other kind of services - Specify       8749         Other kind of services - Specify       8989         COTH       Services - Specify       89899         COTH       Services - Specify       89899         COTH       Services - Specify       89899         COTH       Services - Specify       89899         COTH       Services - Specify       89899         COTH       Services - Specify       89899 </td <td></td> <td>_</td> <td></td> <td></td> <td></td>		_			
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Legal services       8111         Legal services)       Seciety (or other non-profit legal services) - Specify       9002         Museums, art galleries, and botanical and zoological gardens       9002         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, esonomic, sociological, and educational       8732         Commercial, physical research       8742         Public relations services       8743         Facilities support management services       8743         Pacilities support management services       8748         Other kind of services – Specify       8748         Other kind of services – Specify       8748         Other kind of services – Specify       8748					
Legal services       Image: Services         Museums, art galleries, and botanical and zoological gardens       9002         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8711         Surveying services       8713         Commercial, physical, and biological research.       8731         Commercial, economic, sociological, and educational nonphysical research.       8732         Commercial testing laboratory.       8744         Public relations services       8742         Public relations services       8743         Facilities support management services       8744         Other kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cott	Other dental and medical services – Specify	9001			
Legal services       Image: Services         Museums, art galleries, and botanical and zoological gardens       9002         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8711         Surveying services       8713         Commercial, physical, and biological research.       8731         Commercial, economic, sociological, and educational nonphysical research.       8732         Commercial testing laboratory.       8744         Public relations services       8742         Public relations services       8743         Facilities support management services       8744         Other kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       8999         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cotter kind of services - Specify       9899         Cott					
Legal services       Image: Services       Image: Services         Museums, art galleries, and botanical and zoological gardens       Image: Services       Image: Services         Museums and art galleries       Image: Services       Image: Services       Image: Services         Engineering, architectural, land surveying, research, management, and related services       Image: Services       Image: Services         Engineering services       Image: Services       Image: Services       Image: Services         Surveying services       Image: Services       Image: Services       Image: Services         Commercial, physical, and biological research       Image: Services       Image: Services       Image: Services         Commercial testing laboratory       Image: Services       Image: Services       Image: Services       Image: Services         Public relations services       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services         Other kind of services - Specify       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services         Other kind of services - Specify       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services       Image: Services					
Legal aid society (or other non-profit legal services) - Specify       9002         Museums, art galleries, and botanical and zoological gardens       8412         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8711         Surveying services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, physical, and biological research       8732         Commercial reservices       8741         Management consulting services       8742         Public relations services       8742         Public relations services       8743         Facilities support management services - Specify       8748         Other kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind of services - Specify       8399         Cother kind	-				
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and zoological gardens       8412         Museums and art galleries       8412         Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, physical, and biological research       8732         Commercial testing laboratory       8734         Management services       8744         Public relations services       8742         Public relations services       8744         Other business consulting services - Specify       8748         Other kind of services - Specify       8899         COUL       8899         COUL       8999         COUL       8999         COUL       8999         COUL       8999         COUL       8999         COUL       8999	services) – Specify	9002			
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Botanical and zoological gardens       8422         Engineering, architectural, land surveying, research, management, and related services       8711         Architectural services       8711         Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, economic, sociological, and educational nonphysical research       8732         Commercial testing laboratory       8734         Management services       8741         Management services       8742         Public relations services       8743         Facilities support management services       8748         Other kind of services - Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,	and zoological gardens	_			
Engineering, architectural, land surveying, research, management, and related services         Engineering services       8711         Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, sconomic, sociological, and educational nonphysical research       8732         Commercial testing laboratory.       8734         Management services       8741         Management services       8742         Public relations services       8743         Facilities support management services       8748         Other kind of services - Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,	5	_			
research, management, and related services         Engineering services       8711         Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, economic, sociological, and educational nonphysical research       8732         Commercial testing laboratory       8741         Management services       8741         Management services       8742         Public relations services       8743         Facilities support management services – Specify       8748         Other kind of services – Specify       8748         Other kind of services – Specify       8999 CODE         PROCEED TO SECTION H, PAGE 17,	Botanical and zoological gardens	8422			
Architectural services       8712         Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, economic, sociological, and educational nonphysical research       8732         Commercial testing laboratory       8734         Management services       8741         Management consulting services       8742         Public relations services       8743         Facilities support management services       8744         Other business consulting services – Specify       8748         Other kind of services – Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,	Engineering, architectural, land surveying, research, management, and related services				
Surveying services       8713         Commercial, physical, and biological research       8731         Commercial, economic, sociological, and educational nonphysical research       8732         Commercial testing laboratory       8734         Management services       8741         Management consulting services       8742         Public relations services       8743         Facilities support management services       8744         Other business consulting services – Specify       8748         Other kind of services – Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,	Engineering services	8711			
Commercial, physical, and biological research <ul> <li>8731</li> <li>Commercial, economic, sociological, and educational nonphysical research</li> <li>8732</li> <li>Commercial testing laboratory</li> <li>8734</li> <li>Management services</li> <li>8741</li> <li>Management consulting services</li> <li>8742</li> <li>Public relations services</li> <li>8743</li> <li>Facilities support management services</li> <li>8744</li> <li>Other business consulting services – Specify</li> <li>B8999</li> <li>CODE</li> </ul>		_			
Commercial, economic, sociological, and educational nonphysical research       8732         Commercial testing laboratory.       8734         Management services       8741         Management consulting services       8742         Public relations services       8743         Facilities support management services – Specify       8744         Other business consulting services – Specify       8748         Other kind of services – Specify       88999         CODE       PROCEED TO SECTION H, PAGE 17,					
nonphysical research       Image: Strate Strat		└─  8731			
Management services       8741         Management consulting services       8742         Public relations services       8743         Facilities support management services       8744         Other business consulting services – Specify       8748         Other kind of services – Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,		8732			
Management consulting services       8742         Public relations services       8743         Facilities support management services       8744         Other business consulting services - Specify       8748         Other kind of services - Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,					
Public relations services       8743         Facilities support management services       8744         Other business consulting services - Specify       8748         Other kind of services - Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,	-				
Facilities support management services       Image: State of the services is a service of the service		_			
Other business consulting services - Specify       8748         Other kind of services - Specify       8999         CODE       PROCEED TO SECTION H, PAGE 17,					
Other kind of services – Specify		_			
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	Other kind of services – Specify				

Section E – HOTELS, MOTELS, AND OTHER LODGING PLACES				
Item 25. KIND OF BUSINESS – HOTELS, MOTELS, AND OTHER LODGING PLACES	HOW TO Report percentages as whole numbers	Percent		
OTHER LODGING PLACES	REPORT PERCENTS <b>EXAMPLE:</b> Report 38.76% as	<b>39</b> %		
What was the PRINCIPAL kind of business for this establishment in 1992 (or activity by which your business is known to the trade or public)? <i>Mark (X) only ONE box.</i>	Item 26. SOURCES OF RECEIPTS Receipts must be reported as percentages of total 1992 receipts (item 5).			
	Exclude occupancy or other taxes collected from customers.			
Hotels, motels, and guest houses 070	a. Receipts from customers			
Hotel with 100 or more guestrooms	What was the estimated percentage of 1992 sales and receipts from customers for the following? (DO NOT include receipts from coin-operated machines maintained by others.)			
	(1) Cuestroom er unit rentale (If meele ere	Percent		
Hotel with less than 25 guestrooms $\Box$ 7013	included as a room package, estimate the percentage for meals on line a(2).)	%		
Recreational hotel (tourist villas and paradores)	(2) Sales of meals and nonalcoholic beverages	%		
Motel 7015	(3) Sales of alcoholic beverages for consumption 533 on premises	%		
Guest houses	(4) Sales of packaged liquor, wine, or beer	%		
	(5) Sales of other merchandise	%		
Organizational hotel or lodging house, with rooms open to the general public	536	,,,		
	(6) Receipts from casino operations	%		
Other ladeing places	(7) All other receipts from customers (Include ballrooms, convention halls, laundry, valet, and other services.)	%		
<b>Other lodging places</b> Sporting and recreational camps – <i>Specify</i>	(8) TOTAL (Sum of lines 1 through 7 should equal 100%)	100 %		
	<b>b.</b> Receipts from other sources			
	Were any receipts OTHER than from customers receipts this establishment in its business operation? (Include and commission receipts from operators of leased departr concessions and stores, and coin-operated machines.) 538 1 YES – What was the amount?	e rental ments,		
	Item 27. NUMBER AND TYPE OF ACCOMMODATIONS	2		
<b>Other kinds of activity or operation</b> Restaurant, including –	a. What was the number of rooms, units, or quarters primarily rented as transient as of December 31, 1992? The number of guestrooms, units, or quarters consists of the number which can be rented as single units. Suites of rooms which cannot be subdivided	mber as of nber 31, 1992		
Hotel with 100 or more guestrooms $\ldots$ $\Box$ 7018	should be counted as a single unit. b. Were more than half of guestroom or unit rental			
Hotel with 25 to 99 guestrooms $\ldots$	receipts in 1992 from transient guests?			
Motel with 25 or more guestrooms $\ldots \ldots \ldots$ 7020	2 🗌 NO			
Less than 25 guestrooms $\ldots$ $\ldots$ $\ldots$ $\ldots$ 5812	Item 28. PUERTO RICO TOURIST ENCOURAGEMENT	LAW		
Other kind of activity – <i>Specify</i>	Did this establishment operate under the Puerto Rico Tourist Encouragement Law in 1992? 542 1   YES 2   NO			
	PROCEED TO SECTION H, PAGE 17, AND COMPLETE THE REST OF THE FORM.			
FORM OA-9820 Pa	ge 9			

Sectio	n F – MA	NUFACTURES
Item 29. KIND OF ACTIVITY – MANUFACTURES		Item 29. KIND OF ACTIVITY – MANUFACTURES (Continued)
What was the PRINCIPAL kind of manufacturing activity for this establishment in 1992 (or activity by which the establishment is known to the trade or public)? <i>Mark</i> (X) only ONE box.		Apparel and other finished products made from fabrics and similar materials       070         Men's and boys' suits and coats       2311
		Men's and boys' shirts
Food and kindred products 07	-	Men's and boys' trousers and slacks.
Meat packing plants	2011	Men's and boys' work clothing
purchased materials	2013	
Poultry slaughtering and processing	2015	
lce cream and frozen desserts	_	Women's and misses' blouses and shirts $\ldots$ $\ldots$ $\ldots$ 2331
Fluid milk and cream		Women's, misses', and juniors' dresses.
Other dairy products – <i>Specify</i>	2029	Other women's, misses', and juniors' outerwear – <i>Specify</i> . 🛛 2339
Canned specialties, such as baby food and soups	2032	Women's and children's underwear and nightwear
Canned fruits, vegetables, preserves, jams, and jellies	_	Bras, girdles, and allied garments
Frozen and preserved foods – <i>Specify</i>	2038	Girls' and children's dresses and blouses
		Curtains and draperies
		Homefurnishings
Prepared feed and feed ingredients for animals and fowls, except dogs and cats	2048	Pleating and stitching $\ldots$ 2395
Other grain mill products – <i>Specify</i>		Automotive and apparel trimming
		Other apparel and finished products – <i>Specify</i>
Bread and other bakery products	2051	Lumber and wood products, except furniture
Cookies and crackers	_	Sawmills, flooring mills, and other special products
Frozen bakery products, except bread	2053	sawmills – <i>Specify</i>
Candy and other confections, including chocolate candy	2064	
Other sugar products and nuts – Specify		Wood millwork covered with metal and plastic materials 2431
		Wood kitchen cabinets and bathroom vanities
		Hardwood and softwood veneer and plywood, and other
Edible fats and oils – <i>Specify</i>	2079	structural wood members – <i>Specify</i>
 Distilled and blended liquors	2095	Wood or wood and metal combination pallets and skids
Bottled and canned soft drinks.	_	Other wood containers – <i>Specify</i> 2449
Flavoring extracts and syrups	_	
Other beverages – <i>Specify</i>	_	
		Other wood products – <i>Specify</i>
Canned and cured fish and seafoods	_	Furniture and fixtures
Roasted coffee, coffee concentrates, and extracts Manufactured ice		Wood household furniture, except upholstered
Other food preparations and kindred products – Specify	_	Wood household furniture, except upholstered.
ease rood proparations and knowed products - opecity	2033	Metal household furniture
		Mattresses, foundations, and convertible beds
Takana avaduata		Other household furniture – Specify $\ldots$ 2519
Tobacco products Cigars	□ 2121	
Other tobacco products – <i>Specify</i>		Wood office furniture and other office furniture – <i>Specify</i> . 2529
		Public building and related furniture
Textile mill products		Wood shelving, lockers, and store fixtures $\ldots$ $\ldots$ 2541
Knit outerwear mills	2253	Office and store fixtures, except wood
Fabrics, carpets, yarn and thread, and other	2299	Drapery hardware and window blinds and shades
textile mill products – <i>Specify</i>	∟ 2299	Other furniture and fixtures – <i>Specify</i> 2599
	Pag	CONTINUE ON PAGE 11

# Section F - MANUFACTURES (Continued)

# Item 29. KIND OF ACTIVITY – MANUFACTURES (Continued)

Paper and allied products 07	0
Paper mills	2621
Paperboard mills	2631
Setup paperboard boxes	2652
Corrugated and solid fiber boxes	2653
Folding paperboard boxes	2657
Other paperboard containers and boxes – <i>Specify</i>	2659

Plastics, foil, and coated paper bags	2673
Other paper and allied products – Specify	2679

# Printing, publishing, and allied industries

Newspapers: publishing, or publishing and printing	2711
Periodicals: publishing, or publishing and printing	2721
Books and pamphlets: publishing, or publishing and printing	2731
Book printing	2732
Miscellaneous publishing activities	2741
Commercial printing, lithographic	2752
Commercial printing, gravure	2754
Other commercial printing	2759
Manifold business forms	2761
Other printing and publishing – Specify	2799

## **Chemicals and allied products**

Industrial gases and other inorganic	_
chemicals – Specify	2819

Plastic materials and resins	. 🗌 2821
Other synthetics and manmade fibers, except glass – <i>Specify</i>	. 🗌 2829

Medicinal chemicals and botanical products	2833
Pharmaceutical preparations for human or veterinary use	2834
Diagnostic substances	2835
Biological products, except diagnostic substances	2836
Soap and other detergents	2841
Polishes and sanitation goods preparations	2842
Surface active agents	2843
Perfumes, cosmetics, and other toilet preparations	2844
Paints and related products	2851
Adhesives and sealants	
Other chemicals and chemical preparations – Specify	2899

## Petroleum refining and related industries

Petroleum refining, including gasoline and oil	2911
Asphalt paving mixtures and blocks	2951
Asphalt felt and coatings, including roofing cement	2952
Other petroleum and coal products - Specify	2999

m 29. KIND OF ACTIVITY – MANUFACTURES (Contir	nued)
ubber and miscellaneous plastics products 07	0
Plastics bottles	° □ 30
Other rubber and plastics products – <i>Specify</i>	30
eather and leather products	
Men's footwear, except athletic	31
Women's handbags and purses	31
Personal leather goods, except women's handbags and purses	31
Other leather and leather products – <i>Specify</i>	31
one, clay, glass, and concrete products	
Glass products made of purchased glass	32
	$\square 32$
Concrete block and brick	=
Concrete products, except block and brick	
Ready-mixed concrete	
Cut stone and stone products	□ 32
Other products made of glass, hydraulic cement, clay, pottery, gypsum, lime, abrasive, asbestos, and nonmetallic mineral products – <i>Specify</i>	☐ 32
Iron and steel foundries, nonferrous metals, and other primary metal industries products – <i>Specify</i>	□ 33
bricated metal products	
Metal cans	34
Metal shipping barrels, drums, kegs, and pails	34
Fabricated structural metal	34
Metal doors, sash, and trim	34
Fabricated plate work (boiler shop)	34
Sheet metal work	34
Architectural and ornamental metal work	34
Other structural metal work – Specify	34
Screw machine products	34
Bolts, nuts, screws, rivets, and washers.	
Other metal stampings – <i>Specify</i>	34
Plating and polishing of metals	34
Coating, engraving, and allied services	∐ 34
Miscellaneous fabricated wire products	□ 34
Other fabricated metal products – <i>Specify</i>	34
dustrial and commercial machinery and	
omputer equipment	□ ~-
Special dies, tools, jigs, and fixtures	☐ 35 ☐ 35
Electronic computers	35

FORM OA-9820

Section F – N	IANUFA	ACTURES (Continued)	
Item 29. KIND OF ACTIVITY - MANUFACTURES (Contin	nued)	Item 29. KIND OF ACTIVITY – MANUFACTURES (Continu	ed)
Industrial and commercial machinery and computer equipment (Continued)       07         Computer peripheral equipment, including printers, and graphic displays       07         Other office equipment including calculators, terminals, and computer storage devices – Specify       07         Refrigeration (air-conditioning) and heating equipment       07         Other industrial and commercial machinery and computer equipment       07	□ 3577 □ 3579 □ 3585	Miscellaneous manufacturing industries       070         Jewelry, precious metal       []         Silverware and plated ware       []         Jewelers' materials and lapidary work       []         Costume jewelry and costume novelties       []         Fasteners, buttons, needles, and pins       []         Signs and advertising specialties       []         Other manufacturing industries – Specify       []	3914 3915 3961 3965 3993
Electronic and electrical equipment and components,			
except computer equipment         Power, distribution, and specialty transformers         Switchgear and switchboard apparatus         Other electrical industrial apparatus	3613	Item 30. SHIPMENTS AND OTHER RECEIPTS         a. What was the total VALUE OF         SHIPMENTS for products made	ı. Dol.
		in this establishment in 1992? (Include interplant transfers.)	
Household appliances – Specify	3643	b. What were the receipts for CONTRACT WORK performed for others on their materials? (Describe products worked on and kind of work.)	
Telephone and telegraph apparatus.          Radio, TV, and other communication          equipment – Specify		c. What were the MISCELLANEOUS RECEIPTS for - (1) Sales of scrap and refuse?	     
Printed circuit boards       Printed circuit boards         Electronic coils, transformers, and inductors       Printed circuit boards         Other electronic and electrical equipment and components       Printed circuit boards	3677	(2) Other miscellaneous receipts (including receipts for repair work, etc.)?       604         d. What were the receipts for RESALES, i.e., sales of products bought and sold without further manufacture, processing, or assembly in this establishment?       605	
Transportation equipment		Item 31. EMPLOYMENT AND HOURS WORKED	I
Motor vehicle parts and accessories		Num	ber of
Motor vehicles and motor vehicle equipment – <i>Specify</i>	└ 3719	a. How many PRODUCTION WORKERS were employed in 1992 during the pay period including the 12th of the (1) March	oyees
Aircraft, boat, and other transportation; parts, equipment, and repairing – <i>Specify</i>	3799	month for the months     (1) Match       shown?     611       (Include permanent or     (2) May	
Measuring, analyzing, and controlling instruments; photo	ographic,	temporary, full- or part-time.) 612 (3) August	
medical and optical goods; watches and clocks	3825	613 (4) November	
Surgical, medical, and veterinary instruments and apparatus	_	b. How many other employees were employed during the pay period including March 12?	
and supplies	3842	c. How many hours were worked by Hours PRODUCTION WORKERS by quarter?	worked
irradiation, electromedical, and electrotherapeutic apparatus – <i>Specify</i>	3849	(1) January through March	
		(2) April through June	
Ophthalmic goods (contact lenses, eyeglasses, and sunglasses)	3851	(3) July through September	
photographic and optical goods; watches and clocks – Specify	3879	(4) October through December	
		(5) TOTAL hours worked (Sum of lines (1) through (4))	

				Secti	ion F	– MA	NUFA	CTURES (Co	ntinued)						
lter	n 32. PAYROLL							Item 36. VALUE OF PRODUCTS MADE AND CONTRACT WORK PERFORMED BY CUSTOMER LOCATION							
de en	hat was the annual p ductions, for this es tire calendar year 19 Production workers	tablishi	before ment for	r the	Mil. 625	Thou.	Dol.	WORK What was the to contract work j customer locat	otal dollar v performed i	alue of pro	ducts n	nade an	d		
b.	All other employees				626	1	1			alue of pro	ducts				
	n 33. SELECTED CO		hliohma	t	Mil.	<sup>†</sup> Thou.	Dol.	Customer locat		made in tl establishm	nis	cc	Value of ontract wo		
in	1992 for materials a				630	+ 1100.		. (1)	M	(2) I. <sup> </sup> Thou.	Dol.	Mil.	(3)   Thou.	Dol.	
	Electricity				631	1	1	a. U.S. and territo	ories 659	1	1	660	1		
b.	Fuels consumed for h	eat or po	ower		632	1	1	(Do not include Puerto Rico an	id the	Ì	i I				
	Contract work done for Products bought and	,			633		 	Virgin Islands.)	661		1	662			
	the same condition					1	1 1	<b>b.</b> Virgin Islands			 	664			
	Materials, parts, comp containers, etc.				634	1	1	c. Central Americ South America Caribbean Zon	uth America, and						
	n 34. INVENTORIES							(Do not include Virgin Islands.)		I	l I				
a.	<b>Did you have invent</b> $636  1 \square \text{ YES} - Go to$			a of 19:	or is	92:			665		 	666	1		
	2 🗌 NO – Skip i							d. Other foreign p	places 667		1	668			
b.	b. Are inventories of this establishment subject to the last-in, first-out (LIFO) method of valuation?							e. Puerto Rico – Complete lines through I below	s f	I	 	000			
	637 1 YES - Com	plete th	ne remaii	nder of	this iten	n		If you reported of	n line e, colu	nns (2) and	(3): Wh	at was 1	the		
	2 🗌 NO – Skip i	to item	34c					distribution of in Puerto Rico?							
			ND OF 19	-		ND OF 19		line e above.)							
	(1) Amount subject to LIFO costing (gross)	Mil. 638	Thou.   	Dol.   	Mil. 639	Thou.	Dol.	Class of custon		alue of pro made in tl establishm	nis	сс	Value of		
	(a) Amount of LIFO reserve	640			641	1	1	(1)	M	(2) I. <sup>†</sup> Thou.	Dol.	Mil.	(3) Thou.	Dol.	
	(b) LIFO value for line (1)	642	 		643	   	 	f. Wholesalers	670			671		2011	
	(net)	644	 	 	645	 	 	. Wholesulers	672			673			
	(2) Amount not subject to LIFO costing	044	   	   	045	   	   	g. Retailers	674	 	 	675	    		
c.	What was the TOTA of 1991 and 1992?	L value	of all in	ventori	ies at th	e end	•	consumers	070	 	 	077			
		Eľ	ND OF 19	92	EI	ND OF 19	991	i. Commonweal government	lth 676	l	1	677			
	(1) Materials, supplies, etc.	Mil. 646	Thou.	Dol.	Mil. 647	Thou.	Dol.	j. Construction companies	678		   	679			
	(2) Work-in-process	648			649	+	+	k. Other	680	 	 	681			
	(3) Finished goods	650			651			manufacturing establishment							
	(4) TOTAL	652	T		653	1	1	I. Other custom	682	I	1	683			
	inventories (Sum of lines (1) through (3))		   	1   		   	   	Item 37. SPECI		/			<u> </u>		
	<b>NOTE –</b> (LIFO users of should equal			b(1)(a), I	b(1)(b), a	and b(2)		If "Corporation" v best describes (X) only ONE box	this establis	n item 4: W hment at t	hich of he end	the follo of 1992	owing ? Mark		
	n 35. CAPITAL EXP				Mil.	<sup>†</sup> Thou.	<sup>†</sup> Dol.								
a.	What were the capit USED buildings and	l machi	nery in 1	1992	655	+	+		Domestic co Nondomesti	•	on unde	r section	936		
	(excluding land)? (New should NOT be includ should be reported be	ed in ite	em 35a, b	ut				_	Other nondo						
b.	What were the capit NEW buildings and	tal expe	enditure:	s for	656	1	1								
	(1) Buildings and othe (Exclude land.)					 	 								
	<u>.</u>				657	+			PROCEED T				,		
	(2) Machinery and equ	uipment					1	ANI	D COMPLET	E THE RES	I OF TH	E FORN	1.		

