Form MC-2024 Page 5 Census File Number If not shown, please enter your 11-digit Census File Number from the address label on page 1 Item 17 - Not applicable to this report Item 18A. TYPE OF OPERATIONS PERFORMED AT THIS ESTABLISHMENT DURING 1997 Key Mark (X) appropriate boxes 591 1. Are you a retail bakery establishment selling for general public consumption? 1□ Yes 2☐ No 2☐No 1☐ Yes **2.** Do you bake on the premises? 593 If "No" to either of the above, describe your principal activity in the REMARKS section on page 6. ₁☐ Yes 2 No 594 Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1997 **INSTRUCTIONS** 3. Contract Work – Report PRODUCTS MADE BY OTHERS FOR YOU FROM YOUR MATERIALS on the specific lines as if they were made in this establishment. On the other hand, do not report on the specific product lines PRODUCTS THAT YOU MADE FROM MATERIALS OWNED BY OTHERS. Report only the amount that you received for "commission or contract receipts" under Census product code 93000 00 8. General – The manufactured products and services listed below are generally made in your industry. If you make products that are not listed, describe and report them in the "All other products made in this establishment" section at the end of item 18B. PLEASE DO NOT COMBINE PRODUCT LINES. If quantities are requested, please use the unit of measure specified. If the information as requested cannot be taken directly from your book records, REASONABLE ESTIMATES ARE ACCEPTABLE. 4. Resales - Do not report on the specific product lines those PRODUCTS BOUGHT AND SOLD OR TRANSFERRED FROM OTHER ESTABLISHMENTS OF YOUR COMPANY AND SOLD WITHOUT FURTHER MANUFACTURE. Report only a value under Census product code 99989 00 6, "Resales." 2. Valuation of Products — Report the value of the products shipped and services performed at the net selling value, f.o.b. plant to the customer; i.e., after discounts and allowances, and exclusive of freight charges and excise taxes. 5. Detailed Data Reported Elsewhere - Items denoted by an asterisk (*) require totals for groups of products covered in the more frequent Current Industrial Reports (CIR). If you report on the CIR forms, the sum of the detailed CIR products should equal the total reported on this census form. If you transfer products to other establishments within your company, you should assign the full economic value to the transferred products; i.e., include all direct costs of production and a reasonable proportion of all other costs and profits.

Products shipped and other receipts Census Value, f.o.b. plant product Products and services code **(E)** Line 581 584 Thou-Millions sands | Dollars (A) (B) \$ Bread and rolls (excluding bagels) 54610 11 8 54610 13 4 2 Bagels Cakes 54610 15 9 4 Cookies 54610 17 5 54610 19 1 5 Doughnuts 6 Pies 54610 21 7 54610 90 2 Other sweet goods (sweet rolls, coffeecakes, pastries, danishes, muffins, etc.) 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. Specify unit of measure for quantity. For all remaining products, write "Other" and report a single total value. ALL OTHER PRODUCTS MADE IN THIS ESTABLISH-MENT 18 8 26 34 10 42 11 59 12 67 13

CONTINUE WITH ITEM 18B ON PAGE 6

Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1997 - Continued											
	Products and services						Censu	S F	Products shipped and other receipts		
No.							produc	ct	Value, f.o.b. plant (E)		
Line No.						581	58	4	l l Thou- l		
	(A)						(B)		Millions	sands	Dollars
14	CONTRACT WORK (Receipts for work done for o	others or	their c	own mate	erials)		93000 0	08 \$			
-	MISCELLANEOUS RECEIPTS (Including repair w			•			99980 0	0 5		 	
16	RESALES (Items bought and sold without furthe assembly in this establishment)	er manuf	acture,	processii	ng, or		99989 0	0 6		 	
17	TOTAL value of shipments and other I Sum of lines 1–16, column (E)	receipts					77000 0	08 \$			
lt	Items 19–21 – Not applicable to this report										
	EMARKS - Please use this space for any explan										
Item 22. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions.											
	ame of person to contact regarding this report (Print or	type)	Te	elephon	Area e 2	code Nu	mber		Exten	sion
	ame of company				-		treet, city, S	State, Z	IP Code)	<u>I</u>	
	eriod covered FROM: Month I I I I I I I I I I I I I I I I I I I	Day	Yea	ar	TO: N	lonth		Day	Date	Year	
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