HISTORY-1992 ECONOMIC CENSUS

em 38. KIND OF ACTIVITY – CONSTRUCTION			Item 38. KIND OF
Describe the PRINCIPAL kind of construction activities this establishment engaged in during 1992.	vity		
			Construction activ
DW TO Report percentages as whole numbers	Percent		Swimming pool cor
PORT RCENTS EXAMPLE: Report 38.76% as	39	%	
What was the estimated percentage of the TOTAL DOLLAR VALUE OF BUSINESS DONE in 1992 (iten 5) for each of the following activities?			Terrazo, tile, marble
-	Perce	nt	
Construction activities Building construction on land owned by others –	701		Water well drilling
general contractor		%	
Duilding an attraction on land surged burger	702	0/	Wreaking and dom
Building construction on land owned by you Construction of highways, streets, parking lots,	703	%	Wrecking and demo
airport runways, and work related to highway and street construction		%	Other types of cont
Heavy construction such as bridges, tunnels, water, sewer, and other utility lines	704	%	
Other heavy construction such as petrochemical and industrial complex power plant	705	%	
Subdividing and preparing your own land for sale	706	%	
Subdividing and preparing your own land for rent	707	/0	
or lease		%	
	708		
Subdividing and preparing land owned by others <b>NOTE</b> – General contractors who did any of the following trades as part of a general contract should NOT fill out		%	
<b>NOTE –</b> General contractors who did any of the following	ng special these		Activities other that Architectural and en Rental of constructi
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.	ng special these Contractor,	nt	Architectural and en
<b>NOTE</b> – General contractors who did any of the followi trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade	ng special these Contractor, Perce		Architectural and en
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply. Plastering, drywall, acoustical, and insulation work	ng special these Contractor, Perce 709	nt	Architectural and en
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply. Plastering, drywall, acoustical, and insulation work Plumbing, heating, and air-conditioning	ng special these Contractor, Perce 709	nt %	Architectural and er
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply. Plastering, drywall, acoustical, and insulation work Plumbing, heating, and air-conditioning	rg special these Contractor, Perce 709 710 711	nt %	Architectural and en Rental of constructi Retail trade – <i>Speci</i>
NOTE – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work	ng special these Contractor, 709 710	nt %	Architectural and e
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply. Plastering, drywall, acoustical, and insulation work Plumbing, heating, and air-conditioning	rg special these Contractor, Perce 709 710 711	nt %	Architectural and en Rental of constructi Retail trade – <i>Speci</i>
NOTE – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply. Plastering, drywall, acoustical, and insulation work Plumbing, heating, and air-conditioning Roofing, siding, and sheet metal work	rg special these Contractor, Perce 709 710 711 711 712 713	nt %	Architectural and end Rental of construction Retail trade – Specion Sale of land
NOTE – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Concrete work	rg special these Contractor, 709 710 711 711	nt % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i>
<b>NOTE</b> – General contractors who did any of the followin trades as part of a general contract should NOT fill out boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work	rg special these Contractor, Perce 709 710 711 711 712 713	nt% %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m
NOTE – General contractors who did any of the followin         trades as part of a general contract should NOT fill out         boxes; but if work was done in 1992 as a Special Trade         fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work	rg special these Contractor, Perce 709 710 711 711 712 713 714	nt % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m
NOTE - General contractors who did any of the followin         trades as part of a general contract should NOT fill out         boxes; but if work was done in 1992 as a Special Trade         fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment	rg special these Contractor, Perce 709 710 711 711 712 713 714	nt % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage
NOTE – General contractors who did any of the followin trades as part of a general contract should NOT fill out to boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Concrete work	Perce           709           710           711           712           713           714           715	nt % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage
NOTE - General contractors who did any of the followin         trades as part of a general contract should NOT fill out         boxes; but if work was done in 1992 as a Special Trade         fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work	Perce           709           710           711           712           713           714           715           716	nt % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage
NOTE – General contractors who did any of the followin trades as part of a general contract should NOT fill out to boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work         Floor laying and other floor work	Perce           709           710           711           712           713           714           715           716	nt % % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m
NOTE - General contractors who did any of the followin         trades as part of a general contract should NOT fill out         boxes; but if work was done in 1992 as a Special Trade         fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work	Perce           709           710           711           712           713           714           715           716           717           718	nt % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m
NOTE - General contractors who did any of the followin         trades as part of a general contract should NOT fill out         boxes; but if work was done in 1992 as a Special Trade         fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Concrete work         Electrical work         Installation or erection of building equipment         Excavation work         Floor laying and other floor work         Glass and glazing work	Perce           709           710           711           712           713           714           715           717	nt % % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage
NOTE - General contractors who did any of the followin trades as part of a general contract should NOT fill out to boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work         Floor laying and other floor work	Perce           709           710           711           712           713           714           715           716           717           718	nt % % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i>
NOTE - General contractors who did any of the followin trades as part of a general contract should NOT fill out to boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work         Floor laying and other floor work         Glass and glazing work	Perce           709           710           711           712           713           714           715           716           717           718           719           720	nt % % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage
NOTE - General contractors who did any of the followin trades as part of a general contract should NOT fill out to boxes; but if work was done in 1992 as a Special Trade fill out the boxes that apply.         Plastering, drywall, acoustical, and insulation work         Plumbing, heating, and air-conditioning         Roofing, siding, and sheet metal work         Carpentry work         Electrical work         Installation or erection of building equipment         Excavation work         Floor laying and other floor work         Glass and glazing work         Masonry, stone setting, and other stonework	Perce           709           710           711           712           713           714           715           716           717           718           719	nt % % % % % % %	Architectural and en Rental of constructi Retail trade – <i>Speci</i> Sale of land Wholesale trade, m Construction manage

CONTINUE OF DUSINESS done in 1992 (item 5)		
<b>'OTAL</b> value of business done in 1992 (item 5)	100	%
		%
	131	
	737	%
	736	
	700	%
Other business activities – Specify kinds	735	
construction management		%
,	734	
Vholesale trade, manufacturing, and transportation		%
	733	70
ale of land		%
	732	/0
		%
letail trade – <i>Specify kind</i>	731	
ental of construction machinery and equipment	721	%
	730	
rchitectural and engineering services	700	%
tivities other than construction	123	
	729	%
	728	
	700	%
	727	
		%
Vrecking and demolition work Other types of contracting – <i>Specify kind</i>	726	%
Versking and demolition work		0/
Vater well drilling	725	%
		0/
errazo, tile, marble, and mosaic work	724	%
wimming pool contractor	723	%
nstruction activities (Continued)	/22	
	Percent 722	t
<b>38.</b> KIND OF ACTIVITY – CONSTRUCTION (C		

	Sec	tion G – (	CONSTR	UCTION (Continued)				
Item 39. DOLLAR VALUE OF B	JSINESS		hou. Dol.	Item 41. EMPLOYMENT AND HOURS WORKED				
a. What was the dollar value of construction work done in 1		→ 738 ¦	 	a. How many CONSTRUCTION WORKERS were employed in 1992 during the pay period including the				
INCLUDE -				12th of the month for the months shown?		ber of		
<ul> <li>New construction</li> <li>Additions and alterations, or reconstruction</li> </ul>	built valu	lings and othe for sale, exclu e of the land	uding the	(Include permanent or temporary, full- or part-time.)	825	oyees		
<ul> <li>Special trades contracting work</li> </ul>	ork equi	Illation and se pment	rvice of	(1) March				
<ul> <li>Maintenance and repair work</li> <li>Land development and improvement</li> </ul>	Cons acco	struction work unt	on own		826			
		Mil. T	hou. Dol.	(2) May	827			
<ul> <li>b. What were your receipts fror business other than those re above in 1992?</li> </ul>		→ 739   		( <b>3)</b> August	827			
INCLUDE -					828			
<ul> <li>Architectural and engineering</li> </ul>	services	Retail tra	de					
Rental of machinery and equi	pment	Other se	rvices	(4) November				
<ul> <li>Sale of land</li> </ul>					829			
Item 40. TYPES OF CONSTRUC What was the estimated percen	tage of the	amount you	reported	b. How many other employees were employed during the pay period including March 12?				
in item 39a (the dollar value of co each of the types of construction	nstruction wo	ork done in 199	92) <b>for</b>	c. How many hours were worked by	Hours	worked		
column (a), show the percentage of and alterations) in column (b) and t repair work in column (c).	f new constru the percentag	ction (include e of maintena	additions nce and	CONSTRUCTION WORKERS by quarter?	830			
<b>NOTE –</b> Column (b) + column (c) =	column (a).			(1) January through March	831			
	Percent of	Breakdown	of column (a)		051			
Type of construction	construction work done (a)	New construction (b)	Maintenance and repair work (c)	(2) April through June	832	832		
BUILDING CONSTRUCTION	740	741	742					
Single family houses (detached, attached, and townhouses)	%	%	%	(3) July through September	833	833		
Apartment buildings and other	750	751	752					
residential buildings	%	%	%	(4) October through December	834			
Industrial buildings and warehouses	760 %	761 %	762 %	(5) TOTAL hours worked				
Other nonresidential	770	771	772	(Sum of lines (1) through (4))				
buildings – <i>Specify</i>	%	%	%	Item 42. PAYROLL				
NONBUILDING CONSTRUCTION	780	781	782	deductions, for this establishment	Thou.	Dol.		
Highways, streets, and related				in 1992? 835				
work	%	%	%		l	l		
Bridges, tunnels, and elevated	790	791	792	a. Construction workers 836	 _	 		
highways	%	%	%	830	Ì	I		
Water, sewer, pipeline, communication transmission	800	801	802	<b>b.</b> All other employees	l l	 		
lines, and power lines	%	%	%	Item 43. CONSTRUCTION WORK SUBCONTRA	CTED OUT			
Other nonbuilding construction – <i>Specify</i>	810	811	812	What was the cost to this				
	%	%	%	establishment in 1992 for construction	Thou.	Dol.		
<b>TOTAL</b> value of construction work done		821	822	work subcontracted out to other construction contractors? Include construction work done by manufacturing firms and value of materials sold to				
(Sum of column (b) + column (c) should equal 100%)	100 %	%	%	subcontractors.		 		

Section G – CONSTRUCTION (	Continu	ed)				
Item 44. SELECTED COSTS					Thou.	Dol.
What was the cost to this establishment in 1992 for materials and services used?				838	l I	l I
a. Electricity					l I	l I
				839	1	1
b. Gasoline, diesel fuel, and gasohol					 	1
				840		
c. Other fuels for heat or power such as natural gas, and lubricants, oils, and greases.					1	1
				841	1	1
d. Communication and repairs to machinery, equipment, buildings, and other structures					1	1
				842	1	1
<ul> <li>Rental or lease of construction machinery and equipment, transportation equipment, bustructures, office equipment, and fixtures (Do not include payments for subcontract wo</li> </ul>	rk.)	otner			1	1
				843	1	1
f. Materials, components, and supplies					1	1
Item 45. WORK FOR OTHER CONTRACTORS OR BUILDERS						
Did this establishment do any work for other contractors					Per	cent
or builders in 1992?					851	
850 1 YES – Estimate the percentage of the dollar value of construction work done in 1992 (item 39a) accounted for by such work.						%
2 NO						/0
Item 46. OWNERSHIP OF CONSTRUCTION PROJECTS						
What was the percentage of the dollar value of construction work done (item 39a					Per	cent
government-owned projects and on privately-owned projects in 1992?	, 011				852	
a. Government-owned construction (Federal, Commonwealth, municipal)						%
					853	
b. Privately owned construction						%
c. TOTAL value of construction work done in 1992 (item 39a)					1	<b>00</b> %
Item 47. ASSETS, CAPITAL EXPENDITURES, AND DEPRECIATION		gs, job-site ions, and r			nery, equi	
	faciliti	es, excludi (1)	ng land	ć	and vehicle (2)	es
	Mil.	Thou.	Dol.	Mil.	Thou.	Dol.
	854	 	 	855	 	 
a. What was the GROSS value of depreciable assets (usually original cost) at the BEGINNING of 1992?		1	l		1	1
		 	1	856		
b. What were the capital expenditures for NEW automobiles, trucks, etc. (intended primarily for highway use) during 1992?		1	l I		1	1
	857	1		858	1	
c. What were the capital expenditures for NEW buildings, machinery, and		1	l I		1	1
job-site vehicles during 1992?	859	1		860	1	1
d. What were the capital expenditures for USED buildings and machinery		Ì	I		I	I
during 1992? (Include used automobiles, trucks, etc.)	001	1	 	000	 <del> </del>	 
e. What was the GROSS value of depreciable assets sold, retired, scrapped,	861	1	I	862	l	l
etc. in 1992?		1	 		 	 
	863	1	1	864	1	1
f. What was the GROSS value of depreciable assets at the END of 1992? (Sum of $a + b + c + d - e$ )		i i				
	865			866		
g. What were the depreciation charges for 1992?		1	l I			1
PROCEED TO SECTION H, PAGE 17, AND COMPLETI	E THE REST	OF THE FO	DRM.			•

	5	Sec	tion	H	– ALI	L ES	TAE	BLISHN	/ENT	S							
Item 48. OWNERSHIP, CONTROL,	AND LO	CAT	IONS	OF	OPERA	TION											
<b>NOTE</b> – Answer this item only if yo does not begin with a zero				ber (	CFN), si	hown ir	n the l	label of thi	is repor	t form, b	egins v	vith zer	o. If t	he CFN	1		
	EN	TER O	WNIN	g or	CONTR	OLLING	G COM	PANY NAN	/IE, ADD	RESS, AI	ND ZIP (	CODE					
a. Is this company owned or controlled by another company?	Na	me _										-	-				
900 1 🗌 YES	→ Ad	dress										901 EI		ber <i>(9 d</i>	ligits)		
b. Does this company own or contr any other company or companie	s?							ANY NAME									
If more space is needed, continue ir REMARKS (item 49).	ING	me _										- 903					
902 1 🗌 YES	→ Ad	dress												ber <i>(9 a</i>	ligits)		
													ŀ	-			
c. Did this company operate at mo NOTE – Locations which are not st.					-		o omn		arad by	this FI N	lumbar	should		Γhρ			
considered separate. Inclu											uniber	Should	i NO1	De			
904 1 🗌 YES – List additional loca	tions bel	ow an	nd pro	vide	the info	ormatio	n reai	uested.									
If more space is ne	eded, co	ntinue	e in Rl	ĒMĀŀ	RKS (ite	m 49).	moqu										
2 🗌 NO – Skip to item 50		-							-								
Number and street		906	EIN	lumb	oer (9 dig	gits)			Mil. 908	Thou.	Dol.	Num empl	oyee	s	Are the figure	es	
Municipio	Kind of	husin	-	t this		<u> </u>		Sales and eceipts→		 	 	period including		inclue page	2 of		
907	Kind Of	Dusin	1635 a		locatio		ŀ		909	+ 1	 	910	n 12,	1992	<b>repor</b> 911	_	VES
								Annual bayroll →		i I	l I	510			-	2	
Number and street		912	ELN	lumb	er (9 di	gits)			914	1	I	Num empl			Are t		
			-					Sales and eceipts→		I I	 	durin	ig pav		inclu	ded o	
Municipio 913	Kind of	busin	iess a	t this	locatio	n	F		915		 	Marc	h 12,	1992	repor	t?	
								Annual Dayroll <del>→</del>		 	 	916			917	1 🛄 ' 2 🔲	
Item 49. REMARKS – Please use th	nis space	e for	any e	expla	anation	s that	may	be essen	tial in	underst	anding	g your	repc	orted d	ata.		
Item 50. CERTIFICATION – This rep	oort is s	ubsta	ntial	ly ac	curate	and ha	as be	en prepa	red in	accorda	ance w	ith ins	truct	tions.			
Print name of person to contact regarding	this rep	ort						covered report —		M: Mon	ith <sup> </sup> Yea   	ar	Т	O: Moi	nth Y	/ear	
	umber			920	Extens	ion Pr	repare	er's signati	ure						Date		
Telephone																	
FORM OA-9820						Page 1	17										

# WHOLESALE COMMODITY LINES

#### CODE COMMODITY LINE

- 217 Trucks and tractors
- 218 Petroleum products marketing equipment
- **219** Office and business furniture
- 220 Floor coverings
- **221** Other home furnishings
- 222 Roofing, siding, insulation materials, and guttering
- **223** Glass (Exclude automotive.)
- 224 Other construction materials
- **225** New computer equipment
- 226 Used computer equipment
- 227 Computer software off the shelf
- 228 Restaurant and hotel equipment and supplies
- 229 Store machines and equipment
- 230 Optical and ophthalmic goods
- 231 Dental supplies
- **232** Religious and school supplies
- 233 Other professional equipment and supplies
- 234 Ferrous metals
- 235 Nonferrous metals
- 236 Coal and coke
- 237 Other minerals and ores
- 238 Electronic communication equipment
- **239** Electrical measuring and testing equipment, except automotive
- **240** Warm air heating and air conditioning equipment and supplies
- 241 Refrigeration equipment and supplies
- 242 Construction and mining machinery, equipment, and parts
- 243 Farm machinery, equipment, and parts
- 244 Garden machinery, equipment, and supplies
- 245 Food-processing machinery, equipment, and parts
- 246 Metalworking machinery, equipment, and parts
- 247 Materials-handling equipment and parts
- **248** Oil well, oil refinery, and pipeline machinery, equipment, and supplies
- 249 Other industrial machinery, equipment, and parts
- 250 Mechanical power transmission equipment
- 251 Other industrial supplies
- **252** Beauty and barber equipment and supplies

## CODE COMMODITY LINE

- 253 Custodial (janitor's) equipment and supplies
- 254 Laundry and dry-cleaning equipment and supplies
- 255 Other service establishment equipment and supplies
- 256 Aircraft and aeronautical equipment and supplies
- **257** Marine machinery, equipment, and supplies
- 258 Other transportation equipment and supplies
- 259 Sporting and recreational goods and supplies
- 260 Toys and hobby goods and supplies
- 261 Ferrous metal scrap
- 262 Nonferrous metal scrap
- 263 Waste materials, except metals
- 264 Musical instruments and supplies
- **265** Forest products, except lumber
- 266 Other durable goods
- 267 Printing and writing (fine) paper
- 268 Stationery, office supplies, and greeting cards
- 269 Industrial and personal service paper
- **270** Piece goods, knit and woven
- 271 Notions and other dry goods
- 272 Bread and baked goods
- 273 Food and beverage basic materials
- 274 Cattle, hogs, sheep, and goats
- 275 Hides, skins, and pelts
- 276 Leaf tobacco
- 277 Wool, wool tops, and mohair
- 278 Other farm products (inedible)
- 279 Cotton
- 280 Industrial gases
- 281 Liquefied petroleum gases (Exclude natural gas.)
- 282 Crude oil
- 283 Farm supplies
- **284** Tobacco and tobacco products
- 285 Flowers and florists' supplies
- 286 Art goods (Include gifts, novelties, and souvenirs.)
- 287 Textile bags and bagging
- 288 Advertising specialties (paper novelties, etc.)
- 289 Wigs, yarn, and leather products
- 290 Other nondurable goods

FORM OA-9820

	U.S. DEPART BUREAU OF TH FORM OA-9		1992 ECON VIRGIN ISLANE	OMIC CENS	OMB No. 0607-0	)731: Ann	roval Expires	12/31/93
NOTICE -	- Response to this tle 13, U.S. Code	s inquiry is required	Census <sup>993</sup>			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		12/01/00
law, your	report to the Cens	sus Bureau is en only by sworn	use only			OA	-9873	
census er statistical copies ret legal pro	nployees and may purposes. The lay ained in your files <b>cess.</b>	y be used only for w also provides that s are <b>immune from</b>						
ΝΟΤΙ	<b>=</b> –		Name of this esta	ablishment				
instru the qu are no	e read the acc actions before uestions. If bo ot available, re ates are accep	answering ok figures easonable	Mailing address					
	Census use	only						
990	991	992						
Itom 1	PHYSICAL LOCA	TION	(Please correct e	errors in the name	of this establishme	nt, addre	ss, or ZIP Co	-
a. What		AL location of this e	stablishment if	a. How many	months during 1992 organization active	did lv	100	1011115
give a cente neare <b>NOT</b>	as much informati r, street intersecti est town. <b>E</b> – P.O. boxes or ber and street or	e described by numb ion as possible such a ion, highway number, rural routes are not p location description	as name of shopping or distance from hysical locations.	status of th           Mark (X) onl           101         1           101         2           Ter           3         Cer           4         So           op		the end o date $\rightarrow$	ee operationa of 1992? 02 Month Day	Year
	hat island is thi (X) only ONE box	is establishment phy «.	ysically located?	Number and	street			
051	1 🗌 St. John 2 🗌 St. Croix			City or town		State	ZIP Code	
	3 St. Thomas Mark (X) the I boundaries w PHYSICALLY	box which best describ here the establishment located.	es the legal t is	Which of th	ZATIONAL STATUS the following best des this establishment at the y ONE box.	scribes th the end o	e organizatio of 1992?	onal
	2	ristiansted ederiksted arlotte Amalie ıtside of legal town undaries		2 🗌 Par 3 🗌 Co 4 🗌 Go	lividual proprietorship rtnership rporation vernment – <i>Specify</i> ner – <i>Specify</i>			
Item 2.	EMPLOYER IDEN	ITIFICATION NUMBE	R	· · · · · ·	rt dollar values rounde		Thou-	Dol-
would	<b>ou have an Emp</b> l d be used to repor 941SS.)	loyer Identification rt Social Security with	(EI) Number? (It holding in 1992 on	REPORT to the	ousands. MPLE: Report \$1,125,628 as -	lions (000	s sands	lars (000)
094	1 YES – Enter o	current mber (9 digits) →		item 5. DOLLAR	VOLUME OF BUSIN		· · ·	
	2 NO 3 Unknown			of merchan operating re	he total dollar volum dise sales and other eceipts for this ent in 1992?		.   Thou.   	Dol.

YOUR RESPONSE IS REQUIRED BY LAW.

				<u> </u>
Item 6. PAYROLL	Mil.		Thou.	Dol.
a. What was the total ANNUAL payroll, before deductions for this establishment in 1992?	030			
b. What was the FIRST QUARTER (January-March) payroll, before deductions?	031	+   		
Item 7. EMPLOYMENT		-	Nitra	or
a. How many EMPLOYEES (full- and par		032	Numb	Jei Jei
time) were on your payroll during the period which included March 12, 199	pay	032	2	
b. How many PROPRIETORS and PARTN worked 15 or more hours during the which included March 12, 1992?		036	3	
c. How many UNPAID FAMILY members worked 15 or more hours during the which included March 12, 1992?		039	)	
Item 8. KIND OF BUSINESS OR ACTIVI	ТҮ			
What was the PRINCIPAL kind of busine		+hid	enetablie	hmont
in 1992 (or activity by which this estable				
trade or public)? Mark (X) only ONE box.			070	
Agricultural service or production				0100
•				1000
•		• •	· · · · L	
Construction			-	_
General building contractor		• •	L	1500
Heavy construction, exclude building		• •	L	1600
Special trade contractor			L	1700
Manufacturing – Specify primary materials	consu	med	1 <u>[</u>	2000
Travel agencies and other passenger				
transportation services				
Water transportation services			E	4499
Travel agencies			E	4724
Tour operators			E	4725
Other services in arranging passenger tra	nsporta	tior	E	4729
Wholesale trade	•			
Durable goods			Г	5000
U U		• •	· · · · L	_
Nondurable goods		• •	· · · · L	5100
Retail trade			_	_
Hardware store		• •	L	5251
Grocery store		• •	L	5411
Meat and fish market			L	5421
Candy, nut, and confectionery store			C	5441
Auto and home supply store			E	5531
Gasoline service station			E	5541
Boat dealer			E	5551
Clothing store, men's and boys'			_	5611
Women's clothing store			_	5621
Family clothing store			-	5651
Shoe store			_	5661
			-	5712
				5812
Eating place (restaurant, cafeteria, etc.) .			_	
Eating place with 15 or more guestrooms			_	7018
Drinking place (tavern, bar, nightclub, etc.				_ 5813 □
Drug store (prescriptions filled)			_	5912
Liquor store			L	5921
Jewelry store			C	5944
Gift, novelty, and souvenir store			C	5947
Other kind of retail business - Specify .			E	5999

Finance, insurance, and real estate 070	0
Personal credit institutions.	6141
Insurance agent, broker, or related services	6411
Operator of apartment building(s)	6513
Residential mobile home park operator	6515
Real estate agent and manager	6531
Subdivider and developer, except cemeteries	6552
Other kind of finance, insurance, or	
real estate – <i>Specify</i>	6999
Hotels, motels, and guest houses Hotel with 15 or more guestrooms	☐ 7011 ☐ 7012
Recreational hotel	7014
Motel	7015
Guest houses	7016
Organizational hotel or lodging house, with rooms	_
open to the general public	7017
Other lodging places	_
Sporting or recreational camp – <i>Specify</i>	7032
Other kind of activity – <i>Specify</i>	7099
Services	
Coin-operated laundries and drycleaning	
	7215
Beauty shop	☐ 7215 ☐ 7231
Beauty shop	
Barber shop	7231
Barber shop	☐ 7231 ☐ 7241 ☐ 7261
Barber shop          Funeral services          Truck rental and leasing, without drivers	7231
Barber shop       Funeral services.       Truck rental and leasing, without drivers.       Passenger car rental	<ul> <li>☐ 7231</li> <li>☐ 7241</li> <li>☐ 7261</li> <li>☐ 7513</li> <li>☐ 7514</li> </ul>
Barber shop         Funeral services.         Funeral services.         Truck rental and leasing, without drivers.         Passenger car rental         Passenger car leasing	☐ 7231 ☐ 7241 ☐ 7261 ☐ 7513
Barber shop         Funeral services.         Truck rental and leasing, without drivers.         Passenger car rental         Passenger car leasing         Utility trailer and recreational vehicle rental	7231         7241         7261         7513         7514         7515         7519
Barber shop         Funeral services.         Truck rental and leasing, without drivers.         Passenger car rental         Passenger car leasing         Utility trailer and recreational vehicle rental         Automotive paint and body shop	7231         7241         7261         7513         7514         7515         7519         7532
Barber shop         Funeral services.         Fruck rental and leasing, without drivers.         Passenger car rental         Passenger car rental         Passenger car leasing         Utility trailer and recreational vehicle rental         Automotive paint and body shop         Automotive muffler shop	7231         7241         7261         7513         7514         7515         7519         7532         7533
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shop	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shop	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shop	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning service	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shop	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7623         7629
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rental	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7622         7623         7629         7841
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther anusement and recreation services	7231         7231         7231         7231         7241         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7623         7623         7841         7999
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesMedical doctor's office, including clinics	7231         7221         7241         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7623         7623         7841         7999         8011
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesMedical doctor's office, including clinicsDentist's office, including orthodontist	7231         7231         7231         7231         7241         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7629         7841         7999         8011         8021
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesMedical doctor's office, including clinicsLegal services, including legal aid	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7622         7623         7623         7629         7841         7999         8011         8021         8111
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther anusement and recreation servicesMedical doctor's office, including clinicsLegal services, including legal aidManagement services	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7629         7841         7999         8011         8021         8111         8741
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesMedical doctor's office, including clinicsLegal services, including legal aidManagement servicesBusiness consultant	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7629         7841         7999         8011         8021         8111         8748
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther anusement and recreation servicesMedical doctor's office, including clinicsLegal services, including legal aidManagement services	7231         7241         7261         7513         7514         7515         7519         7532         7533         7537         7539         7622         7623         7629         7841         7999         8011         8021         8111         8741

HOW TO REPORT Report percentages as whole numbers	Percent		<b>NOTE –</b> Answer items 12 and 13 ONLY if the principal business or
PERCENTS <b>EXAMPLE:</b> Report 38.76% as	39	%	activity (item 8) for this establishment is HOTELS, MOTELS, AND OTHER LODGING PLACES OR EATING PLACE WITH 15 OR MORE GUESTROOMS
Item 9. CLASS OF CUSTOMER			FOR LODGING. Otherwise skip to item 14.
What was the estimated percentage of 1992 dollar volume of sales or receipts (item 5) to	Percent		Item 12. SOURCES OF RECEIPTS FOR HOTELS, MOTELS, AND OTHER LODGING PLACES
each customer class?	320		AND OTHER EODGING FLACES
a. To local residents	321	%	Receipts must be reported as percentages of total 1992 receipts (item 5).
<b>b.</b> To visiting tourists	321	%	receipts (item 5).
- To local botals or other ladrice places	322	0/	Exclude occupancy or other taxes collected from customers.
c. To local hotels or other lodging places	323	%	a. What was the estimated percentage of 1992 SALES
<b>d.</b> To other local tourist-related businesses		%	AND RECEIPTS FROM CUSTOMERS for the following? (Do not include receipts from coin-operated machines
e. To other local nontourist-related businesses	324	%	maintained by others.)
f. To nonlocal businesses and to Federal	325		Percent
and territorial governments		%	(1) Guestroom or unit rentals ( <i>If meals are</i>
g. TOTAL (Sum of lines a through f should equal 100%)	100	%	included as a room package, estimate the percentage for meals on line a(2).)
NOTE – If the principal business or activity (item 8) for t			402
is HOTELS, MOTELS, AND OTHER LODGING PLACES O WITH 15 OR MORE GUESTROOMS FOR LODGING, skip		CE	(2) Sales of meals and nonalcoholic beverages
Otherwise, complete item 10.	1		403
Item 10. SOURCE OF SALES OR RECEIPTS	Percent 331		(3) Sales of alcoholic beverages for consumption
a. What was the estimated percentage of total 1992 sales or receipts (item 5) for products		- (	on premises 404
manufactured at this location?		%	+0+
<ul> <li>b. What were the principal lines of merchandise construction work done, products produced,</li> </ul>	or services		(4) Sales of packaged liquor, wine, or beer
<b>provided?</b> Estimate the percentage each was of th in 1992 (item 5) (e.g., gasoline 85%, auto repairs 10	ne sales or rece 0%, oil 5%).	ipts	405
Source	Percent		(5) Sales of other merchandise
			406
		%	(6) All other receipts from customers (Include ballrooms, convention halls, laundry, valet,
		%	and other services.)
		70	(7) TOTAL
		%	(Sum of lines 1 through 6 should equal 100%) <b>100</b>
		%	b. Were any receipts OTHER than from customers received by this establishment in its business operation? (Include rental)
		,,,	and commission receipts from operators of leased departments, concessions and stores, and coin-operated machines.)
		%	
		%	Mil. ' Thou. ' Dol. 416
		/0	415 1 🗌 YES – What was the
		%	amount?
TOTAL	100	0/	2 🗌 NO
Item 11. PURCHASES FROM OTHER BUSINESS		%	
What was the estimated percentage of the total			Item 13. NUMBER AND TYPE OF ACCOMMODATIONS
dollar value of 1992 purchases for each of the listed items?	Percent		
Supplies and materials purchased	332		a. What was the number of rooms, units, or quarters primarily rented as transient, as of Number as of
a. Locally		%	December 31, 1992? The number of December 31, 199
	333		guestrooms, units, or quarters consists of the 420 number which can be rented as single units. Suites of rooms which cannot be subdivided
b. Not locally Services purchased	334	%	should be counted as a single unit.
c. Locally		%	b. Were more than half of guestroom or unit rental receipts in 1992 from transient guests?
	335	70	
d. Not locally		%	421 1 ☐ YES 2 ☐ NO
TOTAL	100	0/	
(Sum of lines a through d should equal 100%)	100	%	

FORM OA-9873

CONTINUE ON PAGE 4

Iter		RSHIP, CONTR ERATION	OL, AND LOCATIONS		lte	m 14. OWNEF OF OPE	RSHIP, CONTRO RATION (Conti	OL, AND LOO inued)	CATIO	NS	
	Refer to instru	ctions before co	mpleting this item.		c. Did this company operate at more than one location during 1992?						
a.	Is this company owned or controlled	ENTER OWNING ADDRESS, AND	OR CONTROLLING COMP. ZIP CODE	ANY NAME,	NOTE – Locations which are not staffed on a full-time basis by at least one employee covered by this El Number should NOT be considered separate. Include data for these locations with data reported for the main location.						
	by another company?	Name				429 1 YES	<ul> <li>List additional information re- continue in RE</li> </ul>	locations belo quested. If mo MARKS (item	w and pre spac 15).	provide th ce is need	ne ed,
	425 1 □ YES →	Address				2 🗌 NO –	Skip to item 16				
	2 🗌 NO			[		Name, address,	town, and island	1992	Mil. 430	Thou.	Dol.
			400						430		 
		El Number <i>(9 c</i>	426		1			Sales		l I	i I
b.	Does this	ENTER OWNED	OR CONTROLLED COMPAN	NY NAME,		Kind-of-busines	s description		431		 
	company own or	ADDRESS, AND	ZIP CODE					Annual			   
	control any other company or	Name		ŀ		Name, address,	town, and island	payroll	432	1	1
	companies?									l	I I
	427 1 □ YES →	Address						Sales			 
	2 NO				2				433		 
			428			Kind-of-busines	s description			1	1
		El Number (9 d	digits)					Annual payroll			1
			is report is substantial	ly accurate and	l ha	s been prepare			structi		
Print	name of persor	n to contact rega	arding this report		Pe by	eriod covered $v$ this report $\rightarrow$	FROM: Month	Year	ГО: Ма	onth Y	ear
Tele	phone>	441 Area code	442 Number	443 Extension	Pr	eparer's signature	9		I	Date	

F-182 APPENDIX F

	U.S. DEPARTM BUREAU OF THE FORM OA-9 Response to this i	863	1992 ECON GUAM		OMB No. 0607-07:	31: Appro	val Expires	12/31/93
by law <b>(tit</b> law, your <b>confiden</b> Census en statistical	Ile 13, U.S. Code) report to the Censu tial. It may be seen aployees and may purposes. The law ained in your files a	I. By the same Is Bureau is It only by sworn				OA-9	9863	
instru the qu availa	e read the acco ctions before a lestions. If reco ble, reasonable cceptable. Census use	nswering ords are not e estimates					-	
990	991 PHYSICAL LOCAT	992	(Please correct o	-	e of this establishment TIONAL STATUS (Conti		s, or ZIP Co	ode)
a. What differ lf the give a cente neare NOTA	is the PHYSICAL rent from the main location cannot be s much information r, street intersection st town. E – P.O. boxes or run per and street or lo	location of this e ling address?	er and street name, as name of shopping or distance from hysical locations.	Status of t Mark (X) or 101 1 2 Te Se 3 Ce 4 Se 0 A Name of new Number and City or town	emporarily or easonally inactive eased operation – <i>Give da</i> old or leased to another perator – <i>Give date – ND enter name, etc., belo</i> v owner or operator street	e end of 102 $M_{c}$ $M_{c}$	1992?	al Year
<b>Do yo</b> (It wo 1992 o 094	uu have an Employ         uld be used to report         on form 941SS.)         YES – Enter cu         El Numb	IFICATION NUMBE over Identification ort Social Security w 095 rrent ver (9 digits) →	(EI) Number? ithholding in	Which of t status of t Mark (X) or 103 1 In 2 Pa 3 IC 4 IG	the following best desc his establishment at the ly ONE box. dividual proprietorship artnership prporation overnment – Specify ther – Specify	e end of	1992?	
Item 3. ( a. How firm		ATUS ring 1992 did this ctively operate th		Item 5. DOLLAR	ort dollar values rounded nousands. MPLE: Report \$1,125,628 as → R VOLUME OF BUSINES the total dollar volume redise sales and other receipts for this	SS Mil.	Thou- sands (000) 126   Thou.	Dol- lars (000) Dol.

YOUR RESPONSE IS REQUIRED BY LAW.

Item 6. PAYROLL	Mil.		Thou.	Dol.
a. What was the total ANNUAL	030			
payroll, before deductions for this establishment in 1992?				l
b. What was the FIRST QUARTER	031			
(January–March) payroll, before	001			
deductions?				
Item 7. EMPLOYMENT			Num	ber
<ul> <li>a. How many EMPLOYEES (full- and par time) were on your payroll during the period which included March 12, 199</li> </ul>	pay	032		
b. How many PROPRIETORS and PARTM worked 15 or more hours during the which included March 12, 1992?		036	i	
c. How many UNPAID FAMILY members worked 15 or more hours during the		039	1	
which included March 12, 1992?				
Item 8. KIND OF BUSINESS OR ACTIVI				
What was the PRINCIPAL kind of busine in 1992 (or activity by which this establi trade or public)? Mark (X) only ONE box.				
Agricultural service or production			[	0100
Mining			[	1000
Construction				
General building contractor			E	1500
Heavy construction, exclude building			[	1600
Special trade contractor			[	1700
Manufacturing – Specify primary materials	consu	med	ιΓ	2000
<b>3</b> -				
Travel agencies and other passenger transportation services				
Water transportation services			[	4499
Travel agencies			[	4724
Tour operators			[	4725
Other services in arranging passenger tran	nsporta	tion	L	4729
Wholesale trade			_	_
Durable goods			<u>[</u>	5000
Nondurable goods		• •	L	5100
Retail trade				
Hardware store			<u>[</u>	5251
Grocery store		• •	<u>L</u>	5411
Meat and fish market			-	5421
Candy, nut, and confectionery store			-	5441
Auto and home supply store				5531
Gasoline service station				5541
Boat dealer			_	5551
Clothing store, men's and boys'				5611
Women's clothing store			-	5621
Family clothing store			-	5651 5661
Shoe store			-	5712
Eating place (restaurant, cafeteria, etc.)			-	-
Eating place (restaurant, caleteria, etc.) . Eating place with 15 or more guestrooms			-	5812 7018
Drinking place (tavern, bar, nightclub, etc.			-	5813
Drug store (prescriptions filled)			-	5912
			-	5912
			-	5921
Gift, novelty, and souvenir store			-	5944
Other kind of retail business – Specify			-	5999
		•••		_ 0000

nance, insurance, and real estate 070	
D I INT OUT	
Personal credit institutions	6141
Insurance agent, broker, or related services	6411
Operator of apartment building(s)	6513
Residential mobile home park operator	6515
Real estate agent and manager	6531
Subdivider and developer, except cemeteries	6552
Other kind of finance, insurance, or	—
real estate – <i>Specify</i>	6999
otels, motels, and guest houses	
Hotel with 15 or more guestrooms	7011
Hotel with less than 15 guestrooms.	7012
Recreational hotel	7014
Motel	7015
Guest houses	7016
Organizational hotel or lodging house, with rooms	_
open to the general public	7017
ther lodging places	
	7032
Trailering park and campground for transients	7033
Other kind of activity – <i>Specify</i>	7099
ervices Coin-operated laundries and drycleaning	
, , ,	7015
Regulty shop	7215
Beauty shop.	7231
Barber shop	☐ 7231 ☐ 7241
Barber shop	☐ 7231 ☐ 7241 ☐ 7261
Barber shop	☐ 7231 ☐ 7241 ☐ 7261 ☐ 7513
Barber shop	☐ 7231 ☐ 7241 ☐ 7261 ☐ 7513 ☐ 7514
Barber shop	☐ 7231 ☐ 7241 ☐ 7261 ☐ 7513 ☐ 7514 ☐ 7515
Barber shop	<ul> <li>☐ 7231</li> <li>☐ 7241</li> <li>☐ 7261</li> <li>☐ 7513</li> <li>☐ 7514</li> <li>☐ 7515</li> <li>☐ 7519</li> </ul>
Barber shop	<ul> <li>☐ 7231</li> <li>☐ 7241</li> <li>☐ 7261</li> <li>☐ 7513</li> <li>☐ 7514</li> <li>☐ 7515</li> <li>☐ 7519</li> <li>☐ 7532</li> </ul>
Barber shop	<ul> <li>☐ 7231</li> <li>☐ 7241</li> <li>☐ 7261</li> <li>☐ 7513</li> <li>☐ 7514</li> <li>☐ 7515</li> <li>☐ 7519</li> <li>☐ 7532</li> <li>☐ 7533</li> </ul>
Barber shop	<ul> <li>☐ 7231</li> <li>☐ 7241</li> <li>☐ 7261</li> <li>☐ 7513</li> <li>☐ 7514</li> <li>☐ 7515</li> <li>☐ 7519</li> <li>☐ 7532</li> <li>☐ 7533</li> <li>☐ 7537</li> </ul>
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shop	□       7231         □       7241         □       7513         □       7514         □       7515         □       7519         □       7533         □       7537         □       7539
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shop	□       7231         □       7241         □       7261         □       7513         □       7514         □       7515         □       7532         □       7533         □       7537         □       7539         □       7622
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning service	□       7231         □       7241         □       7261         □       7513         □       7514         □       7515         □       7532         □       7533         □       7537         □       7539         □       7622         □       7623
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shop	□       7231         □       7241         □       7261         □       7513         □       7514         □       7515         □       7532         □       7533         □       7537         □       7539         □       7622         □       7623         □       7629
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rental	□       7231         □       7241         □       7261         □       7513         □       7514         □       7515         □       7532         □       7533         □       7533         □       7537         □       7522         □       7623         □       7623         □       7623         □       7623         □       7623         □       7623         □       7841
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation services	☐       7231         ☐       7241         ☐       7513         ☐       7514         ☐       7515         ☐       7519         ☐       7532         ☐       7533         ☐       7537         ☐       7539         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopChr electrical and electronic repair shopOther and air conditioning serviceOther amusement and recreation servicesMedical doctor's office, including clinics	☐       7231         ☐       7241         ☐       7513         ☐       7513         ☐       7514         ☐       7515         ☐       7519         ☐       7532         ☐       7533         ☐       7537         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8011
Barber shop	☐       7231         ☐       7241         ☐       7513         ☐       7513         ☐       7514         ☐       7515         ☐       7519         ☐       7532         ☐       7533         ☐       7537         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8011         ☐       8021
Barber shop       Funeral services.         Funeral services.       Funeral services.         Truck rental and leasing, without drivers.       Passenger car rental         Passenger car rental       Passenger car leasing         Passenger car leasing       Passenger car leasing         Utility trailer and recreational vehicle rental       Passenger car leasing         Automotive paint and body shop       Passenger car leasing         Automotive paint and body shop       Passenger car leasing         Automotive muffler shop       Passenger car leasing         Automotive transmission repair shop       Passenger car leasing         Other automotive repair shop       Passenger car leasing         Radio and television repair shop       Passenger car leasing         Other electrical and electronic repair shop       Passenger car leasing         Video tape rental       Passenger car leasing         Other amusement and recreation services       Passenger car leasing         Medical doctor's office, including orthodontist       Passenger car leasing         Legal services, including legal aid       Passenger car leasing	☐       7231         ☐       7241         ☐       7513         ☐       7514         ☐       7515         ☐       7516         ☐       7532         ☐       7533         ☐       7537         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8011         ☐       8021         ☐       8111
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesDentist's office, including orthodontistLegal services, including legal aidManagement services	☐       7231         ☐       7241         ☐       7261         ☐       7513         ☐       7514         ☐       7515         ☐       7519         ☐       7532         ☐       7533         ☐       7537         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8011         ☐       8021         ☐       8111         ☐       8741
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesDentist's office, including orthodontistLegal services, including legal aidManagement servicesBusiness consultant	☐       7231         ☐       7241         ☐       7513         ☐       7514         ☐       7515         ☐       7515         ☐       7532         ☐       7533         ☐       7537         ☐       7623         ☐       7623         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8021         ☐       8111         ☐       8741
Barber shopFuneral services.Truck rental and leasing, without drivers.Passenger car rentalPassenger car leasingUtility trailer and recreational vehicle rentalAutomotive paint and body shopAutomotive muffler shopAutomotive transmission repair shopOther automotive repair shopRadio and television repair shopRefrigeration and air conditioning serviceOther electrical and electronic repair shopVideo tape rentalOther amusement and recreation servicesDentist's office, including orthodontistLegal services, including legal aidManagement services	☐       7231         ☐       7241         ☐       7261         ☐       7513         ☐       7514         ☐       7515         ☐       7519         ☐       7532         ☐       7533         ☐       7537         ☐       7622         ☐       7623         ☐       7629         ☐       7841         ☐       7999         ☐       8011         ☐       8021         ☐       8111         ☐       8741

FORM OA-9863

To whom	CLASS OF CUSTOMER n did this establishment sell most of you de your services in 1992?	r products	<b>NOTE</b> – Answer items 11 and 12 ONLY if the principal business or activity (item 8) for this establishment is HOTELS, MOTELS, AND OTHER LODGING PLACES OR EATING PLACE WITH 15 OR MORE GUESTROOMS FOR LODGING. Otherwise skip to item 13.
310 1	To the general public (household consumers and individuals)	S	Item 11. SOURCES OF RECEIPTS FOR HOTELS, MOTELS, AND OTHER LODGING PLACES
2	] To retail or wholesale establishments		Passints must be reported as percentages of total 1002
3	] To construction contractors		Receipts must be reported as percentages of total 1992 receipts (item 5).
4	To institutional, industrial, commercial, professional, government, and farm users		Exclude occupancy or other taxes collected from customers.
5	Other customers – <i>Specify 📈</i>		a. What was the estimated percentage of 1992 SALES AND RECEIPTS FROM CUSTOMERS for the following? (Do not include receipts from coin-operated machines maintained by others.)
			Percent
ноw то	Report percentages as whole numbers	Percent	(1) Guestroom or unit rentals ( <i>If meals are</i>
REPORT PERCENTS		39 9	% percentage for meals on line a(2).) 9
is HOTELS, WITH 15 O	the principal business or activity (item 8) for t MOTELS, AND OTHER LODGING PLACES O R MORE GUESTROOMS FOR LODGING, skip complete item 10.	R EATING PLACE	(2) Sales of meals and nonalcoholic beverages 9 403 (3) Sales of alcoholic beverages for consumption
Item 10.	SOURCE OF SALES OR RECEIPTS		on premises 9
		Percent	404
1992	was the estimated percentage of total sales or receipts (item 5) for products factured at this location?	331	%     (4) Sales of packaged liquor, wine, or beer     9       %     405
b. What types or set of the	were the principal lines of merchandise of construction work done, products pr rvices provided? Estimate the percentage et sales or receipts in 1992 (item 5) (e.g., gasoli repairs 10%, oil 5%).	sold, oduced, ach was	(5) Sales of other merchandise 9 (6) All other receipts from customers (Include
	Source	Percent	ballrooms, convention halls, laundry, valet, and other services.)
			%       (7) TOTAL (Sum of lines 1 through 6 should equal 100%)       100       9         b.       Were any receipts OTHER than from customers received by this establishment in its business operation? (Include rental and commission receipts from operators of leased departments,
			% concessions and stores, and coin-operated machines.)
		c	Mil.         Thou.         Dol.           %         416         1
			415 1 YES - What was the amount?
			<u>%</u> 2 □ NO
			<sup>%</sup> Item 12. NUMBER AND TYPE OF ACCOMMODATIONS
			<ul> <li>8. What was the number of rooms, units, or quarters primarily rented as transient, as of December 31, 1992? The number of guestrooms, units, or quarters consists of the number which can be rented as single units. Suites of rooms which cannot be subdivided should be counted as a single unit.</li> </ul>
			b. Were more than half of guestroom or unit rental receipts in 1992 from transient guests?
		c	$\frac{\%}{2 \square NO}$
тот	AL	100 9	%

FORM OA-9863

Item 13. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION				Item 13. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION (Continued)						
		ompleting this item.		c.		any operate at mor		ne loca	tion	
a. Is this company owned or controlled by another	ADDRESS, AND	G OR CONTROLLING COMP ) ZIP CODE			least o NOT b locatio	ons which are not sta one employee covered on considered separat ons with data reported - List additional locat	d by this l e. Include d for the r ions belo	El Numb data fo main loc w and p	er shoul r these ation. rovide th	d
company? 425						information request continue in REMAR	ted. If mo KS (item	re space 14).	is neede	∂d,
1 ☐ YES →	Address				2 🗌 NO –	Skip to item 15				
2 🗌 NO			F		Name, address,	and election district	1992	Mil.	Thou.	Dol.
								430	1	
		426							1	1
	El Number (9	diaits)		1			Sales		1	 
b. Does this	ENTER OWNED	OR CONTROLLED COMPAN	NY NAME,		Kind-of-business	description	-	431	1	I
company own or	ADDRESS, AND	D ZIP CODE					Annual		1	1
control any other							payroll		I	1
company or	Name				Name, address,	and election district		432		1
companies?	Address								I	I.
							Sales		1	1
$1 \bigsqcup YES \longrightarrow$ 2 \square NO				2				433	1	1
		420			Kind-of-business	description	1		1	1
		428					Annual		1	1
	El Number (9	digits)					payroll			
		his report is substantial	ly accurate and	has	s been prepare					
Print name of perso				by	riod covered this report $\rightarrow$	FROM: Month   Yea	r T	O: Mon	ith 'Ye	ear
Telephone>	441 Area code	e 442 Number	443 Extension	Pre	parer's signature	•		D	ate	
FORM 0A-9863			Paga							

by law (tit law, your confident Census en statistical	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM <b>OA-98883</b> Response to this inquiry is required to 13, U.S. Code). By the same report to the Census Bureau is tial. It may be seen only by sworn ployees and may be used only for purposes. The law also provides that and in your files are immune from tess.		OMIC CENS			roval Expires	<u>12/31/93</u>
instru the qu availa	e read the accompanying ctions before answering lestions. If records are not ble, reasonable estimates ceptable.						
990	Census use only 991 992	(Please correct e	errors in the name	e of this establishme	ent, addre	ss, or ZIP Cc	ode)
give a center neare NOTE	location cannot be described by numb s much information as possible such a , street intersection, highway number, st town. E – P.O. boxes or rural routes are not p per and street or location description	as name of shopping or distance from hysical locations.	se 3	emporarily or asonally inactive ased operation – <i>Give</i> old or leased to anothe perator – <i>Give date —</i> <i>VD enter name, etc., b</i> v owner or operator	e date → er	ZIP Code	Year
<b>b. On w</b> 051	hat island is this establishment ph	ysically located?	Which of t	IZATIONAL STATUS he following best de his establishment at Iv ONE box.	scribes th	e organizati f 1992?	onal
<b>Do yo</b> (It wo 1992 o	MPLOYER IDENTIFICATION NUMBE <b>but have an Employer Identification</b> uld be used to report Social Security w on form 941SS.) 1 YES – Enter current	(EI) Number? vithholding in	103 1 □ Inc 2 □ Pa 3 □ Co 4 □ Go	dividual proprietorship orporation overnment – <i>Specify</i> her – <i>Specify</i>			
	El Number (9 digits)→ 2 □ NO 3 □ Unknown 0PERATIONAL STATUS		Item 5. CITIZEN Which of th status of th in 1992? M		scribes th	e citizenshir	)
firm e	many months during 1992 did this or organization actively operate th lishment?	Number of months 100	2 🗌 U 3 🗌 Ja 4 🗌 Pl 5 🗌 Ku	.SOther apan hillipines			

YOUR RESPONSE IS REQUIRED BY LAW.

HOW TO REPORT DOLLAR REPORT	Mil- lions (000)		Thou- sands (000)		Dol- lars (000)
<i>FIGURES</i> \$1,125,628 as →	•	1		126	
Item 6. DOLLAR VOLUME OF BUSINESS	5				
	M	il.	Т	hou.	Dol.
What was the total dollar volume	010				
of merchandise sales and other operating receipts for this establishment in 1992?					
Item 7. PAYROLL		Mi	Ι.	Thou	. Dol.
a. What was the total ANNUAL payroll, before deductions for this establishment in 1992?		030			
b. What was the FIRST QUARTER (January–March) payroll, before deductions?		031			   
Item 8. EMPLOYMENT				Numb	er
a. How many EMPLOYEES (full- and part-time) were on your payroll during the pay period which included March 12, 1992?		032			
b. How many PROPRIETORS and PARTNERS worked 15 or more hours during the week which included March 12, 1992?		036			
c. How many UNPAID FAMILY members worked 15 or more hours during the week which included March 12, 1992?		039			
Item 9. KIND OF BUSINESS OR ACTIVI	τv				
What was the PRINCIPAL kind of busine in 1992 (or activity by which this establi trade or public)? Mark (X) only ONE box.				nown	
Agricultural service or production				070 [	0100
Mining			• •	C	1000
Construction				Г	<b>-</b>
General building contractor				· · L	1500
Heavy construction, exclude building	•••	• • •	• •	· · L	
Special trade contractor	•••	• • •	• •	•• L	1700
Manufacturing – Specify primary materials	con	sume	d.	[	2000
Travel agencies and other passenger transportation services				-	_
Water transportation services				-	4499
Travel agencies				•• L	4724
Tour operators				· · L	4725
Other services in arranging passenger tran	nspoi	τάτιο	n.	· · L	4729
Wholesale trade					
Durable goods				_	_
Nondurable goods			 	[ [	5000 5100
6			 	[ [	=
Nondurable goods			 	[ [	=
Nondurable goods	 	 	· · · · ·	[ [ [	5100
Nondurable goods	· · · ·	· · · ·	· · · · · ·		5100
Nondurable goods	· · · ·	· · · ·	· · · · · · · · ·		5100 5251 5411
Nondurable goods	· · · ·	· · · ·	· · · · · · · · · · · · · · · · · · ·		5100 5251 5411 5421
Nondurable goods	· · · ·	· · · ·	· · · · · · · ·		5100 5251 5411 5421 5441

# Item 9. KIND OF BUSINESS OR ACTIVITY (Continued)

## **Retail trade (Continued)**

Clothing store, men's and boys'	070	5611
Women's clothing store		
Family clothing store		5651
Shoe store		5661
Furniture store		5712
Eating place (restaurant, cafeteria, etc.)		5812
Drinking place (tavern, bar, nightclub, etc.)		5813
Drug store (prescriptions filled)		5912
Liquor store		5921
Jewelry store		5944
Gift, novelty, and souvenir store		5947
Other kind of retail business – <i>Specify</i>		5999

#### Finance, insurance, and real estate

Personal credit institutions	6141
Insurance agent, broker, or related services	6411
Operator of apartment building(s)	6513
Residential mobile home park operator	6515
Real estate agent and manager	6531
Subdivider and developer, except cemeteries	6552
Other kind of finance, insurance, or real estate - Specify .	6999

#### Services

Hotel or motel	7011
Coin-operated laundries and drycleaning	7215
Beauty shop	7231
Barber shop	7241
Funeral services	7261
Truck rental and leasing, without drivers	7513
Passenger car rental	7514
Passenger car leasing	7515
Utility trailer and recreational vehicle rental	7519
Automotive paint and body shop	7532
Automotive muffler shop	7533
Automotive transmission repair shop	7537
Other automotive repair shop	7539
Radio and television repair shop	7622
Refrigeration and air conditioning service	7623
Other electrical and electronic repair shop	7629
Video tape rental	7841
Other amusement and recreation services	7999
Medical doctor's office, including clinics	8011
Dentist's office, including orthodontist	8021
Legal services, including legal aid	8111
Management services	8741
Business consultant	8748
Private household (domestic help, e.g., cooks, etc.)	8811
Other business or activity – <i>Specify</i>	8999
	CODE

Form OA-9883

Item 10. CLASS OF CUSTOMER			lte		RSHIP, CONTROL, A	ND LOO	CATION	IS	
To whom did this establishment sell most of you products or provide your services in 1992?	r				ERATION Ictions before completii	ng this ite	əm.		
310 1 ☐ To the general public (household consumer and individuals) 2 ☐ To retail or wholesale establishments	S		a.	ls this company owned or controlled	ENTER OWNING OR CC ADDRESS, AND ZIP CO	DE			
3 To construction contractors				by another company?	Name				
4 To institutional, industrial, commercial, professional, government, and farm users				425	Address				
$5 \square$ Other customers – Specify $\swarrow$				$1 \square YES \rightarrow$					
				2 🗌 NO					
				2		426			
		_			El Number (9 digits)		-		
HOW TO REPORT Report percentages as whole numbers	Percent		b.	Does this company	ENTER OWNED OR CON ADDRESS, AND ZIP CO	DE	D COMP	ANY NA	MIE,
PERCENTS <b>EXAMPLE:</b> Report 38.76% as	39	%		own or control any					
Item 11. SOURCE OF SALES OR RECEIPTS	Percent			other	Name				
a. What was the estimated percentage of total 1992 sales or receipts (item 6) for products	331			company or companies?	Address —				
manufactured at this location?		%		427	Address				
b. What were the principal lines of merchandise	sold, types of			$_1\square$ Yes $\rightarrow$					
construction work done, products produced, provided? Estimate the percentage each was of th	e sales or recei	ots		2 🗌 NO		428			
in 1992 (item 6) (e.g., gasoline 85%, auto repairs 10	)%, oil 5%).				El Number (9 digits)	-	-		
Source	Percent		C.	Did this com during 1992	pany operate at more	e than o	ne loca	tion	
		%		NOTE – Loca least	tions which are not stat one employee covered be considered separate tions with data reported	by this I	El Numl	ber shou	uĺd
		%		429 1 🗌 YES	5 – List additional locati information request continue in REMARI	ed. If mo	re space	provide e is nee	the ded,
				2 🗌 NO	– Skip to item 14				
		%		Name, address	s, and island	1992	Mil.	Thou	. Dol.
							430	I	I
		%						I I	
			1			Sales	431	1	
		%		Kind-of-busine	ss description		431	I I	I
						Annual		1	
		%		Name, address	and island	payroll	432	1	-i
				Name, address			102	1	I
		%						I	I
			2			Sales		1	1
		%	2	Kin die Chinik	- description	-	433	1	i I
				Kind-of-busine	ss description			1	1
TOTAL	100	%				Annual payroll		I	I I
<b>Item 13.</b> REMARKS – <i>Please use this space for a</i>	any explanatio	ons ti	hat n	nay be essent	ial in understanding :	the repo	orted d	ata.	l
Item 14. CERTIFICATION – This report is substa	ntially accurat	e an	d ha	s been nrener	ed in accordance wit	h the in	structio	ons	
Print name of person to contact regarding this report	accurat	5 011			FROM: Month Year		O: Mor		Year
			by	riod covered this report →					
Telephone	443 Extens	sion	Pre	parer's signatu	re			ate	
FORM 0A-9883		Pac							

FORM <b>OA-9851</b>		U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	A. IDEN	A. IDENTIFICATION	OFFICE USE ONLY
	<b>RECORD BOOK</b>		1. Geographic Area		
	1992 ECONOMIC CENSUS	USES	2. ED number		
NOTICE – Response to this inqui is confidential. It may be seen provides that copies retained in y	NOTICE – Response to this inquiry is required by law (title 13, U.S. Code). By is confidential. It may be seen only by sworn Census employees and may be provides that copies retained in your files are immune from legal process.	By the same law, your report to the Census Bureau be used only for statistical purposes. The law also	3. Enumeration District (Is	3. Enumeration District (Island, election district, or place)	
		<b>B. ASSIGNMENT INFORMATION</b>			
Responsible Personnel	Name	Address	Telephone number	Crew Leader District number	Date assigned
	(1)	(2)	(3)	(4)	(5)
1. Crew leader					
2. Interviewer					
3. Reassignment interviewer					
	C. CREW LEADER AND OFFICE USE	USE ONLY	Notes		
	Date	te Initials			
1. First field review					
2. Final field review					
3.					
NOTICE TO FINDER - This book is ti	NOTICE TO FINDER - This book is the property of the United States Government. Please mail to the address shown below. Postage is prepaid.	nail to the address shown below. Postage is prepaid.			
FROM: (Finder's name and address)		NO POSTAGE			
		IF MAILED			
		IN THE UNITED STATES			
	<b>BUSINESS REPLY N</b>	MAIL			
	FIRST-CLASS MAIL PERMIT NO. 99109 WASHIN	WASHINGTON, DC			
	POSTAGE WILL BE PAID BY BUREAU OF THE CENSUS	CENSUS			
	US BUREAU OF THE CENSUS				
	OUTLYING AREAS STATISTICS STAFF AGRICULTURE DIVISION	TAFF			
	WASHINGTON DC 20277-9109		"Good <i>(morning, aftern</i> United States Bureau are collecting informs I speak to the owner o	"Good (morning, afternoon, evening). I am (give your name) from the United States Bureau of the Census. Here is my identification. We are collecting information for the 1992 Economic Censuses. May I speak to the owner or manager, please?"	r name) from the dentification. We c Censuses. May

FOF (9-2	FORM <b>DA-9852</b> (9-22-92)			LISTING SHEET 1992 ECONOMIC CENSUSES	SHEET C CENSUSES		2	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS
Line number	NUMBER AND STREET NAME (or location description)	What is the name of this establishment? and What is the name of the owner?	Was this establishment in operation at any time during 1992? (4) YES   NO Mark (X),   Mark (X), then go to   end column (5)   interview,	CENSUS FILE NUMBER (CFN) If "YES" in column (4), enter CFN and complete a report form.	CALLBACKS Enter day and time of next call, telephone number, notes, etc.	CASES REFERRED TO CREW LEADER <i>To be completed</i> <i>by supervisor</i> (7)	DATE CASE DATE CASE COMPLETED Enter date only after you have answered all required completed report feted	REMARKS
(1)	(2)	(3)	and then go to column (8)	(5)	(6)	Date I Action taken (a) I (b)	required. (8)	(6)
			·					

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM MB-1	1992 ECONOMIC CENSUSES SURVEY OF BUSINESS OWNERS AND SELF-EMPLOYED PERSONS OMB No. 0607-0767: Approval Expires 04/30/95		
DUE DATE: 30 DAYS AFTER RECEIPT OF FORM	In correspondence pertaining to this report, please refer to this Census File Number (CFN)		
If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001	MB-1		
Toll-free assistance, 8 a.m. to 8 p.m., eastern time. Monday through Friday: 1–800–233–6136			
Please read the instructions before answering the questions.			
CENSUS USE           901         902         903         904			
<ul> <li>The Census Bureau conducts an economic census every 5 years. The census provides our single most important measure of economic performance and basic information about your industry and geographic area for use by the business community and government agencies.</li> <li>The 1992 Survey of Business Owners and Self-Employed Persons is part of the economic census. We made a concerted effort to lessen your reporting burden and, at the same time, meet the needs of the government and the public for information. On the back of this form are answers to the most frequently asked questions regarding this survey. Please read all instructions before completing the form.</li> <li>Title 13, United States Code, requires your response to this survey. By the same law, your response is confidential. Only sworn Census Bureau employees will see your form, and the information will be used only for statistical purposes.</li> <li>Thank you for your cooperation.</li> </ul>			
Sincerely, Marry A. Scarr Deputy Director Bureau of the Census			
NOTE — Be st	ure to make a copy of this form for your records.		

# • INSTRUCTIONS — Please read •

The purpose of this questionnaire is to collect information about the sex, race, and ethnic background of business owners in the United States for the year 1992. The business owner(s) must complete this questionnaire even if the business has since been sold, reorganized, or discontinued. (Complete this form only for the primary business owner; if a husband and wife	<b>INDIVIDUAL PROPRIETORSHIP</b> — An unincorporated business owned by an individual. The business may be the only occupation of an individual or the secondary activity of an individual who works for someone else.
own the business EQUALLY, complete for both owners.) Data provided by you will be used only for statistical purposes and will be kept strictly confidential. The race and ethnic categories described in items 3 and 4 have been established by the Office of Management and Budget to assure uniform reporting to all Federal agencies.	<b>SELF-EMPLOYED</b> — Persons in professions such as lawyers or physicians, direct salespersons (party or door-to-door salespersons), other independent commission workers (insurance and real estate salespersons, etc.), independent contractors (truckers, private duty nurses, etc.) and investors.
IMPORTANT — How to Fill Out This Form	ITEM 2 — OWNERSHIP OF BUSINESS
	If there are two names in the mailing address of this questionnaire, is this business owned EQUALLY by both parties?
Please use a #2 black lead pencil .         Most questions ask you to CHECK         (✔) IN THE BOX, or to print the         information. See EXAMPLE	<ul> <li>Yes — Complete items 3 and 4</li> <li>No — Complete item 3 for the primary business owner</li> </ul>
<b>ITEM 1</b> — SCHEDULE C STATUS Your selection in this survey was based on	If there is one name in the mailing address, COMPLETE item 3
administrative records information which indicated that you claimed income from some business or self-employment activity in 1992. Please review your 1992 tax return and check the appropriate box below.	ITEM 3 — PRIMARY OR 1ST LISTED BUSINESS OWNER Complete items a, b, and c below for the primary (or only) business owner or self-employed person listed on the address label. If the business is owned EQUALLY by husband and wife, complete the items for the first person listed.
□ I filed a Schedule C claiming business or self-employed income. <i>Please SKIP to item</i> 2 and complete the questionnaire.	a. SEX ────
☐ The business activity from the Schedule C was reorganized to another legal form of organization during 1992. NOTE — For the purposes of this survey, your business will still be included in the overall number of businesses active in 1992, but only as a part year activity. Please SKIP to item 2 and complete the questionnaire to reflect the business activity reported on your 1992 Schedule C.	<ul> <li>It is important to answer BOTH questions b and c.</li> <li>b. SPANISH/HISPANIC/LATINO BACKGROUND OR ORIGIN — Refers to a person of Mexican, Cuban, Puerto Rican, Hispanic Latin American, or other Spanish/Hispanic/Latino origin or culture, regardless of race.</li> </ul>
<ul> <li>I filed a Schedule C for 1992, but the income claimed was from one of the following sources: interest or dividend income; beneficiary income from a trust; retirement plan payments (including IRAs); deferred wages; longevity payments; disability or workman's compensation income; or vacation or bonus payments from an employer for which you had to pay withholding taxes. This income is not within the scope of our survey. <i>Please SKIP to item 5 and return the questionnaire.</i></li> <li>I did not file a Schedule C with my 1992 1040 tax return. <i>Please SKIP to item 5 and return the questionnaire.</i></li> </ul>	<ul> <li>Non-Hispanic/Non-Latino/Non-Spanish</li> <li>Cuban</li> <li>Mexican/Mexican-American/Chicano</li> <li>Puerto Rican</li> <li>Hispanic Latin American (e.g., Panamanian, Peruvian, Venezuelan, Ecuadorian, Guatemalan, etc.) — Specify country <i>▼</i></li> <li>31</li> <li>Spaniard (origin from Spain)</li> <li>Other Spanish/Hispanic/Latino origin or culture — Specify <i>▼</i></li> </ul>
Page 2	FORM MB-1 (4-28-93

ITEM 3 — PRIMARY OR 1ST LISTED BUSINESS OWNER — Continued	ITEM 4 — 2ND LISTED BUSINESS OWNER — Continued
<b>c.</b> RACE — If you are of mixed racial background, choose the category with which you most closely identify.	b. SPANISH/HISPANIC/LATINO BACKGROUND OR ORIGIN — Refers to a person of Mexican, Cuban, Puerto Rican, Hispanic Latin American, or other Spanish/Hispanic/Latino origin or culture, regardless of race.
<ul> <li>AFRICAN AMERICAN/BLACK/NEGRO — A person having origins (ancestry) in any of the Black racial groups of Africa or the Caribbean.</li> <li>ASIAN OR PACIFIC ISLANDER — A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.</li> <li>Asian Indian (from Vietnamese the country India) Filipino</li> <li>Chinese Hawaiian Japanese Other Asian or Pacific Islander — <i>Specify Z</i></li> <li>33</li> <li>INDIAN (AMERICAN) OR ALASKA NATIVE — A person having origins (ancestry) in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.</li> <li>Aleut Eskimo</li> <li>American Indian — <i>Specify enrolled or principal tribe Z</i></li> </ul>	<ul> <li>Non-Hispanic/Non-Latino/Non-Spanish</li> <li>Cuban</li> <li>Mexican/Mexican-American/Chicano</li> <li>Puerto Rican</li> <li>Hispanic Latin American (e.g., Panamanian, Peruvian, Venezuelan, Ecuadorian, Guatemalan, etc.) — Specify country v</li> <li>41</li> <li>Spaniard (origin from Spain)</li> <li>Other Spanish/Hispanic/Latino origin or culture — Specify v</li> <li>42</li> </ul> 6. RACE — If you are of mixed racial background, choose the category with which you most closely identify.
<ul> <li>WHITE — A person having origins (ancestry) in any of the original peoples of Europe, North Africa, or the Middle East.</li> <li>OTHER — A person having origins in a racial group not listed above.</li> <li>☐ Other race — Specify ¥</li> </ul>	<ul> <li>AFRICAN AMERICAN/BLACK/NEGRO — A person having origins (ancestry) in any of the Black racial groups of Africa or the Caribbean.</li> <li>ASIAN OR PACIFIC ISLANDER — A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.</li> <li>Asian Indian (from Vietnamese the country India) Filipino</li> <li>Chinese Hawaiian</li> <li>Japanese Other Asian or Pacific Islander — <i>Specify</i> ✓</li> <li>43</li> <li>INDIAN (AMERICAN) OR ALASKA NATIVE — A person having origins (ancestry) in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.</li> </ul>
ITEM 4 — 2ND LISTED BUSINESS OWNER	- 🗌 Aleut 🗌 Eskimo -
Complete items a, b, and c below for the 2nd person listed on the address label if the business is owned EQUALLY by husband and wife.	<ul> <li>American Indian — Specify enrolled or principal tribe 44</li> <li>WHITE — A person having origins (ancestry) in any of the original peoples of Europe, North Arise, and he Middle Seat</li> </ul>
a. SEX	North Africa, or the Middle East. OTHER — A person having origins in a racial group not listed above. ☐ Other race — <i>Specify</i> <del>∠</del>
<i>It is important to answer BOTH questions b and c.</i>	45

Page 3

FORM MB-1 (4-28-93)

# QUESTIONS AND ANSWERS REGARDING THE 1992 SURVEY OF BUSINESS OWNERS AND SELF-EMPLOYED PERSONS

## • Why is this survey being taken?

To help provide valuable economic data about businesses owned by minorities and women as well as comparable data for businesses owned by nonminorities. This survey is part of the economic census program, which the Census Bureau is required to conduct every 5 years by law (Title 13 of the United States Code). The Census Bureau combines data from this survey with data from the other economic censuses and presents them in the Survey of Minority-Owned Business Enterprises and Women-Owned Businesses publication series. The published data include number of firms, sales and receipts, paid employees, and annual payroll and are presented by geographic area, industry, firm size, and form of organization.

#### Who uses the survey data?

Persons and institutions in both the public and private sectors extensively use these survey data. Accurate data regarding business ownership are critical to informed decision making by Federal, State, and local governments regarding business assistance programs. In addition, private companies and trade associations use the data to analyze industry trends; educators use them in teaching and research; and the media use them in news articles.

#### • Why was I selected for this survey?

You are part of a small sample of businesses and self-employed persons that we randomly selected to represent your type of business and geographic area. The use of a sample substantially limits the reporting burden on small businesses and reduces the survey cost; however, it also greatly increases the importance of receiving a report from each business selected.

#### · What businesses are included in this survey?

Businesses were eligible to be selected for this survey if they reported any business activity on the 1992 Internal Revenue Service tax Form 1040 (Schedule C), "Profit or Loss from Business" (Sole Proprietorship). Many self-employed individuals do not consider the activity reported on their Schedule C to be an actual business (for example, babysitter, sales representative, construction contractor, and so forth). Any activity reported on Form 1040 (Schedule C) meets the definition of a business for purposes of this survey.

#### Can I be paid for completing this report?

No. The law (Title 13 of the United States Code) that directs the Census Bureau to conduct the economic census and requires firms to report does not authorize payment for completing census reports. In addition, no funds have been appropriated for this purpose.

#### Is each survey response kept confidential?

Yes. By law, the Census Bureau cannot give individual responses to anyone (including government agencies) for any purpose. Survey responses are immune from legal action and exempt from the provisions of the Freedom of Information Act. Census Bureau publications summarize responses so that the confidentiality of respondents and their business activities is fully protected.

• Why is the Census Bureau asking questions about the sex, race, and ethnicity of business owners? These business owner characteristics are important for assistance program officials, industry organizations, economic and social analysts, and entrepreneurs. They are important to understanding conditions of business success and failure, showing census-to-census changes in business performances, and comparing minority/nonminority- and women/men-owned businesses.

## • Who establishes the race and ethnic categories listed on this form?

The racial and ethnic categories and definitions used in this survey are consistent with the Office of Management and Budget's Circular No. A-46, "Revised Race and Ethnic Standards for Federal Statistics and Administrative Reporting," issued May 12, 1977. These standards were developed by both the Executive Branch and Congress.

- Why is the Census Bureau asking questions now about 1992? The complete sample for this survey cannot be selected until all tax records for 1992 are available. Use of these tax records delays the mailout of this survey, but allows us to reduce significantly the number of survey questions and the survey cost.
- How can I get more information?

Call 1–800–233–6136 Monday through Friday, 8 a.m. to 8 p.m. eastern time. Our telephone staff can answer survey questions as well as provide you with additional forms and instructions.

We estimate that it will take 10 minutes or less to complete this questionnaire. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Administration, Paperwork Reduction Project 0607-0767, Room 3104, FB 3, Bureau of the Census, Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0607-0767, Washington, DC 20503.

## **ITEM 5** — CERTIFICATION — *Please print name of person responsible for completing this report.*

Name	Telephone nun	nber <i>(In</i>	clude Area Code)
Signature	•		Date

FORM MB-1 (4-28-93)

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM MB-2	1992 ECONOMIC CENSUSES SURVEY OF BUSINESS OWNERS			
DUE DATE: 30 DAYS AFTER RECEIPT OF FORM	In correspondence pertaining to this report, please refer to this Census File Number (CFN)			
If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:	MB-2			
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001				
Toll-free assistance, 8 a.m. to 8 p.m., eastern time. Monday through Friday: 1–800–233–6136				
Please read the instructions before answering the questions.				
CENSUS USE           901         902         903         904				
	Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown.			
<ul> <li>Dear Respondent:</li> <li>The Census Bureau conducts an economic census every 5 years. The census provides our single most important measure of economic performance and basic information about your industry and geographic area for use by the business community and government agencies.</li> <li>The 1992 Survey of Business Owners is part of the economic census. We made a concerted effort to lessen your reporting burden and, at the same time, meet the needs of the government and the public for information. On the back of this form are answers to the most frequently asked questions regarding this survey. Please read all instructions before completing the form.</li> <li>Title 13, United States Code, requires your response to this survey. By the same faw, your response is confidential. Only sworn Census Bureau employees will see your form, and the information will be used only for statistical purposes.</li> <li>Thank you for your cooperation.</li> <li>Sincerely,</li> <li>Marry A. Scarr Beputy Director Beyuty Director Bureau entry of the Census</li> </ul>				
NOTE — Be su	re to make a copy of this form for your records.			

<ul> <li>INSTRUCTIONS</li> </ul>	5 — Please read ●
The purpose of this questionnaire is to collect information about the sex, race, and ethnic background of business owners in the United States for the year 1992. The business owner(s) must complete this questionnaire even if the business has since been sold, reorganized, or discontinued. Data provided by you will be used only for statistical purposes and will be kept strictly confidential. The race and ethnic categories described in item 3 have been established by the Office of Management and Budget to assure uniform reporting to all Federal agencies.	IMPORTANT — How to Fill Out This Form         Please use a #2 black lead         pencil. Most questions ask         you to CHECK ( ✓ ) IN THE         BOX, or to print the         information.         See EXAMPLE
ITEM 1 — LIMITED PARTNERSHIP — A limited par composed of at least one general partner and one or Is your business a limited partnership? —	more limited partners.
ITEM 2 — NUMBER OF PARTNERS a. How many partners are there in your firm?	<ul> <li>b. For limited partnerships, how many general partners are there in your firm?</li> <li> <ul> <li> <li> <li> <li> <li> <li> </li> <li> </li></li></li></li></li></li></ul> </li> <li> <ul> <li>b. For limited partnerships, how many general partners are there in your firm?</li> </ul> </li> <li> <ul> <li> <li> <ul> <li> <li> <li> </li></li></li></ul> </li> <li> <ul> <li>b. For limited partnerships, how many general partners are there in your firm?</li> </ul> </li> <li> <ul> <li> <ul> <li> <li> <ul> <li> <li> <ul> <li> <li> </li></li></ul> </li> </li></ul> </li> </li></ul> </li> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> </li></ul> </li> </ul> </li> </ul> </li> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> <ul> <li> &lt;</li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></li></ul></li></ul>
<ul> <li>ITEM 3 — DESCRIPTION OF PARTNERS</li> <li>Complete items a, b, and c, checking (✓) best describes the majority of partners in check (✓) the ONE box which best described Office of Management and Budget to assu agencies.</li> <li>a. SEX</li> </ul>	your firm. For limited partnerships, ibes the general partner(s) in your firm. on page 3 have been established by the

ITEM 3 — DESCRIPTION OF PARTNERS — Contin	nued
Complete items b and c, checking ( 🗸 ) the ON the majority of partners in your firm. For limi EACH category which best describes the gen	NE box in EACH category which best describes ted partnerships, check ( ✔) the ONE box in eral partner(s) in your firm.
the majority of partners in your firm. For limi	ted partnerships, check ( ✓ ) the ONE box in eral partner(s) in your firm. c. RACE — Check ( ✓ ) ONE box only. AFRICAN AMERICAN/BLACK/ NEGRO — A person having origins (ancestry) in any of the Black racial groups of Africa or the Caribbean. ASIAN OR PACIFIC ISLANDER — A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. Asian Indian (from the country India) Chinese Japanese Korean Vietnamese Filipino Hawaiian Other Asian or Pacific Islander — <i>Specify</i> $\overline{z}$ INDIAN (AMERICAN) OR ALASKA NATIVE — A person having origins (ancestry) in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition. Aleut Eskimo MHITE — A person having origins (ancestry) in any of the original peoples of Europe, North Africa, or the Middle East. OTHER — A person having origins in a racial group not listed above.
	• Other race — Specify $\vec{k}$
ITEM 4 — CERTIFICATION — Please print name of Name	Telephone number (Include Area Code)
Signature	Date

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM MB-3	1992 ECONOMIC CENSUSES SURVEY OF BUSINESS OWNERS OMB No. 0607-0767: Approval Expires 04/30/95			
DUE DATE: 30 DAYS AFTER	In correspondence pertaining to this report,			
<b>RECEIPT OF FORM</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to: <b>BUREAU OF THE CENSUS</b>	please refer to this Census File Number (CFN) MB-3			
1201 East 10th Street Jeffersonville, IN 47134-0001				
Toll-free assistance, 8 a.m. to 8 p.m., eastern time. Monday through Friday: 1–800–233–6136				
Please read the instructions before answering the questions.				
CENSUS USE           901         902         903         904				
	Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown.			
<ul> <li>Dear Respondent:</li> <li>The Census Bureau conducts an economic census every 5 years. The census provides our single most important measure of economic performance and basic information about your industry and geographic area for use by the business community and government agencies.</li> <li>The 1992 Survey of Business Owners is part of the economic census. We made a concerted effort to lessen your reporting burden and, at the same time, meet the needs of the government and the public for information. On the back of this form are answers to the most frequently asked questions regarding this survey. Please read all instructions before completing the form.</li> <li>Title 13, United States Code, requires your response to this survey. By the same law, your response is confidential. Only sworn Census Bureau employees will see your form, and the information will be used only for statistical purposes.</li> <li>Thank you for your cooperation.</li> <li>Sincerely,</li> <li>Mary A. Scarr</li> <li>Bepty Director</li> <li>Bureau of the Census</li> </ul>				
NOTE — Be su	re to make a copy of this form for your records.			

<ul> <li>INSTRUCTIONS</li> </ul>	— Please read •
The purpose of this questionnaire is to collect information about the sex, race, and ethnic background of business owners in the United States for the year 1992. The business owner(s) must complete this questionnaire even if the business has since been sold, reorganized, or discontinued. Data provided by you will be used only for statistical purposes and will be kept strictly confidential. The race and ethnic categories described in item 2 have been established by the Office of Management and Budget to assure uniform reporting to all Federal agencies.	IMPORTANT — How to Fill Out This Form         Please use a #2 black lead         pencil. Most questions ask         you to CHECK ( ✓ ) IN THE         BOX, or to print the         information.         See EXAMPLE         No
ITEM 1 — NUMBER OF SHAREHOLDERS	
How many shareholders were there in your firm as of December 31, 1992?	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
<b>ITEM 2</b> — DESCRIPTION OF SHAREHOLDERS	
Complete items a, b, and c below, checking ( ✓, describes the majority of shareholders in your f race categories described below have been esta Budget to assure uniform reporting to all Feder a. SEX — Check (✓) ONE box.	firm as of December 31, 1992. The ethnic and ablished by the Office of Management and

ITEM 2 — DESCRIPTION OF SHAREHOLDERS — Continued	ITEM 3 — STOCK OWNERSHIP (as of December 31, 1992)			
<b>c.</b> RACE — Check (✔) ONE box only.	Responses to a and b may be the same for some corporations.			
<ul> <li>AFRICAN AMERICAN/BLACK/ NEGRO — A person having origins (ancestry) in any of the Black racial groups of Africa or the Caribbean.</li> <li>ASIAN OR PACIFIC ISLANDER — A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.</li> <li>Asian Indian (from the country India)</li> <li>Chinese</li> <li>Japanese</li> <li>Korean</li> <li>Vietnamese</li> <li>Filipino</li> <li>Hawaiian</li> <li>Other Asian or Pacific Islander — Specify ∠</li> </ul>	<ul> <li>a. What percentage of your corporation's outstanding stock was owned by women?</li> <li>None 51%-74%</li> <li>1%-24% 75%-99%</li> <li>25%-49% 100%</li> <li>50%</li> <li>b. What percentage of your corporation's outstanding VOTING stock was owned by women?</li> <li>None 51%-74%</li> <li>1%-24% 75%-99%</li> <li>25%-49% 100%</li> <li>50%</li> <li>100%</li> <li>50%</li> </ul>			
INDIAN (AMERICAN) OR ALASKA NATIVE — A person having origins (ancestry) in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition. ☐ Aleut ☐ Eskimo ☐ American Indian — Specify enrolled or principal tribe 24	ITEM 4 — EXECUTIVE OFFICERS (as of December 31, 1992) What percentage of the Executive Officers of this corporation were women?			
<ul> <li>WHITE — A person having origins (ancestry) in any of the original peoples of Europe, North Africa, or the Middle East.</li> <li>OTHER — A person having origins in a racial group not listed above.</li> <li>Other race — Specify v</li> </ul>	ITEM 5 — BOARD OF DIRECTORS (as of December 31, 1992) What percentage of this corporation's Board of Directors were women?			
<b>ITEM 6</b> — CERTIFICATION — <i>Please print name o</i>				
Name	Telephone number (Include Area Code)			
Signature	Date			
Page 3	FORM MB-3 (4-28-93			

	U.S. DEPA		COMMERCE THE CENSUS	1992 ECONOMIC CENSUSES SURVEY OF CORPORATE OWNERSHIP OMB No. 0607-0765: Approval Expires 12/31/94
DUE DA	TE: 30	DAYS AF		In correspondence pertaining to this report, please refer to this Census File Number (CFN)
report, plea Bureau. In refer to the (CFN) print return you	e questions a ase call or w any commu e 11-digit Cer ted in the lab r completed	bout compl rite the Cens nication, be nsus File Nu rel to the rig report to:	eting this sus sure to mber ht. Please	WB-1
1201 Jeffei	AU OF TH East 10th rsonville, I	Street N 47134-	0001	
eastern 1–800–2	e assistance, time. Monda 233–6136 read the ins	ay through I	riday:	
	swering the	e question		
901	902	<b>S USE</b> 903	904	
				Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown.
	The Cer our sing about yc governm The 199 concerte of the gu to the m instructi <b>Title, 13</b> law, you form, an Thank yc Sincerel Harry A. Deputy	le most in pur indust nent ager 2 Survey ed effort to overnmen ost frequors befor s, <b>United</b> ir responsed the info ou for you y, Scarr	au condu mportant try and gencies. of Corpo to lessen and the uently ask te comple <b>States C</b> se is conf ormation ur cooper	cts an economic census every 5 years. The census provides measure of economic performance and basic information eographic area for use by the business community and rate Ownership is part of the economic census. We made a your reporting burden and, at the same time, meet the needs e public for information. On the back of this form are answers ed questions regarding this survey. Please read all sting the form. <b>ode, requires your response</b> to this survey. By the same idential. Only sworn Census Bureau employees will see your will be used only for statistical purposes. ation.
		NOTE	— Be su	re to make a copy of this form for your records.

<b>INSTRUCTIONS</b> —	Please read
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INSTRUCTIONS — Please read							
In 1988, Congress passed the Women's Business Ownership Act. This law recognized that uniform information on all corporations owned by women was not available. This act and the Census Bureau's commitment to close this data gap have led to this effort to collect information on all corporations owned and controlled by women. In							
corporations owned and controlled by women. In compliance with that law, this report form includes questions about the extent of women's involvement as shareholders in corporations, as officers of corporations, and as members of the Board of Directors of corporations. There are also questions pertaining to the corporation itself.	IMPORTANT — How to Fill Out This Form         Please use a #2 black lead pencil.         Most questions ask you to         CHECK ( ) IN THE BOX, or						
You must complete this questionnaire even if the business has been sold, reorganized, or	to print the information. No						
<b>ITEM 1</b> — PUBLIC OWNERSHIP (as of December 3 Was this firm a publicly traded corporation register Securities and Exchange Commission? Publicly tra the corporation was listed and traded on a stock e	ered with the aded means that exchange						
ITEM 2 — NUMBER OF SHAREHOLDERS AND SH a. How many shareholders did this corporation h None 5—9 20—35 50—99 1—4 10—19 36—49 100 or mo	ave? <b>b.</b> How many shares of stock were outstanding?						
ITEM 3 — STOCK OWNERSHIP (as of December 3 (Responses to a and b may be th a. What percentage of your corporation's outstanding stock was owned by women?							
<b>c.</b> For publicly traded corporations that cannot ar <i>(all others, please go to item 4)</i> —	nswer items 3a or 3b						
<ol> <li>What percentage of your corporation's outstanding stock was reported on Form 10-K? (Form 10-K lists all individuals who own more than 5 percent of your corporation's outstanding stock.)</li> </ol>	Image: None       50%       Image: 100%         Image: 1%-24%       51%-74%         Image: 25%-49%       75%-99%						
2. What percentage of the outstanding stock accounted for on Form 10-K was owned by women?	□ None       □ 50%       □ 100%         □ 1%—24%       □ 51%—74%         □ 25%—49%       □ 75%—99%						
Page 2	FORM WB-1 (4-28-93)						

ITEM 4 — EXECUTIVE OFFICERS (as of December 31, 1992)	ITEM 5 — BOARD OF DIRECTORS (as of December 31, 1992)
<ul> <li>Was this corporation's highest ranking executive officer a woman? A corpora- tion's highest ranking executive may have titles such as Chief Executive Officer (CEO) or President.</li> </ul>	<ul> <li>a. Did this corporation have a Board of Directors?</li> <li>Yes</li> <li>No — SKIP to item 6</li> </ul>
☐ Yes ☐ No	b. Was this corporation's Chairperson of the Board a woman?
b. What percentage of the Executive Officers of this corporation were women?	☐ Yes ☐ No
<ul> <li>None</li> <li>□ 50%</li> <li>□ 100%</li> <li>□ 1%-24%</li> <li>□ 51%-74%</li> <li>□ 25%-49%</li> <li>□ 75%-99%</li> </ul>	<ul> <li>c. What percentage of this corporation's Board of Directors were women?</li> <li>None 50% 100%</li> <li>1%-24% 51%-74%</li> <li>25%-49% 75%-99%</li> </ul>
c. What was the percentage of VOTING stock owned by women Executive Officers?	d. What was the percentage of VOTING stock owned by women Directors?
ITEM 6 — CORPORATE OWNERSHIP OR CONTR Did another company own more than 50 pe OR have the power to control the managem No Yes — Enter the following information on the owning	rcent of the voting stock of your corporation nent and policies of your corporation?
Name of owning or controlling company (Number and	Parent address I street, city, State, and ZIP Code) Employer Identification Number of owning or controlling company
<b>ITEM 7</b> — CERTIFICATION — <i>Please print name</i>	of person responsible for completing this report. Telephone number (Include Area Code)
Signature	Date
Page 3	FORM WB-1 (4-28-93)

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM ES-9100	1992 ECONOM					
E3-9100		OMB No. 0607-	0748: Approval Expires 06/30/94			
DUE DATE: FEBRUARY 15, 1993						
If you have questions about completing this report, please call or write the			ES-9100			
Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:						
BUREAU OF THE CENSUS 1201 East 10th Street Jeffersonville, IN 47134-0001						
For assistance, 8:00 a.m. to 5:00 p.m., eastern time, Monday through Friday:						
1–301–763–1758						
Please read the instructions before answering the questions.						
Census use						
901 902 903	Please co	rrect any errors in name, address, and	1 ZIP Code.			
YOUR RESPONSE IS REQUIRED BY LAW this questionnaire to answer the questions a IS CONFIDENTIAL. It may be seen only by retained in respondents' files are immune fr IMPORTAN	and return the report to the Cer Census Bureau employees and om legal process.	sus Bureau. By the same law, Y	ÕUR CENSUS REPORT			
<ul> <li><b>PURPOSE OF THIS FORM</b></li> <li>The purpose of this form is to obtain of firm.</li> </ul>	consolidated information for	domestic activities of your e	nterprise, company,			
WHAT IS AN ENTERPRISE?						
An enterprise is a business, service, o common ownership or control. An est	ablishment is a single physi	cal location at which busines	s is conducted.			
<ul> <li>It includes all establishments of subsidered establishments of firms which the entry policies.</li> </ul>						
An enterprise may vary in composition complex family of legal entities under	n ranging from a single lega common ownership or con	l entity (e.g., corporation, par rol.	tnership, etc.) to a			
For this report, the terms enterprise, c	ompany, and firm are used	interchangeably.				
WHAT SHOULD BE REPORTED?						
<ul> <li>Report for all establishments operated facilities such as warehouses, adminis subsidiaries.</li> </ul>						
<ul> <li>Include your enterprise's activities in a countries or U.S. possessions such as</li> </ul>						
Report consolidated information. Exclude domestic intra-enterprise transfers.						
	<ul> <li>Include all subsidiaries whether or not they are consolidated in your enterprise's books.</li> </ul>					
<ul> <li>Report for the 1992 calendar year. If calendar year records are not available, fiscal year reports for the period ending between October 31, 1992 and February 28, 1993 are acceptable. Be sure to complete every item. If book figures are not readily available, enter your best estimates. Enter "0" in items where appropriate.</li> </ul>						
Generally Accepted Accounting Princi	ples (GAAP) should be follow	ved when filling out this form				
HOW TO REPORT DOLLAR FIGURES	Value figures may be reported in <b>Example:</b> If a figure is <b>\$1,179,125,628</b> , report either	dollars or rounded to thousands.  • PREFERRED	Bil- lions         Mil- lions         Thou- sands         Dol- lars           (000)         1000         sands         lars           1         179         126         126           1         179         125         628			
PENALTY FOR FAILURE TO REPORT		-	$CONTINUE ON PAGE 2 \longrightarrow$			

HISTORY-1992 ECONOMIC CENSUS

_		· · · · · · · · · · · · · · · · · · ·
	Item A – SALES, OPERATING RECEIPTS, AND REVENUES DURING 1992	
	INCLUDE	
	<ul> <li>Sales, operating receipts, and revenues from taxable operations as well as total revenues from tax-exempt activities. Finance, Insurance,</li> </ul>	
	and Real Estate companies should include interest, dividends,	
	commissions and rental income as part of revenues.	
	<ul> <li>The value of assets sold under a capital lease agreement</li> <li>Export transfers to your foreign subsidiaries</li> </ul>	
	EXCLUDE	
	<ul> <li>Sales and other taxes collected and paid directly to government</li> </ul>	
	taxing agencies	
	<ul> <li>Domestic intra-enterprise transfers</li> </ul>	
	<ul> <li>Sales by foreign subsidiaries</li> </ul>	
	<ul> <li>Income from interest, except for Finance, Insurance, and Real Estate companies</li> </ul>	
	<ul> <li>Other nonoperating income (e.g., royalties)</li> </ul>	
		Bil. Mil. Thou. Dol.
		011
	1. Consolidated SALES, OPERATING RECEIPTS, AND REVENUE (net of taxes)	
	Item B – EMPLOYMENT AND PAYROLL DURING 1992	
	Include full and part-time employees and their pre-tax wages and salaries (gross earnings) as defined on Treasury Form 941, Employer's Quarterly Federal Tax Return, and Circular E, Employer's Tax Guide. Include salaried officers and executives of incorporated firms and payments made to them. Exclude	
	proprietors or partners of unincorporated firms.	
		Number
		032
	2. Number of paid EMPLOYEES for the pay period including March 12, 1992	
	Report all employees including persons on paid sick leave, paid holidays, and paid vacations.	
	Payroll:	
	Report gross earnings paid to employees prior to such deductions as employee's social security contributions, withholding taxes, group insurance premiums, union dues, and savings bonds. Gross earnings include all wages, salaries, commissions, dismissal pay, paid bonuses, vacation and sick leave pay, and the cash equivalent of compensation paid in kind. Include all employee contributions to any qualified pension plan, such as the 401(k) plan. Exclude employer's costs for fringe benefits.	
		Bil. Mil. Thou. Dol.
		031
	3. FIRST QUARTER payroll	
		030
	4. TOTAL ANNUAL payroll	
	Item C – EMPLOYER'S COSTS FOR FRINGE BENEFITS DURING 1992	
	(SUPPLEMENTAL LABOR COSTS)	Bil. Mil. Thou. Dol.
	5. Legally required programs	
	For example: Employer's social security tax, unemployment tax, workmen's compensation insurance, and state disability insurance programs.	
		102
	6. Voluntary programs	
	For example: Premiums on life insurance, hospital and medical plans, union negotiated benefits; welfare plans; and stock purchase plans.	
	negotiated benefits, wenare plans, and stock purchase plans.	
		103
	7. TOTAL FRINGE BENEFITS (SUM of lines 5 and 6)	
	(JUNI UI IIIIES J AIIU U/	

Page 2

FORM ES-9100

Please enter your 11-digit Census File Number CFN) from the address label on page 1		
tem D – INVENTORIES		
Report consolidated information concerning all of the inventor within the United States. The SUM of the value of inventories should be approximately equal to the TOTAL value of inventor differences.	of all domestic establishments of	of your enterprise
<ul> <li>INCLUDE</li> <li>Finished products; work in process; materials, suppli</li> <li>Inventories in transit for which your enterprise has tag</li> </ul>		ther fabrication
EXCLUDE		
<ul> <li>Unsold real estate for resale held by Finance, Insurar</li> <li>Inventories owned by others but held by your enterp</li> <li>Items not held for resale, such as fixtures, equipment</li> </ul>	rise	es (Include on line 33)
NOTE: Progress billings should not be deducted from the reported an	nounts.	
8. Did this enterprise have inventories at the end of 1991? 200 1 YES 2 NO - S	KIP to line 14	
<b>9. Total inventories at cost or market value for the year ending generally accepted accounting principles.</b> (For inventories at use the SUM of the LIFO value PLUS the LIFO reserve.)	LIFO cost,	Bil. Mil. Thou. Do
IO. Inventories reported on line 9 which are NOT subject to LIF for the year ending 1991		240
I1. Did this enterprise have inventories at LIFO cost at the end of 1991?220 1 $\Box$ YES 2 $\Box$ NO - S	KIP to line 14	
<b>12. Inventories which are subject to LIFO costing in 1991 (gros</b> (Report the SUM of LIFO value PLUS the LIFO reserve.)		230
I3a. LIFO reserves associated with the inventories on line 12 b. LIFO value of inventories reported on line 12 (net)	Bil.         Mil.         Thou.         Dol.           232         1         1         1           231         1         1         1	
PLEASE VERIFY – SUM of lines 13a and 13b should ex	qual line 12.	
SUM of lines 10 and 12 should equal14. Did this enterprise have inventories at the end of 1992? $250 \ 1 \square YES$ $2 \square NO - S$	KIP to Item E	
<b>15.</b> Total inventories at cost or market value for the year endir generally accepted accounting principles. (For inventories a use the SUM of the LIFO value PLUS the LIFO reserve.)	t LIFO cost,	Bil. Mil. Thou. Do
I6. Inventories reported on line 15 which are NOT subject to L for the year ending 1992	-	290       
17. Did this enterprise have inventories at LIFO cost at the end of 1992?       270 1 □YES 2 □NO - S	KIP to Item E	
<b>18.</b> Inventories which are subject to LIFO costing in 1992 (gros (Report the SUM of LIFO value PLUS the LIFO reserve.)		280
19a. LIFO reserves associated with the inventories on line 18	Bil. Mil. Thou. Dol.	
	281	
<b>b.</b> LIFO value of inventories reported on line 18 (net)		

Item E – DEPRECIABLE ASSETS AND CHANGES IN DEPRECIABLE ASSET ACCOUNTS DURING 1992								
Report the gross cost of assets for which depreciation or amortization account ordinarily maintained. Gross cost represents the acquisition cost to your enter	s are prise.							
INCLUDE								
<ul> <li>Depreciable assets (buildings, structures, machinery, equipment, etc.) a assets (special tools, film, etc.) as reported in Item H</li> <li>Cost of depreciable assets owned by this enterprise, but rented or lease an operating lease agreement</li> </ul>								
<ul> <li>Cost of all capitalized drilling and completion costs</li> </ul>								
Cost of depreciable assets obtained through capital leases								
EXCLUDE								
<ul> <li>Cost of land and depletable assets such as timber and mineral rights, in nonproducing leases, bonus payments, royalties and overriding minera (Include on line 33.)</li> </ul>	ncluding producing or al interests, and fee land							
<ul> <li>Current assets (inventories, cash, accounts receivable, real estate held assets (goodwill, patents, copyrights, etc.) (Include on line 33.)</li> </ul>	for resale, etc.) and intangible							
<ul> <li>Cost of depreciable assets in foreign countries and U.S. possessions (II)</li> </ul>	nclude on line 34.)							
Cost of depreciable assets leased to others under a capital lease agree	nent							
20. DEPRECIABLE ASSETS, at the END OF 1991								
a. Buildings and structures (exclude land)								
b. Machinery and equipment (include other depreciable assets, except land)	]							
21. TOTAL DEPRECIABLE ASSETS, at the end of 1991         (SUM of lines 20a and 20b)	Bil. Mil. Thou. Dol.							
22. TOTAL CAPITAL EXPENDITURES during 1992 including all costs that are capitalized to asset accounts and for which depreciation or amortization reserves are maintained (See Item H for further instructions)								
<b>23. OTHER ADDITIONS and acquisitions made (at fair market value) by your enterprise during 1992.</b> If mergers and acquisitions are not treated as a "pooling of interests," enter the fair market value on this line								
24. DEDUCTIONS from depreciable asset accounts for assets sold, retired, scrapped, destroyed, etc., during 1992	(     )							
25. DEPRECIABLE ASSETS, at the END OF 1992	<u>.</u>							
a. Buildings and structures (exclude land)								
b. Machinery and equipment (include other depreciable assets, except land)								
26. TOTAL DEPRECIABLE ASSETS, at the end of 1992 (SUM of lines 25a and 25b)	355							
PLEASE RECONCILE – SUM of lines 21 through 23 MINUS line 24 should equal line 26. If not, explain in the remarks section.								

Iter	m F – CHANGES IN ACCUMULATED DEPRECIATION DURING 1992				
	INCLUDE				
	<ul> <li>Total depreciation and amortization for the assets included in lines 20 through 26</li> <li>Additions made to the accumulated depreciation and amortization accounts during 1992 for assets owned at the beginning of the year or acquired during the year</li> </ul>				
	EXCLUDE				
	<ul> <li>Reserves for intangible assets</li> <li>Depreciation of assets held in foreign countries and U.S. possessions</li> </ul>				
		Bil.	Mil.	Thou.	Dol.
27.	ACCUMULATED DEPRECIATION AND AMORTIZATION	451			-
	at the end of 1991				
28.	DEPRECIATION AND AMORTIZATION EXPENSE charged to	452		1	
	income during 1992			1	
29.	OTHER ADDITIONS to the accumulated depreciation and	453		I	
	amortization accounts during 1992			I	1
				1	
30.	DEDUCTIONS from the accumulated depreciation and amortization	454 (		i	
	accounts due to sales, retirements, renewals, and replacements during 1992	•			
31.	ACCUMULATED DEPRECIATION AND AMORTIZATION at the end of 1992	455		1	1
	(SUM of lines 27 through 29 MINUS line 30)			1	
4					
lter	m G – TOTAL ASSETS, AT THE END OF 1992				
lter	m G – TOTAL ASSETS, AT THE END OF 1992 NOTE: Report total assets on a consolidated basis.			1	
	<b>NOTE:</b> Report total assets on a consolidated basis.	Bil. 501	Mil.	Thou.	Dol.
	<b>NOTE:</b> Report total assets on a consolidated basis. <b>NET DEPRECIABLE ASSETS</b>		Mil.	<sup> </sup> Thou.   	Dol.
	<b>NOTE:</b> Report total assets on a consolidated basis.		Mil.	Thou.   	Dol.
	<b>NOTE:</b> Report total assets on a consolidated basis.          NET DEPRECIABLE ASSETS         (Should equal line 26 MINUS line 31)		Mil.	Thou.   	Dol.
32.	<b>NOTE:</b> Report total assets on a consolidated basis.          NET DEPRECIABLE ASSETS         (Should equal line 26 MINUS line 31)	501	Mil.	<sup> </sup> Thou.     	Dol.
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS	501	Mil.	<sup> </sup> Thou.       	Dol.
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS INCLUDE	501	Mil.	<sup> </sup> Thou.       	Dol.
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS	501	Mil.	<sup> </sup> Thou.       	Dol.
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS         INCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments,	501	Mil.	Thou.	1 001. 1 1
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS         INCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.         • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all	501	Mil.	Thou.       	Dol.     
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS (Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS         INCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.         • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all	501	Mil.	Thou.	Dol.
32.	NOTE: Report total assets on a consolidated basis.         Sector 1         Should equal line 26 MINUS line 31)         Include only domestic assets.         CURRENT AND OTHER ASSETS         INCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.         • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all reserves and allowances.	501	Mil.	Thou.	Dol.
32.	NOTE: Report total assets on a consolidated basis.         NET DEPRECIABLE ASSETS         Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS         NUCLUDE            • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.            • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all reserves and allowances.             FOREIGN ASSETS	501	Mil.	Thou.	Dol.
32.	NOTE: Report total assets on a consolidated basis.         Sector 1         Should equal line 26 MINUS line 31)         Include only domestic assets.         CURRENT AND OTHER ASSETS         INCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.         • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all reserves and allowances.	501	Mil.	Thou.	Dol.
32. 33. 34.	NOTE: Report total assets on a consolidated basis.         Sector 2012         Should equal line 26 MINUS line 31) Include only domestic assets.         CURRENT AND OTHER ASSETS         DUCLUDE         • Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.         • Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all reserves and allowances.         FOREIGN ASSETS         Include all assets in foreign countries and U.S. possessions, regardless of type.	501	Mil.	Thou.	
32. 33. 34.	NOTE: Report total assets on a consolidated basis. <b>Section 21</b> Should equal line 26 MINUS line 31 Include only domestic assets. <b>CURRENT AND OTHER ASSETS NUCLUDE</b> <ul> <li>Current and other domestic assets for which depreciation or amortization reserves are NOT maintained, such as inventories, cash, investments, accounts receivable, real estate held for resale, etc.</li> <li>Land, depletable and intangible assets such as timber, mineral rights, goodwill, patents, copyrights, etc. Report all other assets net of all reserves and allowances.</li> </ul> <b>FOREIGN ASSETS</b> Marked all assets in foreign countries and U.S. possessions, regardless of type. Report net of all reserves, allowances, and accumulated depreciation.	501	Mil.	Thou.	Dol.

Item H – CAPITAL EXPENDITURES DURING 1992 (Excluding land and mineral rights)	
<ul> <li>INCLUDE</li> <li>All costs that are capitalized to asset accounts and for which depreciation or amore</li> </ul>	ortization
reserves are maintained	
All assets obtained through a capital lease     EXCLUDE	
Cost of land and mineral rights, such as producing and nonproducing leases	
<ul> <li>Cost of maintenance and repairs charged as current operating expenses</li> </ul>	
<ul> <li>Capital expenditures by subsidiaries in foreign countries and U.S. possessions</li> </ul>	
36. New buildings, structures, and additions to plant	
Include new construction, major alterations, capitalized repairs, and improvement of buildings both completed and	
in progress but not completed at the end of 1992. Include	Bil. Mil. Thou. Dol.
expenditures for structures which, on completion, will be sold and leased back to your enterprise	
37. New machinery, equipment, and other capital expenditures	
Bil. Mil. Thou. Dol.	
a. New automobiles, trucks, trailers, special purpose	
vehicles, etc., for highway use	
b. New computers and peripheral data processing	
equipment	
c. All other expenditures for new machinery,	
equipment, and other capital expenditures	
Include production machinery, office equipment, and special tools having useful life of more than one year.	
Report replacements as well as additions to capacity	
38. TOTAL new machinery, equipment, and other capital expenditures	404
(SUM of lines 37a through 37c)	
	406
39. USED plant and equipment acquired from others	
40 Constalined development and employetion of mineral meneration	
40. Capitalized development and exploration of mineral properties Include capitalized expenditures for oil and gas field and other mineral	407
property explorations; for the drilling of oil, gas, dry, and service wells; and for tangible assets	
	410
41. TOTAL CAPITAL EXPENDITURES	
(SUM of lines 36, 38, 39, and 40)	
PLEASE VERIFY – Line 41 should be the same as line 22. If not, explain in the remar	ks section.
Item I – RESEARCH AND DEVELOPMENT DURING 1992 Include all costs incurred by this enterprise during 1992 to support research and developme.	nt
activities (i.e., wages and salaries, direct materials costs, services and supporting costs, and	an
appropriate share of depreciation and overhead). Exclude research and development performed for others on a contract basis (Include on line 1).	
	Bil. Mil. Thou. Dol.
	514 514
<b>42.</b> Did this enterprise perform research $510 \ 1 \square YES - Report amount$	
and development during 1992?	

	ltem J – RE	Include pay	<b>MENTS DURING</b> ' ments made to othe ), machinery and ed e.	ers for use of build						
			se make rental ers during 1992?	520 1 🗌 Y 2 🗌 M	′ES NO – <i>SKIP to Item K</i>					
								Bil. 521	Mil. TI	nou. Dol.
	44. Rental	payments	for use of buildin	gs and structure	9 <b>S</b>					
	45. Rental	payments	for use of machin	ery, equipment,	, and other items	<b>3</b>		522	   	
			PAYMENTS nes 44 and 45)					525   		
	ltem K – R	OYALTY PA	AYMENTS DURING	G 1992					<b>N</b> 411 <b>T</b>	
	<b>payme</b> to unat for the includi	ents during ffiliated orga use of intar	se make royalty 1992? Include pay nizations or individ gible property right trademarks, copyrig urces, etc.	uals 2011	′ES – <i>Report amount</i> IO			Bil. ¦ 531   ▶	Mil.   TI	nou. ¦Dol. I I
	ltem L – Al	OVERTISIN	G SERVICES DUR	NG 1992				[]	I	
	includi	ng payment	<b>se purchase adver</b> lude services from c s for printing, media er services and mate	3 540 1	′ES – Report amount IO			Bil. ' <sup>541</sup> ∣	Mil.   TI   	nou. <sup>I</sup> Dol. I I
	REMARKS 750	– Please us	e this space for any	explanations that	may be essential	in under:	standing you	ır reporte	d data.	
			ION – This report is	•			I			
9	150		regarding this report		Period covered by this report	960	Mo. <sup> </sup> Year	TO: 961		.  Year
	elephone —→	Area code	Number	Extension	Signature of auth	orized pe	erson		Date	
	estimates or Reduction Pro	any other as oject 0607-0	ake 3 hours or less t spect of this survey, 748, Room 2027, Bu ct, 0607-0748, Wash	send them to the reau of the Censu	Associate Directo s, Washington, DO	r for Mar	agement Se	rvices, Pa	perwork	ent and
FOR	M ES-9100									Page 7

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM ES-9200				<b>1992 ECONOMIC CENSUSES</b> AUXILIARY ESTABLISHMENT REPORT							
						OM	IB No. 0607-0749: /	Approval Ex	pires 0	6/30/94	
<b>DUE DATE: FEBRUARY 15, 1993</b> If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:				[				ES-9200			
BURE 1201 Jeffe For assistance	EAU OF THE CENSU East 10th Street rsonville, IN 47134-0 ce, 8:00 a.m. to 5:00 , Monday through F 1–301–763–1758	0001 p.m.,									
	ead the instructions answering the quest										
901 902	Census use	904									
901 902	903	904		(Plea	se correct a	any errors in name	e. address. and ZIF	P Code.)			
IS CONFIL	Dennaire to answer the DENTIAL. It may be respondents' files a	e seen only	e from	Iegal process.	— Plea	se read	ame law, <b>YOUR (</b> or statistical purpo	CENSUS RI oses. Furthe	E <b>PORT</b> r, copie	es	
Who shoul	d report?			GENERAL IN				<b>C</b> 11			
	ry establishments w	hich opera	ited du	ring any part of	<ul> <li>If book estimation purpos</li> </ul>	figures are not rea tes for data items a es.	adily available, car are acceptable for	efully prepa statistical	ared		
What is an	auxiliary establish	nment?			<ul> <li>Be sure approp</li> </ul>	e to complete ever riate.	y item. Enter "0" ir	items whe	re		
<ul> <li>An establishment primarily engaged in performing management, supervision, general administrative functions, and supporting services for other establishments of the same enterprise, rather than for the general public or other business firms.</li> <li>Examples of auxiliary establishments: Central offices, corporate offices, regional offices, accounting offices; research, development, and testing laboratories; central repair shops;</li> </ul>				<ul> <li>What is an enterprise?</li> <li>An enterprise is a business, service, or membership organization consisting of one or more establishments under common ownership or control.</li> </ul>							
warehous	es; computer center	s; etc.									
<ul> <li>Report on EXCLUDE services re</li> </ul>	ly for the activities of all operating activit eported on another manufacturing, selli	ies which p 1992 Econd	produce	e goods or	<ul> <li>An esta</li> </ul>	an establishmen ablishment is a sin lucted or where se ned.	gle physical location				
Is the Employ label the same on its latest 1	ury Form 941?	El) Numbe for this es warterly F Report curr	er shov stablis ederal		a. How i did th active	OPERATIONAL S nany months du is firm or organiz ly operate this lishment?	ring 1992	Numb 002	per of m	nonths	
	SICAL LOCATION	OF ESTAB	LISHM	IENT		X) the ONE box w end of 1992.	hich best describe	s this establ	ishmen	t	
NOTE: P.O. be	r items a, b, c, and d <b>oxes or rural route</b>	s are not									
<b>a.</b> 🗌 Same as	shown in mailing la	bel. If diffe	rent, in	dicate change.	001	1 🗌 In operation		Fig Month	gures o Day	nly Year	
Number an	d street				001		or seasonally ina			rear	
City, town,	village, etc.	S	tate	ZIP Code			ration – Give date				
b. Is this esta	blishment physica	ally locate	d insi	de the legal		4 Sold or leas	ed to another Give date at right – name, etc., below -	<b>→</b>			
<b>boundaries</b> 095 1 2 	Yes 3 🗌 No leg	<b>, village, e</b> gal bounda	etc.?	<b>.</b>	Name	e of new owner or	¥				
<ul> <li>c. Type of municipality where physically located?</li> <li><sup>096</sup> 1 City, village, or borough</li> <li>2 Town or township</li> <li>3 Other or don't know</li> </ul>				Number and street							
d. Name of co	ounty where physi	cally loca	ted?		City		S	tate ZIP	Code		
	FAILURE TO REPO	DRT						CONTINU		ACE	

PENALTY FOR FAILURE TO REPORT

Item 4 – EMPLOYMENT BY FUNCTION									
List both full-and part-time employees as defined on Treasury Form 941, Employer's Quarterly Federal Tax Return, and Circular E, Employer's Tax Guide at this auxiliary location, by each employee's primary function.									
<ul> <li>Exclude • Employees working in or from other establishments, even though paid from this location</li> </ul>									
Proprietors or partners if an unincorporated firm									
a. Employment by function for pay period including March 12, 1992. (Where records do not provide actual employee counts in terms of the functions listed, estimates of the approximate number in each are acceptable. Those performing a variety of functions should be reported in their primary activity during the pay period.)									
(1) Administrative and managerial employee	Number 033								
(1) Administrative and managenal employee except sales support)									
<ul><li>(2) Research, development, and testing empl</li><li>(3) Warehousing employees</li></ul>	034								
(4) Trucking employees			036						
<ul> <li>(5) Communications employees (including te</li> <li>(6) Repair service employees</li> </ul>	lephone and telecommunications)		037						
(7) Electronic data processing employees (inc	lude programming and systems design)		039						
(8) Sales employees selling directly to custor supporting the sales personnel	ners from this location and sales support employee	s directly	040						
042 ( <b>9</b> ) Other employees – <i>Specify</i>			041						
b. TOTAL March 12 employment – <i>Sum of I</i>	ines (1) through (9)		032						
HOW TO REPORT DOLLAR Value figures may be dollars or rounded to		Preferred	lions   s (000) (	Thou- ands   (000) 126	Dol- lars (000)				
FIGURES		Acceptable	1 Mil. T	125	628 Dol.				
	<b>TIONS</b> on Treasury Form 941 and Circular E, Employer's		030	[hou.	001.				
Tax Guide Include • Gross earnings paid to employees p	prior to such deductions as:			1					
<ul> <li>Employee's Social Security contri</li> <li>Withholding taxes</li> </ul>		a. TOTAL	i	i					
<ul> <li>Group insurance premiums</li> <li>Union dues</li> </ul>		ANNUAL PAYROLL		1					
<ul><li>Savings bonds</li><li>All wages and salaries including:</li></ul>			031						
<ul> <li>Commissions and paid bonuses</li> <li>Dismissal pay</li> </ul>									
<ul> <li>Vacation and sick pay</li> <li>Cash equivalent of compensation</li> </ul>	paid in kind		l I	I I					
	ified pension plan, such as the 401(k) plan	b. FIRST	1	1					
<ul> <li>Exclude • Payments to proprietors or partners</li> <li>• Employer's cost for fringe benefits</li> </ul>	if an unincorporated concern	OUARTER							
			101						
Item 6 – EMPLOYER'S COST FOR FRINGE BI (Supplemental Labor Costs)	INEFITS IN 1992	<ul> <li>a. Legally required programs</li> </ul>		i i					
LEGALLY REOUIRED – For example: • Employer's Social Security tax		including Social Security	1						
<ul> <li>Unemployment tax</li> <li>Workmen's compensation insurance</li> </ul>			102						
State disability insurance programs	-	<b>b.</b> Voluntarv	1	1					
<ul> <li>VOLUNTARY PROGRAMS – For example:</li> <li>Union negotiated benefits</li> </ul>		programs							
<ul><li>Life insurance premiums</li><li>Pension plans and welfare plans</li></ul>		c. TOTAL fringe	103	1					
<ul> <li>Insurance premiums on hospital an</li> <li>Stock purchase plans</li> </ul>	d medical plans	benefits – Sum of lines a and b		i					
Item 7 – PRINCIPAL ACTIVITY OF THIS	150	1 🗌 Centralized admi	nistration						
<b>ESTABLISHMENT</b> <b>a.</b> Does this establishment perform	1 🗌 YES – Mark (X) the box which best describes the major activity	<ul> <li>2 Research, develo</li> <li>3 Warehousing</li> </ul>	pment, aı	nd testi	ing				
management, general administrative, or other supporting services PRIMARILY for	of <b>this establishment</b> —>>	4 Electronic data p	a processing						
establishments of your enterprise rather than for other business firms or for the	2 □ No – If "No" describe the primary activity of this establishment,	<ul> <li>5 Trucking</li> <li>6 Communications</li> </ul>							
general public? ("Enterprise" refers to the parent firm and all its establishments and subsidiaries under common ownership or	then ŚKIP to Item 9.	7 Repair services							
control.)	155	8 Selling							
		9 Other – Specify $_{152}$	,						
<b>b</b> le this establishment the serverses									
b. Is this establishment the corporate headquarters, executive office or head office for your entire enterprise?	$\begin{array}{c} 1 \\ \square \end{array} \begin{array}{c} YES = SKIP \ to \ tem \ 8 \\ 2 \\ \square \end{array} \begin{array}{c} NO \end{array}$								
c. Does this establishment perform these management and administrative functions or support services for ALL establishments of your enterprise?	<sup>155</sup> 1 ☐ YES – <i>SKIP to Item 8</i> 2 ☐ NO								
d. Does this establishment perform these management and administrative functions or services for a SINGLE operating establishment which is located at the same physical location as shown in the address label?									
FORM ES-9200		C			AGE 3				

				Page 3		
FORM ES-9200 U.S. DEPARTM B 1992 ECONOMIC CENSUSE AUXILIARY ESTABLISHMENT REPO		Enter the 11-digit CENSUS FILE NUMBER as shown on this report (See label on page 1)				
<ul> <li>Item 8 - PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED</li> <li>a. Mark (X) the ONE box which BEST describes the MAJOR kind of business or industrial activity of the operating establishments of your enterprise that are managed or serviced by the auxiliary referred to in the label.</li> </ul>	or exploration manufactor and lond 6 Retail tr			, Insurance, and Real industries		
<ul> <li>b. List in order of importance, the principal kinds of merchandise sold, products produced, types of services rendered, or construction activities performed by the operating establishments that are managed or serviced by the auxiliary listed in the address label. For each line, also indicate the percent of total sales or receipts that each line represents.</li> </ul>	159 (1) 161 (2) 163 (3) CENSUS USE (	Source of sales or receipts	11	Percent of total sales or receipts		
Item 9 - BILLINGS TO OTHER ESTABLISHMENTS OF YOUR ENTERPRISE IN 1992 Report billings to all other establishments of your enterprise during 1992 Include • All merchandise billed by this establishment in 1992 • All billings, whether or not the merchandise was shipped directly by the supplier or shipped from this establishment Exclude • Sales to establishments of other enterprises, and franchise sales • Purchases made directly your enterprise's individual establishments	establishments of	hent have billings to other your enterprise during 1992? S – <i>Report amount billed</i> ——		Mil. Thou. Dol. 601     1   1   1   1   1   1   1		
<ul> <li>Item 10 - SALES, OPERATING RECEIPTS, AND REVENUES TO CUSTOMERS OUTSIDE YOUR ENTERPRISE IN 1992</li> <li>Report all sales, operating receipts, and revenues made by this establishment during 1992 to customers outside your enterprise. EXCLUDE sales taxes and other taxes collected.</li> <li>Include • Merchandise sales, operating receipts, and revenues for services and other business receipts</li> <li>Export transfers to foreign subsidiaries of your enterprise</li> <li>Cost of research and development for the Federal Government or for other enterprises on contract, as reported in litem 11</li> <li>Franchise sales</li> <li>Income from interest, dividends, commissions, and rental income (Finance, Insurance, and Real Estate only)</li> <li>Exclude</li> <li>Sales to outside customers made by other establishments of your enterprise</li> <li>Sales to outside customers made by other establishment</li> <li>Sales and/or manufacturer's shipments already reported on other Census forms</li> <li>Nonoperating income</li> </ul>	<ul> <li>revenues of proyour enterprise</li> <li>010 1 YE</li> <li>2 NO</li> <li>b. Of the total salline a, report the second se</li></ul>	S – Report sales, operating rec D – SKIP to Item 11 es, operating receipts, and reve ne approximate percent of recei traction, production, or explora on (including general contractin ubdividing and developing) ring (including publishing and p tition, Communications, Electric, trade (including manufacturers e surance, and Real Estate dustries	outside eipts, and revenues nues reported in pts from – tion g, subcontracting, printing) Gas, and Sanitary	I       I         I		
Item 11 – COST OF RESEARCH AND				510		
Rem 11 - COST OF RESEARCH AND DEVELOPMENT IN 1992 Report all costs incurred at this establishment during 1992 to support research and development activities (i.e., wages and salaries, direct materials costs, services and supporting costs, and an appropriate share of depreciation and overhead). If this establishment performed research and development for the Federal Government or for other enterprises on contract during 1992, include the total amount charged for such work performed. Also, report such receipts in Item 10.	b. Source of fund (1) Federal Go (2) Nonfedera enterprise	ishment perform research and Juring 1992? Is for research and developmen overnment contracts and subco Il sources outside your enterpris s, local governments, etc.) blishments of your enterprise	ntracts	1 □ YES - Go to b       2 □ NO - SKIP to Item 12       Mil. □ Thou. □ Dol.       511 □       512 □       1       513 □       1		
		ost of research and developn les (1) through (3)	nent -	514     		

CONTINUE ON PAGE 4

	CAPITAL EXPENDITURES DURING 1992 NG LAND AND MINERAL RIGHTS)	a. Did this establishment have capital expenditures during 1992?				400		
Capital expe fixed asset	enditures refer to all costs that are capitalized to the accounts and for which depreciation or amortization e maintained. Include all items obtained through a						Yes – Go No – SKI Iten	
-	<ul> <li>Line b(1)(a) – New vehicles purchased for highway use including passenger automobiles, trucks, commercial cars and buses, truck tractors and</li> </ul>	<ul> <li>b. Type of capital expenditures</li> <li>(1) New machinery and equipment         <ul> <li>(a) New automobiles, trucks, trailers, special purpose vehicles, etc., for highway use</li> <li>(b) New computers and peripheral data processing equipment</li> <li>(c) All other expenditures for new machinery</li> </ul> </li> </ul>				Mil. 401	Thou.   	Dol
	<ul> <li>trailers, and special purpose vehicles</li> <li>Line b(1)(c) – Other new machinery and equipment including office machines and fixtures, furniture, warehouse lifts, and similar equipment. Report replacements as well as additions to capacity.</li> </ul>					402	 	   
	<ul> <li>Include vehicles whose primary use is off highway</li> <li>Line b(2) – New construction, major alterations, capitalized repairs and improvement of buildings,</li> </ul>						   	   
	other fixed structures, and site improvements (such as roads, parking lots, fences, utilities) • Expenditures for structures which, on completion, are to be sold and leased back to you					403	   	   
	<ul> <li>The cost of all improvements and new construction which were in progress, but had not been completed at the end of 1992</li> <li>Equipment that is an integral or permanent part of</li> </ul>	equipment				404	   	   
	<ul> <li>Equipment that is an integral or permanent part of a building or structure</li> <li>Line b(3) – Total expenditures for old or existing plants and for secondhand equipment acquired from</li> </ul>	(d) TOTAL new machinery and equipment – Sum of lines (a) through (c)					 	
Exclude	others. Include machinery or equipment acquired from transferred from other plants of your enterprise at approximate market value.	(2) New buildings, structures, and additions to plant				405	   	
	<ul> <li>Cost of faile and infiniteral rights</li> <li>Cost of maintenance and repairs charged as current operating expense</li> <li>Capital expenditures made by outside owners of</li> </ul>					406	   	   
	Capital expenditures made by outside owners of property rented or leased to this establishment     Capital expenditures made by this establishment     for other locations of your enterprise	(3) Used plant and used equipme others				410	 	 
		(4) TOTAL capital expenditures – Sum of lines (1)(d), (2), and (3)				 	 	
Item 13 – DEPRECIABLE ASSETS (EXCLUDE LAND) Report the gross cost of depreciable assets of this establishment for which depreciation or amortization accounts are ordinarily maintained. Gross cost represents the acquisition cost to this establishment of such depreciable assets. The cost of assets should include all types of items for which capital expenditures are reported. ( <i>See instructions for Item</i> 12.)		a. Did this establishment have depreciable assets at the end of the specified year?			350	nd of 19 1	°₹	
Include	<ul> <li>Cost of improvements and new construction that were in progress but not completed at the end of 1992</li> </ul>	<b>b.</b> Gross cost of depreciable		Mil. Thou. Dol.			Thou.	Do
	<ul> <li>Cost of depreciable assets owned by this establishment, but rented or leased to others under an operating lease agreement</li> </ul>	assets	301	1	   	351	 	1
Exclude	<ul> <li>Cost of depreciable assets obtained through capital leases</li> <li>Cost of land and depletable assets (timber and mineral rights)</li> </ul>	(1) Buildings and structures (exclude land)	302	   	   	352	   	   <del> </del>
	<ul> <li>Current assets (inventories, cash, accounts receivable, etc.) and intangible assets (goodwill, patents, copyrights, etc.)</li> </ul>			 			   	   
	<ul> <li>Cost of depreciable assets at other locations for which this establishment maintains records</li> </ul>	(2) Machinery and equipment	305	 	 	355	   	
		(3) TOTAL – Sum of lines (1) and (2)		     	   		   	     
Report addi	DEPRECIATION CHARGES DURING 1992 itions made to accumulated depreciation and	Did this establishment have depreciation expense during 1992?			-	Mil. 452	Thou. 	Do
amortization accounts during 1992 for assets owned at the beginning of the year or acquired during the year.		<sup>450</sup> 1 □ Yes – Report depreciation charged to income during 1992 → 2 □ No			arged			
	RENTAL PAYMENTS IN 1992	Did this establishment make rental payments during 1992?				521	   	   
Include • Payments (or equivalent charges) made to other enterprises for the use of buildings (including land and office space), structures, machinery, and equipment. (See Item 12 instructions for breakout of buildings and structures from machinery and equipment.)		<sup>520</sup> 1 □ Yes - <i>Report rental</i> <i>payments</i> → a. Buildings and structures			522	   	     	
Exclude	<ul> <li>Payments made by this establishment to the parent enterprise or any of its subsidiaries. The value of such enterprise-owned assets should be reported as if actually owned by this establishment in Item 13.</li> </ul>	2 🗆 No b. Machinery and equipment				   	-     	
	• Capital leases (should be reported as assets)				pment	525		<u> </u> 
	<ul> <li>Rental payments made by this establishment for plant and equipment at other establishments of your enterprise</li> </ul>		c. TOTAL – Sum of lines a and b				   	   

FOR	M ES-920	U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS	Enter the	11-digit FILE NUMBER				
		1992 ECONOMIC CENSUSES AUXILIARY ESTABLISHMENT REPORT	as shown	on this repor on page 1)				
		ECTED PURCHASED SERVICES IN 1992	noludo tho t	intal amount as	tually paid or payable			
to	other enterp	t of purchased services by this establishment during 1992. I orises. Do not include the cost of services performed by em s of your company, or included as a part of normal rental pa	ployees at the ayments.	his location, pu	rchased by other			
a. Did this establishment purchase electricity in 1992?				610			Thou.	Dol.
	Exclude	The value of electricity generated and used at this establ	ichmont	1 🗌 YES -	- Report cost of purchased electricity	611	l	I
	Exclude	• The value of electricity generated and used at this establ	Ishinent	2 🗌 NO	during 1992		1	 
ь.	Did this est	ablishment purchase fuels in 1992?		620		621	1	
	Include • Coal, coke, natural and manufactured gas, fuel oil, liquified			1 🗌 YES – Repo purch	– Report cost of purchased fuel in 1992		i I	l
	petroleum gas, gasoline, etc.  Exclude • Gasoline and fuel purchased for highway vehicles						l l	l I
6	Did this est	ablishment purchase communication services in 1992?		630		631	 	 
0.	Include	Payments for telephone, telegraph, data transmission,		1 🗌 YES -	- Report cost of purchased		1	l I
		telex, ticker tape, phototransmission, facsimile (FAX), and all related services			communication services in 1992		l	I
				2 🗌 NO			 	
d.	Did this est in 1992?	ablishment purchase repair services for buildings and struc	tures	640		641	1	l I
	Include	<ul> <li>All noncapitalized repairs to buildings and structures (surpainting, roof repair, etc.)</li> </ul>	ch as	1 🗌 YES -	- Report cost of purchased repair		i I	
	NOTE: R	eport the cost of purchased repair services for equipment the tegral or permanent part of a building or structure as repair	hat is an		services for buildings and structures in 1992		I	I
	b	uildings and structures, not as machinery and equipment. <ul> <li>Capitalized building or structure improvements for which</li> </ul>		2 🗌 NO			 	 
	Exclude	<ul> <li>Capitalized building or structure improvements for which depreciation or amortization accounts are ordinarily main</li> </ul>					1	l I
θ.	Did this est	ablishment purchase repair services for machinery and equ	upment	650		651		
0.	in 1992?			1 🗌 YES -	- Report cost of purchased repair		l I	I I
		<ul> <li>All noncapitalized repairs to machinery and equipment (s motor vehicles, other machinery and equipment repair, e</li> </ul>	etc.)		services for machinery and equipment in 1992		 	 
	Exclude	<ul> <li>Capitalized machinery and equipment improvements for depreciation or amortization accounts are ordinarily main</li> </ul>		2 🗌 NO			1	l I
							1	
f.		ablishment purchase contracted labor services in 1992?		660 1 🗌 YES -	– Report cost of	661	1	l I
	supplied th	nployees are employees who are not on your payroll but ar rough a contract with another company to perform specific emporary help, security, janitorial, clerical, etc.). Your comp			purchased contracted labor services in 1992		1	 
	provides da	ay-to-day supervision.		2 🗌 NO			1	l
g.	Did this est services in	ablishment purchase accounting and bookkeeping 1992?		670 1 🗌 YES -	– Report cost of	671	I I	l I
					purchased accounting and bookkeeping services in 1992		1	l I
				_	Services III 1992		i I	1
				2 🗌 NO				
h.	Did this est	ablishment purchase legal services in 1992?		680 1 🗌 VES -	- Report cost of	681		
					purchased legal services in 1992		1	l I
				2 🗌 NO			i I	 
				690		691	1 	ı I
i.	Did this est	ablishment purchase refuse removal services in 1992?			- Report cost of		1	l I
					purchased refuse removal services in 1992		1	l I
				2 🗌 NO			 	 
				700		701	 	I 
j.	Did this est	ablishment purchase data processing services in 1992?			- Report cost of		 	 
					purchased data processing services in 1992		1	l I
				2 🗌 NO			1	
							1	

**CONTINUE ON PAGE 6** 

	_		_					Page 6	
Item 17 – INVENTORIES		this establishment have entories at the end	200 En	d of 19		250 En	d of 19		
The Census inventory inquiries are designed to collect information concerning all of the inventories owned by each enterprise and which are located within the United States.		he year specified?	200	1 🗌 YES 2 🗌 NO		230			
Inventories of multiestablishment enterprises should be				lf "l SKIP to	No" for Item 1	both ye 8, Certi	ears, fication		
reported by the establishment that is responsible for the inventories even if these inventories are held at a separate location. In this way, all inventories are accounted for on a	b. Rep	port inventories at cost or	Mil.	<sup> </sup> Thou.	Dol.	Mil.	Thou.	Dol.	
location. In this way, all inventories are accounted for on a nonduplicated basis. The sum of the value of inventories of all establishments of an enterprise should be approximately	ma	rket value using generally epted accounting methods.	210			260			
equal to the enterprise's total value of inventories after adjusting for valuation differences.	the	r inventories at LIFO cost, use sum of the LIFO amount plus		i i			i i		
For lines a through e, report only those inventories that are	cor	LIFO reserve when npleting lines b through d)		1					
attributable to this establishment's operations. Report such nventories as if this establishment owns them. Do not	d(1	ould equal sum of lines ) and d(2)					I I		
include inventories located at this establishment which are the responsibility of other establishments of your	c. Did	this establishment have	220 En	d of 19		270	d of 19		
enterprise.	cos	inventories subject to LIFO costing at the end of the costing dynar?				nplete	270		nplete
Include • Finished products	ope				nd e			nd e	
<ul><li>Work in process</li><li>Materials, supplies, fuels, etc., which are for</li></ul>				2 🗌 NO	Z		2 🗌 NO	7	
resale or for further fabrication <ul> <li>Inventories in transit for which this auxiliary</li> </ul>						r both years, 18, Certification			
has responsibility <b>Exclude</b> • Inventories owned by others but held by			Mil.	<sup> </sup> Thou.	Dol.		Thou.	Dol.	
this auxiliary	d. (1)	Total inventories reported on line b which are <b>not</b>	240			290			
<ul> <li>Items not held for resale, such as fixtures, equipment, and supplies</li> </ul>		subject to LIFO costing.		I I			i i		
NOTE: Sum of lines d(1) and d(2) should equal total inventories on line b and sum of lines e(1) and e(2)	(2)	Total inventories reported on line b which <b>are</b> subject	230			280			
should equal the amount of line d(2)		to LIFO costing (gross) – <i>Should equal sum of</i>					· ·		
		lines e(1) and e(2)	232	1		282	<u>   </u>		
	e. (1)	LIFO reserve associated with the inventories	232			202	I I		
		reported on line d(2)	231	L		281	<u> </u>		
	(2)	LIFO value of inventories	231	1		201			
	(_,	reported on line d(2) (net)		I			 I I		
<b>REMARKS</b> – <i>Please use this space for any explanations that n</i> <sup>750</sup>	nay be es	ssential in understanding your	reporte	a aata.					
Item 18. CERTIFICATION – This report is substantially accura	ate and h	as been prepared in accordanc	e with	instructi	ons.				
Period covered by this report960 FROM:Mo.Year961 TO:Mo.	Yea	Name of person to contact r	egardin	g this re	port – I	Print or	type		
951 Area code Number Extensi	on	Title							
Signature of authorized person		1			Date				
We estimate that it will take 1 hour or less to complete	this au	estionnaire. If you have any	comm	ients ro	gardin	a thee	e		
estimates or any other aspect of this survey, send ther Reduction Project 0607-0749, Room 2027, Bureau of th	n to the	Associate Director for Mana	ageme	nt Serv	ices, P	aperwo	ork	nd	
Budget, Paperwork Project, 0607-0749, Washington, Do	20503.					anaye			
FORM ES-9200 PLEASE PHOTOCO	PY THIS	FORM FOR YOUR RECORD	s						

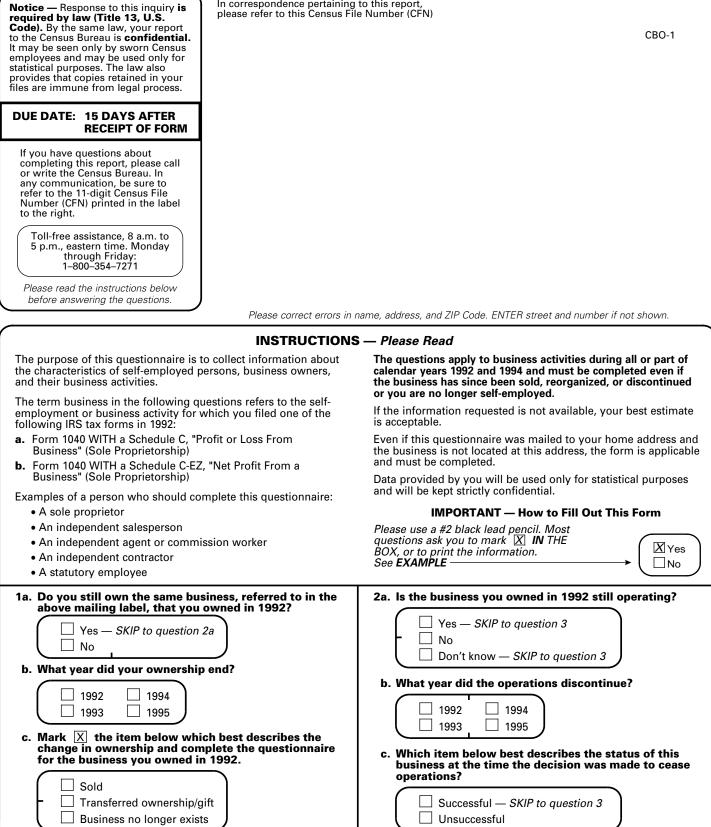
U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

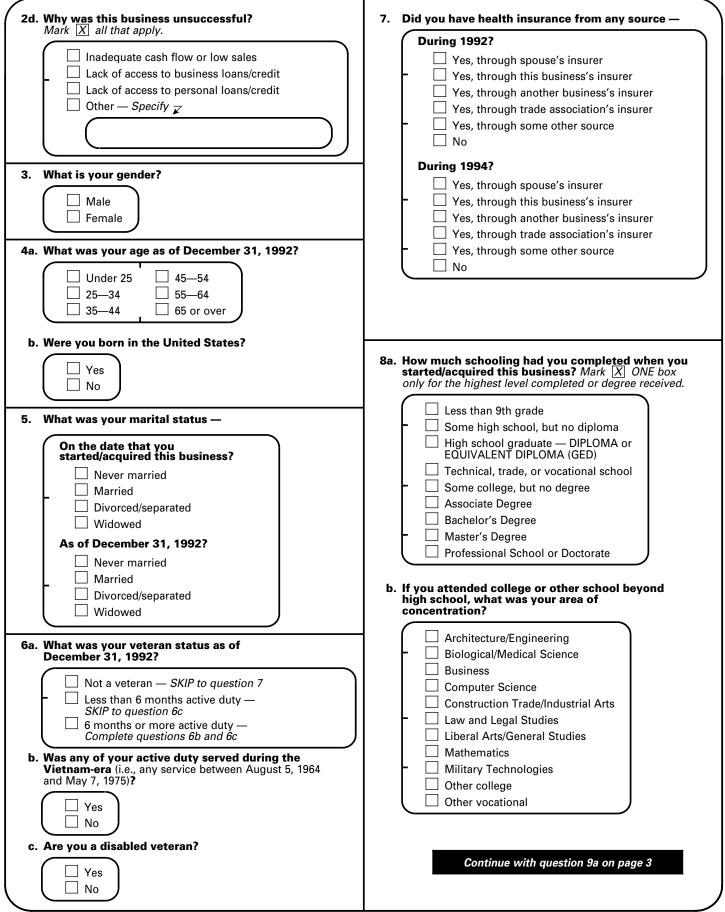


## **1992 ECONOMIC CENSUS** CHARACTERISTICS OF BUSINESS OWNERS SURVEY SOLE PROPRIETORSHIP

In correspondence pertaining to this report,

OMB No. 0640-0022: Approval Expires 08/31/96





Page 2

9a. Prior to beginning/acquiring this business, had any of your close relatives ever owned a business OR been self-employed? (Close relatives refer to spouses,	<ol> <li>What was YOUR total personal income – (Do not include income from spouse or other family members.)</li> </ol>
<ul> <li>parents/guardians, brothers, sisters, or immediate family.)</li> <li>Yes</li> <li>No - SKIP to question 10a</li> </ul> b. If " X Yes," did you work for any of these relatives? <ul> <li>Yes</li> <li>No</li> </ul>	For the year of 1992?       For the year of 1994?         Mark       X       ONE box only.         Less than \$5,000       Less than \$5,000         \$5,000-\$9,999       \$5,000-\$9,999         \$10,000-\$14,999       \$10,000-\$14,999         \$15,000-\$24,999       \$15,000-\$24,999         \$25,000-\$34,999       \$25,000-\$34,999         \$35,000-\$74,999       \$35,000-\$74,999         \$50,000-\$74,999       \$75,000-\$99,999         \$100,000-\$149,999       \$100,000-\$149,999         \$100,000-\$149,999       \$100,000-\$149,999         \$150,000 or more       \$150,000 or more
10a. How many years of work experience did you have prior to starting/acquiring this business?         Image: None (did not work) - SKIP to question 11         Image: Less than 2 years         Image: Description of the starting d	12. What year was this business established?         Before 1970         1970—1979         1980—1985         1986—1988         1990         1991         1992
<ul> <li>b. How many of those years did you work in a managerial capacity?</li> <li>None <ul> <li>Less than 2 years</li> <li>25 years</li> <li>69 years</li> <li>1019 years</li> <li>20 years or more</li> <li>Not sure</li> </ul> </li> <li>c. How many of those years were you an owner of another business?</li> </ul>	13a. When did you acquire ownership of this business?         Before 1970         1970—1979         1980—1985         1986—1988         1990         1991         1992
<ul> <li>d. Did you previously work for a business whose goods/service(s) were similar to those provided by this business?</li> </ul>	b. How did you acquire ownership of this business?          Founded         Received transfer of ownership/gift         Purchased         Inherited         Other - Specify r         Continue with question 13c on page 4

FORM CBO-1 (10-1-94)

<ul> <li>14d. What was the source(s) of this business's non-borrowed capital? Mark</li></ul>
□ Did not occur — SKIP to question 15a         □ Relied upon own income from other business/job         □ Invested additional capital         □ Delayed payment to suppliers         □ Received help from family         □ Other — Specify r         □ During 1992?         □ During 1992?         □ During 1992?         □ During 1992?         □ Less than 12 weeks         □ 12—23 weeks         □ 24—35 weeks         □ 24—35 weeks
□       48 weeks or more       □       48 weeks or more         □       b. What was the average number of hours per week you spent managing or working in this business –         □       During 1992?       During 1994?         □       None       □         □       None       □         □       Less than 10 hours       □         □       10–19 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours       □         □       0.9 hours or more       □         □       0.0 hours or more       □         □       0.0 hours or more       □         □       0.0 hours or more       □         □       0.0 hours or more       □

Page 4

	During 1992? During 1994?
<ul> <li>☐ No assistance received</li> <li>☐ Federal government</li> </ul>	Neighborhood Neighborhood
State and/or local government	City/county     City/county
College or university	Regional (adjoining Regional (adjoin
Other business/franchisor	counties and/ counties and/ or states) or states)
$\Box$ Other — Specify $\swarrow$	🗌 🗌 National 🗌 National
	International International
	d. What percent of the customers served by this
at was this business's total sales/gross receipts —	business were WHITE and NOT of HISPANIC origin
or the Year of 1992? For the Year of 1994?	During 1992? During 1994?
$\begin{array}{ccc} \text{Mark} \ \underline{X} \ \text{ONE} \ box \ only. \\ \end{array} \qquad \begin{array}{c} \text{Mark} \ \underline{X} \ \text{ONE} \ box \ only. \\ \end{array}$	Less than 10%
Less than \$5,000 Less than \$5,000	
□       \$5,000—\$9,999       □       \$5,000—\$9,999       -         □       \$10,000—\$24,999       □       \$10,000—\$24,999	25%-49%         25%-49%           50%-74%         50%-74%
□ \$10,000—\$24,999       □ \$10,000—\$24,999         □ \$25,000—\$49,999       □ \$25,000—\$49,999	$\Box 30\% - 74\%$ $\Box 30\% - 74\%$
□ \$25,000—\$45,555 □ \$25,000—\$45,555 □ \$25,000—\$45,555 □ \$25,000	$\Box Don't know \Box Don't know$
□ \$100,000—\$199,999 □ \$100,000—\$199,999	
□ \$200,000—\$249,999 □ \$200,000—\$249,999	
□ \$250,000—\$499,999 □ \$250,000—\$499,999 <b>-</b>	
☐ \$500,000—\$999,999 ☐ \$500,000—\$999,999	
□ \$1,000,000 or more □ \$1,000,000 or more	
	BEFORE taxes as reported on your tax return —         (Net profit or loss is defined as total sales/gross receipts minus total expenses.)         For the Year of 1992? Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       Less than \$10,000         \$10,000—\$24,999       \$10,000—\$24,999         \$25,000—\$99,999       \$25,000—\$99,999         \$100,000 or more       \$100,000 or more         For the Year of 1994? Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       Less than \$10,000         \$100,000 or more       \$100,000 or more         For the Year of 1994? Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       Less than \$10,000         \$10,000—\$24,999       \$10,000—\$24,999

FORM CBO-1 (10-1-94)

For the Year of 1992? Mark X ONE box only.         None         Less than 10%         10%—24%         25%—49%         50%—74%         75%—99%         100%	         	the Year of         None         Less tha         10%—24         25%—49         50%—74         75%—99         100%	n 10% % % %		IE box only		
During 1992? Mark X ONE box for each of lines         I. Health insurance costs         II. Credit market conditions         III. IRS regulations or penalties         IV. Environmental regulations         V. The Americans with Disabilities Act         VI. The Occupational Safety and Health Act (OSHA)         VII. Lack of financial capital         VIII. Crime	Strong positive impact		Neutral	Minor negative impact	Strong negative impact	Not applicable	- <b>F</b>
During 1994? Mark X ONE box for each of lines         I. Health insurance costs         II. Credit market conditions         III. IRS regulations or penalties         IV. Environmental regulations         V. The Americans with Disabilities Act         VI. The Occupational Safety and Health Act (OSHA)         VII. Lack of financial capital         VIII. Crime	Strong positive impact		Neutral	Minor negative impact	Strong negative impact	Not applicable	
<b>d this business have any paid employees in 199</b> Yes — Continue with question 19b on page 7 No — SKIP to question 20 on page 7	2 or 1994	1?		Co	ontinue on j	page 7	

During the pay period including March 12,	including March 12,	<b>During 1992?</b> Mark $X$ ONE box only.
1992?	<b>1994?</b>	Costs/premiums were too high-priced
No employees	No employees	<ul> <li>Rejected by health insurers</li> </ul>
1—4 employees	1—4 employees	Dropped by this business's health insurer
5—9 employees	5—9 employees	Not needed to attract or retain employees
10—19 employee		<ul> <li>High full-/part-time employee turnover</li> </ul>
20—49 employee	, , ,	Administrative burden
50—99 employee		Not desired by employees
100 employees or more	100 employees or more	Don't know
		$\Box$ Other — Specify $\mathbf{k}$
Approximately what per employees were WOME	cent of this business's V —	
During the pay period including March 12, 1992?	During the pay period including March 12, 1994?	<b>During 1994?</b> <i>Mark</i> X ONE box only.
No women	No women	<ul> <li>Rejected by health insurers</li> </ul>
employees	employees	Dropped by this business's health insurer
Less than 10%	Less than 10%	Not needed to attract or retain employees
<b>10%—24%</b>	<u> </u>	<ul> <li>High full-/part-time employee turnover</li> </ul>
<b>25%—49%</b>	<b>25%—49%</b>	Administrative burden
- 🗌 50%—74%	<b>50%—74%</b>	Not desired by employees
75% or more	75% or more	Don't know
Don't know	Don't know	$\Box \text{ Other} - Specify}_{\overrightarrow{k}}$
During the pay perio including March 12,	including March 12,	20. Was this business a franchise –
1992?	1994?	During 1992? During 1994?
Less than 10%	Less than 10%	
- 25%—49% 50%—74%	☐ 25%—49% ☐ 50%—74%	
☐ 50%—74% ☐ 75% or more	☐ 75% or more	21a. Was this business operated primarily from or in
Don't know	Don't know	<b>home</b> — Mark $ X $ ONE box in each time period.
Did this business offer a	ny retirement plan (profit	When first established?
sharing, employee stock including 401(K), annuit employees —	c ownership, pension, y, Keogh, SEP, etc.) to its	<ul> <li>□ No</li> <li>□ Don't know</li> </ul>
During 1992? D	uring 1994?	<b>During 1992?</b> If you answered " to all three parts o
Yes	Yes	Ves question 21a, SKIF
No	□ Yes □ No	□ No question 21c on pa
		During 1994?
		Yes
Did this business offer a employees in either 199		
employees in either 199	nd 1994 — SKIP to question 20	
employees in either 199		Continue with question 21b on page 8

Mark X ONE box only.	For the Year of 1992?         Mark       Image: ONE box only.         Less than 1%         1%—9%         10%—24%         25%—49%         50%—74%         75%—99%         100%         Don't know	For the Year of 1994?         Mark       Image: ONE box only.         Less than 1%       1%—9%         1%—9%       10%—24%         25%—49%       50%—74%         75%—99%       100%         Don't know
☐ Yes ☐ No — Please supply ZIP Code	c. Check any of the following the destination for 10% or total exports —	ı markets if they were more of this business's
In which language(s) can this business conduct its transactions? Mark X all that apply.	During 1992. Africa Asia Australia/Oceania Canada Caribbean/ Central America Europe Japan Mexico Middle Fast	During 1994. Africa Asia Australia/Oceania Canada Caribbean/ Central America Europe Japan Mexico Middle East
<ul> <li>Were any of this business's total sales accounted for by exports outside the United States in 1992 or 1994?</li> <li>No - SKIP to question 24a on page 9</li> <li>Yes, only during 1992</li> <li>Yes, only during 1994</li> <li>Yes, during 1992 and 1994</li> </ul>	South America	
I. Were any of the following agencies helpful in starting or incl         Mark X ONE box for each of lines I—VIII.         I. International Trade Administration, U.S. Department of Comm         II. Small Business Development Centers, Small Business Admin         III. Minority Business Development Agency, U.S. Department of         IV. Export-Import Bank         V. State export promotion agencies         VI. Banking or commerical lending institutions         VIII. Other — Specify Z.	erce	Yes No Not contacted

HISTORY-1992 ECONOMIC CENSUS

23e. How long had this business been involved in exporting be	efore Decem	nber 31, 1992	?			
<ul> <li>□ Less than 1 year</li> <li>□ 1—5 years</li> <li>□ 6—10 years</li> <li>□ More than 10 years</li> </ul>						
24a. Is this business planning on starting or increasing its exp	orts in the n	near future?				
<b>b. Are the following issues important to this business's abil</b> Mark $X$ ONE box for each of lines I—IX.	ity to expor	t?				
	Very important	Somewhat important in	Not nportant	Not applicable	Don't know	
I. Export financingII. Information on export opportunitiesIII. Foreign trade restrictionsIV. U.S. trade restrictionsV. Competition in the foreign marketVI. Price of this business's exportsVII. Dollar exchange rateVIII. Local environmental restrictionsIX. Other — Specify $r$						
			1			
Continue with que	stion 24c					
24c. Will this business's exports increase substantially as a result of the North American Free Trade Agreement —						
To Canada?     To Mexico?       Yes     Yes       No     No						
d. Will this business relocate some of its production facilities as a result of the North American Free Trade Agreement —			Please	read		
To Canada?     To Mexico?       Yes     Yes       No     No	please S page 11 • If there	usiness had no SKIP to the Ce of this report f were paid em NUE on page ?	ertificatio <sup>i</sup> orm. <b>ployees</b> i	on Box at the	e bottom of	
PLEASE READ 🛩						
ORM CBO-1 (10-1-94)						Page

## Questions 25 through 31 to be completed if there WERE PAID EMPLOYEES IN EITHER 1992 OR 1994

The following questions relate to family or medical leave taken by employees. In this context, the terms "family leave" and "medical	28b. How many employees took family or medical leave —
<ul> <li>leave" have the same meaning as under the federal Family and Medical Leave Act (FMLA) of 1993 — a law that requires covered employers to provide unpaid, job-protected leave to employees (a) for their own serious health condition, including pregnancy and childbirth ("medical leave") and (b) to care for a newborn, newly-placed adopted or foster child, or seriously ill child, spouse, or parent ("family leave").</li> <li>25. Is your business covered by the federal Family and Medical Leave Act (FMLA) of 1993?</li> </ul>	During 1992?       During 1994? $1-4$ $1-4$ $5-9$ $5-9$ $10-19$ $10-19$ $20-34$ $20-34$ $35-49$ $35-49$ $50-99$ $50-99$ $100-499$ $100-499$ $500$ or more $500$ or more
<ul> <li>No</li> <li>Have not heard of law</li> <li>Not sure whether law applies to my business</li> </ul>	c. Approximately, what percentage of the employees who took family or medical leave in either year were male – During 1992? During 1994?
<ul> <li>26. Did this business have 50 or more employees (including full-time and part-time employees, and those on leave of absence) on its payroll for 20 or more calendar workweeks —</li> <li> During 1992? During 1994? Yes Yes No No </li> </ul>	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
27. Approximately, what percentage of your total number of employees worked at least 1,250 hours per year —         During 1992?       During 1994?         0%       0%         Less than 1%       Less than 1%         1%—4%       1%—4%         5%—9%       5%—9%         10%—24%       10%—24%         55%—49%       25%—49%         50%—74%       50%—74%         75%—100%       75%—100%	d. What was the typical length, in weeks, of family or medical leave taken by an employee —         During 1992?       During 1994?         Less than 1 week       Less than 1 week         1 week       1 week         2 weeks       2 weeks         3-4 weeks       3-4 weeks         5-7 weeks       8-12 weeks         More than 12 weeks       More than 12 weeks
28a. Did any employee of this business take family or medical leave —         During 1992?       During 1994?         Yes       Yes         No       No         If you marked " X No" for both years, SKIP to question 29 on page 11.	Continue with question 29 on page 11
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	ONE box for each of lines							
ſ				Yes	No			
I. Lea	e by mothers to care for ne	wborn child						
II. Lea	ve by fathers to care for new	wborn child			□ -			
	ve for newly-placed adopte							
	ave for own serious health o	•						
$\subseteq$	ve for care of seriously ill cl swered " X No" to each of				$ \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} \mathbf{r}} \mathbf{r}_{\mathbf{r}}^{\mathbf{r}} $	)		
this page	; otherwise CONTINUE with	h question 30a.		it the bot				
. Did the (FMLA)	changes in leave policies of 1993 impose any NEW	or practices requir costs on this busin	ed by the federal Fa less in 1994?	amily an	d Medical	Leave Ac	t	
	ONE box for each of lines							~
				No	Less than \$5,000	\$5,000 — \$9,999	\$10,000 or more	
	inistrative costs							
	tinuation of benefits (health							-
	ng/training costs							
	ier costs							)
includin above c	ss than 1% 10%—14	uses, and this busin ederal Family and N	ess's share of taxa	ble empl	ovee bene	efits, does	s the	
includin above c	g costs for salaries, bonu ost associated with the for 5 5%—9%	uses, and this busin ederal Family and N	ess's share of taxa	ble empl	ovee bene	efits, does	s the	
Have the (FMLA)	g costs for salaries, bonu ost associated with the fe 5 5%—9% ss than 1% 10%—14	uses, and this busin ederal Family and N where more so or practices required llowing effects on o	ess's share of taxa ledical Leave Act (I ired by the federal	ble empl FMLA) of FAMILY a	oyee bene f 1993 rep nd Medica	efits, does resent?		
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Have the (FMLA) ( Mark X I. Uns II. Em III. Em IV. En V. Em	g costs for salaries, bonuest associated with the forest associated with the forest associated with the forest forest associated with the forest f	ederal Family and N ederal Family and N where the second s	ess's share of taxal ledical Leave Act (I ired by the federal employees of this b	Family a pusiness Reduced	nd Medica noticeable effect	al Leave A Increased	Act	Code)

## **QUESTIONS AND ANSWERS REGARDING THE 1992 CHARACTERISTICS OF BUSINESS OWNERS SURVEY**

## Why is this survey being taken?

To provide valuable data for comparing selected economic, demographic, and sociological characteristics of business owners, self-employed persons, and their businesses. This survey is part of the economic census program, which the Census Bureau is required to conduct every 5 years by law (Title 13 of the United States Code). The Census Bureau combines data from this survey with data from the 1992 Economic Census and presents them in the Characteristics of Business Owners publication. The published data describe business owners and self-employed persons, including their education, capital requirements, owner's work experience, workforce characteristics, and business characteristics.

## Who uses the survey data?

Persons and institutions in both the public and private sectors extensively use these survey data. Accurate data regarding business ownership are critical to informed decision making by Federal, State, and local governments regarding business assistance programs. In addition, private companies and trade associations use the data to analyze trends; educators use them in teaching and research; and the media use them in news articles.

## Why was I selected for this survey?

You are part of a small sample of business owners that we randomly selected to represent your type of business and geographic area. The use of a sample substantially limits the reporting burden on small businesses and reduces the survey cost; however, it also greatly increases the importance of receiving a report from each business selected.

## What businesses are included in this survey?

Businesses were eligible to be selected for this survey if they reported any business activity on the 1992 Internal Revenue Service tax Form 1040, Schedule C, "Profit or Loss From Business "(Sole Proprietorship) or Schedule C-EZ, "Net Profit From a Business" (Sole Proprietorship).

## Can I be paid for completing this report?

No. The law (Title 13 of the United States Code) that directs the Census Bureau to conduct the economic census and requires firms to report does not authorize payment for completing census reports. In addition, no funds have been appropriated for this purpose.

## Is each survey response kept confidential?

Yes. By law, the Census Bureau cannot give individual responses to anyone (including government agencies) for any purpose. Survey responses are immune from legal action and exempt from the provisions of the Freedom of Information Act. Census Bureau publications summarize responses so that the confidentiality of respondents and their business activities is fully protected.

## Why is the Census Bureau asking questions about 1992 and 1994?

The complete sample for this survey cannot be selected until all collected data from the 1992 Economic Census are available. Use of these data delays the mailout of this survey, but allows us to reduce significantly the number of survey questions and the survey cost. To determine the viability of businesses in existence in 1992 and to improve the timeliness of the Characteristics of Business Owners publication, business owners are being asked about their 1994 economic activities.

## How can I get more information?

Call 1–800–354–7271 Monday through Friday, 8 a.m. to 5 p.m. eastern time. Our telephone staff can answer survey questions as well as provide you with additional forms and instructions.

## Please send the questionnaire in the preaddressed return envelope. If you did not receive a return envelope, send the questionnaire to the Bureau of the Census, 1201 East 10th Street, Jeffersonville, IN 47134-0001.

We estimate it will take 30 minutes or less to complete this questionnaire. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Administration, Paperwork Reduction Project 0640-0022, Room 3104, FB 3, Bureau of the Census, Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0640-0022, Washington, DC 20503.

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CBO-1 (10-1-94)

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS

PARTNERSHIP OR SUBCHAPTER S CORPORATION — BUSINESS CHARACTERISTICS CHARACTERISTICS OF BUSINESS OWNERS SURVEY **1992 ECONOMIC CENSUS** 

In correspondence pertaining to this report, please refer to this Census File Number (CFN)

CBO-2

OMB No. 0640-0022: Approval Expires 08/31/96

# DUE DATE: 15 DAYS AFTER RECEIPT OF FORM

Notice — Response to this inquiry is required by law (Title 13, U.S. Code). By the same law, your report to the Census Bureau is confidential. It may be seen only by sworn Census employees and may be used only for statistical purposes. The law also provides that copies retained in your files are immune from legal process.

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right.

Toll-free assistance, 8 a.m. to 5 p.m., eastern time. Monday through Friday: 1–800–354–7271

Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown

## **INSTRUCTIONS** — *Please Read*

The purpose of this questionnaire is to collect information about the characteristics of self-employed persons, business owners, and their business activities. The term business in the following questions refers to the self-employment or business activity for which you filed one of the following IRS tax forms in 1992:

a. Form 1065, "U.S. Partnership Return of Income"

b. Form 1120S, "U.S. Income Tax Return for an S Corporation"

Examples of a business enterprise that should complete this questionnaire:

- A partnership, limited partnership, syndicate, group, pool, joint venture, or similar unincorporated business that was not a trust, estate, or sole proprietorship in 1992.
- A corporation that elected to be an S corporation by filing Form 2553, "Election by a Small Business Corporation;" the IRS accepted the election; and the election remained in effect during 1992.

The questions apply to business activities during all or part of calendar years 1992 and 1994 and must be completed even if the business has since been sold, reorganized, or discontinued or you are no longer self-employed.

If the information requested is not available, your best estimate is acceptable.

Even if this questionnaire was mailed to your home address and the business is not located at this address, the form is applicable and must be completed.

Data provided by you will be used only for statistical purposes and will be kept strictly confidential.

## IMPORTANT — How to Fill Out This Form

Please use a #2 black lead pencil. Most questions ask you to mark X **IN** THE BOX, or to print the information. See **EXAMPLE** 

 $\stackrel{\text{HE BOX, or}}{\longrightarrow} \left( \begin{array}{c} \mathbb{Z}^{\text{Yes}} \\ \square \text{ No} \end{array} \right)$ 

FORM CBO-2

1a. Is the business that was in existence in 1992, referred to in the mailing label on page 1, still operating?            Yes - SKIP to question 2         No         Don't know - SKIP to question 2          b. What year did the operations discontinue?            1992         1994	<ul> <li>C. What was the source(s) from which this business received the money it borrowed? Mark  all that apply.</li> <li>Business loan from banking or commercial lending institution</li> <li>Government-guaranteed business loan from banking or commercial lending institution</li> <li>Business loan from Federal, State, or local government</li> <li>Business loan from investment company/profit</li> </ul>
<ul> <li>c. Which item below best describes the status of this business at the time the decision was made to cease operations?</li> <li>Successful — SKIP to question 2</li> <li>Unsuccessful</li> </ul>	<ul> <li>or nonprofit private source</li> <li>Business loan from previous owner</li> <li>Business trade credit from supplier</li> <li>Other business loan</li> </ul> d. What was the source(s) of this business's non-borrowed capital? Mark X all that apply.
<ul> <li>d. Why was this business unsuccessful? Mark  all that apply.</li> <li>□ Inadequate cash flow or low sales</li> <li>□ Lack of access to business loans/credit</li> <li>□ Other - Specify  ↓</li> </ul>	<ul> <li>None — 100% borrowed capital</li> <li>Use of partnership's/subchapter S corporation's business assets (building, motor vehicle, equipment, etc.)</li> <li>Proceeds from the sale of partnership's/ subchapter S corporation's business assets</li> <li>Partnership's/subchapter S corporation's cash</li> <li>Other — Specify z</li> </ul>
<ul> <li>2. What year was this business established?</li> <li>Before 1970 1989</li> <li>1970–1979 1990</li> <li>1980–1985 1991</li> <li>1986–1988 1992</li> </ul> 3a. What was the total amount of capital required to start/acquire this business? (Capital includes assets and money that were required of owners as well as those that the	<ul> <li>e. What measure(s) did this business take if it was producing inadequate cash flow or low sales after its initial investment of start-up/acquisition capital? Mark  all that apply.</li> <li>□ Did not occur - SKIP to question 4 on page 3</li> <li>□ Operated using existing cash reserves</li> <li>□ Invested additional capital</li> <li>□ Delayed payment to suppliers</li> <li>□ Other - Specify </li> </ul>
Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that were required of owners as were as those that the business borrowed.)         Imbrey that the business borrowed for this business's	
Page 2	Continue with question 4 on page 3

Mark X all that apply. No assistance received Federal government State and/or local government College or university Other business/franchisor Other - Specify ✓	During 1992?       During 1994?         Mark X all that apply.       Mark X all that apply.         Neighborhood       Neighborhood         City/county       City/county         Regional (adjoining counties and/or states)       Regional (adjoining counties and/or states)         National       National         International       International
5a. What was this business's total sales/gross receipts —         For the year of 1992?         Mark ⊠ ONE box only.         □ Less than \$5,000         □ \$5,000-\$9,999         □ \$10,000-\$24,999         □ \$25,000-\$49,999         □ \$25,000-\$49,999         □ \$25,000-\$49,999         □ \$25,000-\$49,999         □ \$25,000-\$49,999         □ \$25,000-\$49,999         □ \$200,000-\$249,999         □ \$200,000-\$199,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$249,999         □ \$200,000-\$499,999         □ \$250,000-\$499,999         □ \$200,000 or more         □ \$100,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more         □ \$1,000,000 or more      <	During 1992?       During 1994?         Less than 10%       Less than 10%         10%-24%       10%-24%         25%-49%       25%-49%         50%-74%       50%-74%         75% or more       75% or more         Don't know       Don't know         BEFORE taxes (as reported on its tax return) (Net profit or net loss is defined as total sales/gross receipts minus total expenses.)         For the year of 1992?       Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       \$10,000-\$24,999         \$25,000-\$99,999       \$25,000-\$99,999         \$100,000 or more       \$100,000 or more         For the year of 1994?       Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       \$10,000-\$24,999         \$25,000-\$99,999       \$100,000 or more         For the year of 1994?       Mark X ONE box only.         NET PROFIT       NET LOSS         Less than \$10,000       \$10,000-\$24,999         \$25,000-\$99,999       \$25,000-\$99,999         \$100,000 or more       \$100,000 or more         \$100,000 or more       \$10,000-\$24,999         \$100,000 or more       \$100,000 or more         \$100,000 or more       \$100,000 or mo
FORM CBO-2 (10-1-94)	Continue with question 6b on page 4 Page

During 1992? Mark X ONE box for each of lines I–VIII. Strong positive	Minor positive	Neutral	Minor negative	Strong negative	Not applicable	
impact I. Health insurance costs						
During 1994? Mark X ONE box for each of lines I—VIII. Strong positive impact	Minor positive impact	Neutral	Minor negative impact	Strong negative impact	Not applicable	<b>-</b>
I. Health insurance costs       II.         II. Credit market conditions       III.         III. IRS regulations or penalties       III.         IV. Environmental regulations       III.         V. The Americans with Disabilities Act       III.         VI. The Occupational Safety and Health Act (OSHA)       III.         VII. Lack of financial capital       VIII. Crime						
				<u> </u>		
bid this business have any paid employees in 1992 r 1994?	empl	loyees wei	re WOMEN		s business'	
	empl Dr	loyees we uring the p cluding M 992? <u>No</u> wo	re WOMEN pay period arch 12,	— Durir	ng the pay Iding March I? ] <u>No </u> women	per h 12
r 1994? Yes No — SKIP to question 8 on page 5 Ihat was this business's total employment — During the pay period including March 12, 1992? Uning the pay period During the pay p	empl Dr	uring the p cluding M 992? No wo emplo Less th 10%— 25%—	re WOMEN pay period arch 12, omen yees nan 10% 24% 49%	— Durir inclu	ng the pay Iding March 2 <u>No</u> women employees Less than 10%—24% 25%—49%	<b>per</b> h 12
r 1994? Yes No — SKIP to question 8 on page 5 /hat was this business's total employment — During the pay period including March 12, During March 12,	empl Dr	loyees wei uring the p cluding M 392? No wo emplo Less th 10%—	re WOMEN pay period arch 12, omen yees han 10% 24% 49% 74% r more	— Durir inclu	ng the pay Iding March ? ] <u>No</u> women employees ] Less than 7 ] 10%—24%	per h 12 10%

During the pay period including March 12,	During the pay period including March 12,	During 1994? Mark X ONE box only.	s were too high-priced
	<b>1994?</b> □ Less than 10% □ 10%-24% □ 25%-49% □ 50%-74% □ 75% or more □ Don't know tirement plan (profit	<ul> <li>Rejected by hea</li> <li>Dropped by this</li> <li>Not needed to a</li> </ul>	alth insurers s business's health insurer attract or retain employees ime employee turnover burden employees
including 401(k), annuity, Kee employees — During 1992? During Yes Q	ogh, ŠEP, etc.) to its 1994? es	<ol> <li>8. Was more than 50% of t controlled by close relat to spouses, parents/guardi</li> </ol>	tives — (Close relatives refer
f. Did this business offer any he employees in either 1992 or 7	994?	immediate family.)	uring 1994?
<ul> <li>Yes, both in 1992 and 199</li> <li>Yes, in 1992 only</li> <li>Yes, in 1994 only</li> <li>No, not in 1992 or 1994</li> </ul>	4 — SKIP to question 8	9. Was this business a fram	
g. What was the main reason th offer any health plan to its en <b>During 1992?</b> Mark X ONE box only.		During 1992? D	uring 1994?
<ul> <li>Costs/premiums were</li> <li>Rejected by health in</li> <li>Dropped by this busin</li> <li>Not needed to attract</li> </ul>	surers ness's health insurer or retain employees	10a. Was this business opera home — When first establishe	
High full-/part-time en	n		If you answered " [X] No" to all three questions, SKIP to question 10c on page 6.
Cont	nue with question 7g 🗪	Continue with q	uestion 10b on page 6

<ul> <li>To produce goods/services on the premises</li> <li>To do clerical work (goods/services produced off the premises)</li> <li>To telecommute (outside employment doing office work at home)</li> </ul>	<ul> <li>□ No - SKIP to question</li> <li>□ Yes, only during 1995</li> <li>□ Yes, only during 1996</li> <li>□ Yes, during 1992 and</li> </ul>	2
Does the ZIP Code, referred to in the mailing label on page 1, indicate this business's actual physical location in 1992? Yes No — Please supply ZIP Code No — Please supply ZIP Code Mark [] all that apply. Arabic Chinese	<ul> <li>b. What percent of this busin accounted for by exports of States -</li> <li>For the year 1992? Mark X ONE box only.</li> <li>Less than 1%</li> <li>1%—9%</li> <li>10%—24%</li> <li>25%—49%</li> <li>50%—74%</li> <li>50%—74%</li> <li>75%—99%</li> <li>100%</li> <li>Don't know</li> </ul> c. Check any of the following the destination for 10% or total exports —	For the year 1994?         Mark ∑ ONE box only.         □         Less than 1%         □         □         1%—9%         □         10%—24%         □         25%—49%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         □         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0%         0% </th
<ul> <li>☐ English</li> <li>☐ French</li> <li>☐ Gerek</li> <li>☐ Hindi (Urdu)</li> <li>☐ Italian</li> <li>☐ Japanese</li> <li>☐ Korean</li> <li>☐ Polish</li> <li>☐ Portuguese</li> <li>☐ Russian</li> <li>☐ Spanish</li> <li>☐ Tagalog</li> <li>☐ Vietnamese</li> <li>☐ Other — Specify ▼</li> </ul>	During 1992.         Africa         Asia         Australia/Oceania         Canada         Caribbean/         Central America         Europe         Japan         Mexico         Middle East         South America	During 1994.
Continue with question 12a	Continue with que	stion 12d on page 7

				Yes I	No Not
I. International Trade Administration, U.S. Department of Comm II. Small Business Development Centers, Small Business Admin III. Minority Business Development Agency, U.S. Department of IV. Export-Import Bank	istration . Commerc	ce	· · · · · · · · · · · · · · · · · · ·		
VIII. Other — Specify $\mathbf{z}$					
low long had this business been involved in exporting befo	re Decem	1ber 31, 19	92?		
Less than 1 year					
☐ 1—5 years ☐ 6—10 years					
☐ More than 10 years					
s this business planning on starting or increasing its export	s in the n	near future	?		
Yes No			?		
☐ Yes			?		
Yes No			? Not important	Not applicable	Don't know
☐ Yes         ☐ No         Are the following issues important to this business's ability         Mark X ONE box for each of lines I—IX.         I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
Yes         No         Are the following issues important to this business's ability         Mark X ONE box for each of lines I—IX.         I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
☐ Yes         ☐ No         Are the following issues important to this business's ability         Mark X ONE box for each of lines I—IX.         I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
☐ Yes         ☐ No         Are the following issues important to this business's ability         Mark X ONE box for each of lines I—IX.         I. Export financing .         II. Information on export opportunities .         III. Foreign trade restrictions .         IV. U.S. trade restrictions .         V. Competition in the foreign market .	to expor	<b>t?</b> Somewhat	r Not		
Yes No Are the following issues important to this business's ability Mark X ONE box for each of lines I—IX. I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
Yes No Are the following issues important to this business's ability Mark X ONE box for each of lines I—IX. I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
☐ Yes         ☐ No         Are the following issues important to this business's ability         Mark X ONE box for each of lines I—IX.         I. Export financing .         II. Information on export opportunities .         III. Foreign trade restrictions .         IV. U.S. trade restrictions .         V. Competition in the foreign market .         VI. Price of this business's exports .         VII. Dollar exchange rate .	to expor	<b>t?</b> Somewhat	r Not		
Yes No Are the following issues important to this business's ability Mark X ONE box for each of lines I—IX. I. Export financing	to expor	<b>t?</b> Somewhat	r Not		
Yes No Are the following issues important to this business's ability Mark X ONE box for each of lines I—IX. I. Export financing	to expor	t? Somewhat important	Not important		know

FORM CBO-2 (10-1-94)

To Canada?       To Mexico?         Yes       Yes         No       No         Vill this business relocate some of its production acilities as a result of the North American Free Trade Agreement —	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
To Canada?       To Mexico?         Yes       Yes         No       No	17a. Did any employee of this business take family of medical leave —
Please read	During 1992?         During 1994?           Yes         Yes           No         No
Ilowing questions relate to family or medical leave taken by yees. In this context, the terms "family leave" and "medical have the same meaning as under the federal Family and al Leave Act (FMLA) of 1993 — a law that requires covered yers to provide unpaid, job-protected leave to employees their own serious health condition, including pregnancy ildbirth ("medical leave") and (b) to care for a newborn, placed adopted or foster child, or seriously ill child, spouse,	<i>page 9.</i> <b>b. How many employees took family or medical le</b> <b>During 1992? During 1994?</b> 1-4 $1-45-9$ $5-910-19$ $10-1920-34$ $20-3435-49$ $35-4950-99$ $50-99100-499$ $100-499500  or more$ $500  or more$
ent ("family leave"). s your business covered by the federal Family and ledical Leave Act (FMLA) of 1993?	c. Approximately, what percentage of the employe took family or medical leave in either year were
☐ Yes         ☐ No         ☐ Have not heard of law         ☐ Not sure whether law applies to my business         Did this business have 50 or more employees         ncluding full-time and part-time employees, and         hose on leave of absence) on its payroll for 20 or         hore calendar workweeks —         During 1992?       During 1994?         ☐ Yes       ☐ Yes         ☐ No       ☐ No	During 1992?       During 1994?         0%       0%         Less than 1%       Less than 1%         1%-4%       1%-4%         5%-9%       5%-9%         10%-24%       10%-24%         25%-49%       25%-49%         50%-74%       50%-74%         75%-100%       75%-100%

During 1992?	During 1994?				
Less than 1 week	Less than 1 week				
1 week	1 week				
$\square$ 2 weeks	$\square$ 2 weeks –				
$\square$ 3—4 weeks	$\square$ 3—4 weeks				
$\square$ 5—7 weeks	$\square$ 5–7 weeks				
8—12 weeks	□ 8—12 weeks -				
More than 12 weeks	More than 12 weeks				
e federal Family and Medical	ess to change its following leave Leave Act (FMLA) of 1993?	e policies and pra	actices to	comply w	vith
rk $X$ ONE box for each of lines	\$ 1—V.	N <sub>2</sub> .		N	
		Yes	No		
I. Leave by mothers to care for	newborn child				
II. Leave by fathers to care for 1	newborn child	🛛			
III. Leave for newly-placed ado	oted or foster child	🛛			
IV. Leave for own serious healt	h condition, including childbirth .	🛛			
V. Leave for care of seriously il	I child, spouse, or parent				
If you answered " X A	lo" to each of lines I—V, SKIP to the	Certification box	on nage 1	0 <sup>.</sup> otherwis	se nlease
continue with question	es or practices required by the f	ederal Family an	d Medical	Leave Ac	t
d the changes in leave polici /ILA) of 1993 impose any NE	es or practices required by the f W costs on this business in 1994	ederal Family and 4?	1	Leave Ac	·
d the changes in leave polici NLA) of 1993 impose any NE	es or practices required by the f W costs on this business in 1994	ederal Family and 4? No	Less than	\$5,000 —	t \$10,000 or
d the changes in leave polici NLA) of 1993 impose any NE	es or practices required by the f W costs on this business in 1994	4?	Less	1	\$10,000
d the changes in leave polici /ILA) of 1993 impose any NE ork 🛛 ONE box for each of lines	es or practices required by the f W costs on this business in 1994	4? No	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE Information of lines I. Administrative costs	es or practices required by the f W costs on this business in 199 s I—IV.	No	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ark X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea	es or practices required by the f W costs on this business in 1994 s I—IV.	•••••••••••••••••••••••••••••••••••••	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ark X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs	es or practices required by the f W costs on this business in 1994 s I—IV.	4? No □ □	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ark X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs	es or practices required by the f W costs on this business in 1994 s I—IV.	4? No □ □	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ark X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs	es or practices required by the f W costs on this business in 1994 s I—IV.	4? No □ □	Less than	\$5,000 —	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ark X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs IV. Other costs	es or practices required by the f W costs on this business in 1994 s I—IV.	•••••••••••••••••••••••••••••••••••••	Less than \$5,000	\$5,000 — \$9,999 □ □ □	\$10,000 or
d the changes in leave polici MLA) of 1993 impose any NE ork X ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs IV. Other costs Poproximately, what percenta	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
the changes in leave polici <b>ALA</b> ) of 1993 impose any NE <i>I. Administrative costs</i> I. Continuation of benefits (hea III. Hiring/training costs IV. Other costs <b>Proximately, what percenta</b> <b>Studing costs for salaries, bo</b>	es or practices required by the f W costs on this business in 1994 a I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as rep	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
d the changes in leave polici MLA) of 1993 impose any NE ork I ONE box for each of lines I. Administrative costs II. Continuation of benefits (hea III. Hiring/training costs IV. Other costs proximately, what percenta cluding costs for salaries, bo ove cost associated with the	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
d the changes in leave polici         /ILA) of 1993 impose any NE         rk () ONE box for each of lines         I. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         proximately, what percenta         cluding costs for salaries, boo         ove cost associated with the         0%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
a the changes in leave polici         ALA) of 1993 impose any NE         ILA) of 1993 impose any NE         rk (I) ONE box for each of lines         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         proximately, what percenta         cluding costs for salaries, bo         ove cost associated with the         0%         Less than 1%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
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a the changes in leave polici         ALA) of 1993 impose any NE         rk () ONE box for each of lines         rk () ONE box for each of lines         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         proximately, what percenta         cluding costs for salaries, boo         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
a the changes in leave polici         ALA) of 1993 impose any NE         rk () ONE box for each of lines         rk () ONE box for each of lines         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         proximately, what percenta         cluding costs for salaries, boo         ove cost associated with the         0%         Less than 1%         1%—4%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
d the changes in leave polici         ALA) of 1993 impose any NE         rk () ONE box for each of lines         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         of the costs         proximately, what percenta         cluding costs for salaries, boo         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
d the changes in leave polici         MLA) of 1993 impose any NE         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%         10%—14%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	4?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or more
d the changes in leave polici         MLA) of 1993 impose any NE         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%         10%—14%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	A?	Less than \$5,000	\$5,000 — \$9,999 — — — — — — — — — — — — — — — — —	\$10,000 or D D D the
d the changes in leave polici         MLA) of 1993 impose any NE         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%         10%—14%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	A?	Less than \$5,000	\$5,000 — \$9,999 	\$10,000 or D D D the
d the changes in leave polici         MLA) of 1993 impose any NE         I. Administrative costs         II. Administrative costs         II. Continuation of benefits (heat         III. Hiring/training costs         IV. Other costs         ove cost associated with the         0%         Less than 1%         1%—4%         5%—9%         10%—14%	es or practices required by the f W costs on this business in 1994 s I—IV. alth plan, etc.) during leave ge of 1994 annual payroll (as reg nuses, and this business's share	A?	Less than \$5,000	\$5,000 — \$9,999 	\$10,000 or D D D the

(FMLA) of 1993 had any of the following effects $Mark X$ ONE box for each of lines I—V.	on employees of this	s business?
		No Reduced noticeable Increased effect
I. Unscheduled absences not related to family and         II. Employee turnover         III. Employee productivity         IV. Employee morale		
V. Employees' ability to handle family needs		
arks		
Please send the questionnaire i receive a return envelope, send 1201 Fast 10th Street Jeffersor	the questionnaire to	the Bureau of the Census,
receive a return envelope, send 1201 East 10th Street, Jeffersor	the questionnaire to ville, IN 47134-0001.	the Bureau of the Census,
receive a return envelope, send 1201 East 10th Street, Jeffersor <b>THANK YOU FOR CO</b>	the questionnaire to ville, IN 47134-0001. MPLETING THIS	the Bureau of the Census, S OUESTIONNAIRE.
receive a return envelope, send 1201 East 10th Street, Jeffersor <b>THANK YOU FOR CC</b> <b>CERTIFICATION — Please print n</b>	the questionnaire to ville, IN 47134-0001. MPLETING THIS	the Bureau of the Census, S QUESTIONNAIRE. nsible for completing this report.
receive a return envelope, send 1201 East 10th Street, Jeffersor <b>THANK YOU FOR CO</b>	the questionnaire to ville, IN 47134-0001. MPLETING THIS	the Bureau of the Census, S OUESTIONNAIRE.

## **QUESTIONS AND ANSWERS REGARDING THE 1992 CHARACTERISTICS OF BUSINESS OWNERS SURVEY**

## Why is this survey being taken?

To provide valuable data for comparing selected economic, demographic, and sociological characteristics of business owners, self-employed persons, and their businesses. This survey is part of the economic census program, which the Census Bureau is required to conduct every 5 years by law (Title 13 of the United States Code). The Census Bureau combines data from this survey with data from the 1992 Economic Census and presents them in the Characteristics of Business Owners publication. The published data describe business owners and self-employed persons, including their education, capital requirements, owner's work experience, workforce characteristics, and business characteristics.

### Who uses the survey data?

Persons and institutions in both the public and private sectors extensively use these survey data. Accurate data regarding business ownership are critical to informed decision making by Federal, State, and local governments regarding business assistance programs. In addition, private companies and trade associations use the data to analyze trends; educators use them in teaching and research; and the media use them in news articles.

## Why was I selected for this survey?

You are part of a small sample of businesses that we randomly selected to represent your type of business and geographic area. The use of a sample substantially limits the reporting burden on small businesses and reduces the survey cost; however, it also greatly increases the importance of receiving a report from each business selected.

## What businesses are included in this survey?

Businesses were eligible to be selected for this survey if they reported any business activity on the 1992 Internal Revenue Service tax form 1065, "U.S. Partnership Return of Income," or form 1120S, "U.S. Income Tax Return for an S Corporation". To survey its owner characteristics, each selected business is being asked to distribute respectively the Characteristics of Business Owner Survey Form CBO-3 to those partners or shareholders who received a 1992 IRS form 1065, Schedule K-1, "Partner's Share of Income, Credits, Deductions, etc." or form 1120S, Schedule K-1, "Shareholder's Share of Income, Credits, Deductions, etc.".

## Can I be paid for completing this report?

No. The law (Title 13 of the United States Code) that directs the Census Bureau to conduct the economic census and requires firms to report does not authorize payment for completing census reports. In addition, no funds have been appropriated for this purpose.

### Is each survey response kept confidential?

Yes. By law, the Census Bureau cannot give individual responses to anyone (including government agencies) for any purpose. Survey responses are immune from legal action and exempt from the provisions of the Freedom of Information Act. Census Bureau publications summarize responses so that the confidentiality of respondents and their business activities is fully protected.

## Why is the Census Bureau asking questions about 1992 and 1994?

The complete sample for this survey cannot be selected until all collected data from the 1992 Economic Census are available. Use of these data delays the mailout of this survey, but allows us to reduce significantly the number of survey questions and the survey cost. To determine the viability of businesses in existence in 1992 and to improve the timeliness of the Characteristics of Business Owners publication, business owners are being asked about their 1994 economic activities.

## How can I get more information?

Call 1–800–354–7271 Monday through Friday, 8 a.m. to 5 p.m. eastern time. Our telephone staff can answer survey questions as well as provide you with additional forms and instructions.

We estimate it will take 30 minutes or less to complete this questionnaire. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Administration, Paperwork Reduction Project 0640-0022, Room 3104, FB 3, Bureau of the Census, Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0640-0022, Washington, DC 20503.

		Notice Code). It may statistio	
HISTORY-1992	ECON		NSUS

CBO-3

U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS FORM CHARACTERISTICS OF BUSII

## PARTNERSHIP OR SUBCHAPTER S CORPORATION - OWNER CHARACTERISTICS CHARACTERISTICS OF BUSINESS OWNERS SURVEY

In correspondence pertaining to this report, please refer to this Census File Number (CFN) **CBO-3** 

OMB No. 0640-0022: Approval Expires 08/31/96

# DUE DATE: 15 DAYS AFTER RECEIPT OF FORM

Notice — Response to this inquiry is required by law (Title 13, U.S. Code). By the same law, your report to the Census Bureau is confidential. It may be seen only by sworn Census employees and may be used only for statistical purposes. The law also provides that copies retained in your files are immune from legal process.

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right.

Toll-free assistance, 8 a.m. to 5 p.m., eastern time. Monday through Friday: 1-800-354-7271

## The questions apply to business activities during all or part of calendar years 1992 and 1994 and must be completed even if the business has since been sold, reorganized, or discontinued or you are no longer self-employed. For a child who is a shareholder, the Data provided by you will be used only for statistical purposes and will be kept strictly Even if this questionnaire was mailed to your home address and the business is not Please correct errors in name, address, and ZIP Code. ENTER street and number if not shown. If the information requested is not available, your best estimate is acceptable. $X_{\sf Yes}$ °N || located at this address, the form is applicable and must be completed child's parent or guardian must complete the questions for the child. IMPORTANT — How to Fill Out This Form Please use a #2 black lead pencil. Most questions ask you to mark $X \mid N THE BOX$ , or to print the See EXAMPLE information. **INSTRUCTIONS** — *Please Read* confidential b. Schedule K-1 (Form 1120S) "Shareholder's Share of Income, Credits, Deductions, etc." or similar unincorporated business that was not a trust, estate, or sole proprietorship in 1992. • A member in a partnership, limited partnership, syndicate, group, pool, joint venture 2553, "Election by a Small Business Corporation", the IRS accepted the election, and the election remained in effect during 1992. The term business in the following questions refers to the self-employment or business The purpose of this questionnaire is to collect information about the characteristics of a. Schedule K-1 (Form 1065) "Partner's Share of Income, Credits, Deductions, etc.", or A shareholder in a corporation that elected to be an S corporation by filing Form Examples of a person, considered a business owner, who should complete this self-employed persons, business owners, and their business activities. activity for which you filed one of the following IRS tax forms in 1992 questionnaire:

PLEASE TURN THIS BOOKLET OVER AND BEGIN THE SURVEY WITH QUESTION 1a.

Page 1

Please read the instructions on page 1 of this booklet and BEGIN the survey with question 1a below.	5a. What was your veteran status as of December 31, 1992?	ler 31, 1992?	
Do you still share ownership in the same business, referred to in the mailing label on page 1, that you owned in 1992? $\Box  \Box  \text{Yes} - SKIP$ to question 2 $\Box$ No	<ul> <li>Not a veteran — SKIP to question b</li> <li>Less than 6 months active duty — SKIP to</li> <li>6 months or more active duty — Complete</li> </ul>	n b – SKIP to question 5c Complete questions 5b and 5c	
b. What year did your ownership end?	b. Was any of your active duty served during the Vietnam-era (i.e., any service between August 5, 1964 and May 7, 1975)?	<b>he Vietnam-era</b> (i.e., 1975)?	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			
he item the questi	c. Are you a disabled veteran?		
Sold	Ive healt	Irce —	
Business no longer exists	During 1992?	During 1994? Yes, through spouse's insurer	
What is your gender?	- Ves, through this business's	Yes, through this business's insurer	
Male Female		Yes, through another business's insurer Yes, through trade	
What was your age as of December 31, 1992?	- association's insurer	association's insurer Yes, through some other source	
□ Under 25 □ 45—54		No	
□ 25—34 □ 55—64 □ 35—44 □ 65 or older	7a. How much schooling had you completed when you started/acquired your portion of this business?	nen you started/acquired your	1
b. Were you born in the United States?	Mark $[X]$ ONE box for the highest level completed or degree received.	ed or degree received.	
Tyes I No	Less than 9th grade	Some college, but no degree	
What was your marital status —	H High school graduate — DIPLOMA or EQUIVALENT DIPLOMA (GED)	Bachelor's Degree	
On the date that you started/ acquired ownership or your portion of the ownership of this husiness?	Technical, trade, or vocational school	Professional School or Doctorate	
Never married Divorced/separated     Married Widowed	<ul> <li>b. If you attended college or other school beyond high school, what was your area of concentration?</li> </ul>	ond high school,	
ber 31, 1992?	Architecture/Engineering	Liberal Arts/General Studies Mathematics	
Never married     Divorced/separated       Married     Unidowed	Business     Computer Science     Construction Trade/Industrial Arts	Military Technologies Other college Other vocational	
	□ Law and Legal Studies		
FORM CBO-3 (10-1-94) Pa	T Page 2 Continue wi	Continue with question 8a on page 3	

e.	result of this business -         For the year of 1992?         For the year of 1994?       For the year of 1994?         Image: Image with the probability of the probability	or your p 1990 [19900 [1990 [1990 [1990 [1990 [1990 [1990 [1990 [1990 [1990 [1	<ul> <li>To have a secondary source of income</li> <li>To have work which conforms</li> <li>To have work which conforms</li> <li>To have work which conforms</li> <li>To have work not available</li> <li>To have work not available</li> <li>To have more freedom to</li> <li>To have more freedom to</li> </ul>	12a. What was the total amount of capital required to start/acquire your portion of the ownership in this business? (Capital includes assets and money that were your own, that were given to you, and that you borrowed.)         Image: The ownership in this business? (Capital includes assets and money that were your own, that were given to you, and that you borrowed.)         Image: The ownership in this business? (Capital includes assets and money that were your own, that were given to you, and that you borrowed.)         Image: The ownership in this business? (Capital includes assets and money that were your own, that were given to you, and that you borrowed.)         Image: The ownership in this business? (Capital includes assets and money that were your own, that were given to you, and that you borrowed.)         Image: The ownership in the ownership in the ownership in the ownership in the ownership in the ownership in the ownership includes assets and money that were you.         Image: The ownership in the ownership in the ownership includes assets and money that were you.         Image: The ownership in the ownership in the ownership includes a the ownership in the ownership includes assets and money that were you.         Image: The ownership in the own	Continue with question 12b on page 4
Page 3 8a. Prior to beginning/acquiring this business, had any of your close relatives 10	ever owned a business OK been self-employed? (Close relatives refer to spouses, parents/guardians, brothers, sisters, or immediate family.)          Image: Spouses, parents/guardians, brothers, sisters, or immediate family.)         Image: Spouses, parents/guardians, brothers, sisters, or immediate family.)         Image: Spouses, parents/guardians, brothers, sisters, or immediate family.)         Image: Spouses, parents/guardians, brothers, sisters, or immediate family.)         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/guardians, protection game         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme         Image: Spouses, parents/gramme	risiness? $ \vec{x}\rangle - SKP to$ $ \vec{x}\rangle - SKP to$ ars did you v $ \vec{n}\rangle = 6 - (1) - 10 - 10 - 10 - 10 - 10 - 10 - 10 - $	d. Did you previously work for a business whose goods/service(s) were similar to those provided by this business?         10a. What was YOUR total personal income - (Do NOT include income from spouse or other family members.)	<ul> <li>★ X ONE box only.</li> <li>\$25,000-\$34,999</li> <li>\$35,000-\$49,999</li> <li>\$150,000 or more</li> <li>\$50,000-\$74,999</li> <li>\$150,000 or more</li> <li>\$75,000-\$99,999</li> <li>\$75,000-\$99,999</li> <li>\$25,000-\$34,999</li> <li>\$100,000-\$149,999</li> </ul>	355,000

HISTORY-1992 ECONOMIC CENSUS