U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

FORM

**OS-81201** 

## 2002 ECONOMIC CENSUS PERSONAL CARE SERVICES

OMB No. 0607-0887: Approval Expires 09/30/2004

## DUE DATE FEBRUARY 12, 2003

Mail your completed form to:
U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47134-0001

**Please read** the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

**Visit** our Web site at www.census.gov/econhelp

**Call** 1-800-233-6136, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.

- OR -

**Write** to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

OS-81201

## INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

in the second se		. 9	,				
YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, that receive this questionnaire to answer the questions and return the report law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only be of Census Bureau information and may be used only for statistical purposes files are immune from legal process.	t to the U.S. v persons sw	Censi orn t	us Bure: o uphol	au. By d the d	the sonfid	same lentia	e ality
<ul> <li>Use blue or black ink.</li> <li>Please center numbers in their respective boxes.</li> </ul>	. Examples:						
<ul> <li>Do not use pencil.</li> <li>Do not put slashes through 0 or 7.</li> </ul>				4 -		~ .	
• Place an "X" inside the box.	X	0 1	1 2 3	4 5	6	1 8	9
The reporting unit for this form is an establishment. An <b>establishment</b> is a where business is conducted or where services or industrial operations are information sheet(s).	generally a si performed. I	ingle For fu	physica irther cla	l locati arificat	on ion, s	see	
1 MONTHS IN OPERATION			Mark "X"	,	200	2	
• · · · · · · · · · · · · · · · · · · ·			if None	Num	ber of	mon	iths
Number of months in operation during 2002 (If none, mark "X" and go to 29	).)	. 0002					
EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the establishment on its latest 2002 Internal Revenue Service Form 941, Employ  Occupant  Yes Occupant  No - Enter current EIN (9 digits)	er's Quarterl	he on ly Fed	le used leral Tax	for this Retur	s rn?		
PHYSICAL LOCATION  A. Is this establishment's physical location the same as shown in the mailir (P.O. box and rural route addresses are not physical locations.)	ng address?						
0035 Number and street							
0031							
Once City, town, village, etc.	0037 State	0000 -	ZID Cada				
No - Enter physical→ 0036 City, town, village, etc.	0037 State	0038 2	ZIP Code				
		ı		-			ı
<b>B.</b> Is this establishment physically located inside the legal boundaries of the	e city, town,	villag	e, etc.?				
0041 ☐ Yes 0042 ☐ No 0043 ☐ No legal boundaries	0044		Do not	know			
C. Type of municipality where this establishment is physically located							
on46 City, village, or borough	0048		Other o	r do n	ot kn	ΟW	

Form **OS-81201** Page 2

HOW TO REPORT DOLLAR	Dollar figures should be <b>rounded</b> to		N/I // V//			
REPORT			Mark "X"		2002	T .
	thousands of dollars.		if None	\$ Mil.	Thou.	Dol
	If a figure is \$1,025,628.79:	eport ——	<b>▶</b> □	1	0 2 6	
FIGURES	If a value is "0" (or less than \$500.00):	eport ———	$\triangleright$			
CALEC CHIDAEN	ITC. DECEMPTS, OR DEVENUE	-				
SALES, SHIPMEN	ITS, RECEIPTS, OR REVENUE		Mark "X"		2002	
			if None	\$ Mil.	Thou.	Dol
Operating receipt leased stations/bo	s (Beauty shops and barber shops should include rents ooths.)	<i>from</i> 010	0 🗆			
E-COMMERCE SA	ALES, SHIPMENTS, RECEIPTS, OR REVENUE					
receipts, and/o (EDI) network, transfer owne	lishment have any e-commerce sales, receipts, and/or re or revenue from any transaction completed over an Inte , electronic mail, or other online system. Transactions a rship of, or rights to use, goods or services. Payment f Please see the information sheet(s) for further clarificat	rnet, Extranet, are agreements or these goods	Electroni betweer	c Data Int Duyers a	erchange nd sellers	to
□ v <sub>aa</sub>	C- 4- I: D				2002	
<sub>0181</sub>	- Go to line B					
	- Go to line B Go to 🗿			Estimate	s are accept	table
П.				Estimate \$ Mil.	s are accept	1
B. E-commerce s sales, receipts  EMPLOYMENT AI	Go to 6 sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 6. Exclude sales taxes.)		- 0185	\$ Mil.	Thou.	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  Full- and pair Service Form	Go to 6 sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 4. Exclude sales taxes.)	payroll was re	on 185	\$ Mil.	Thou.	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  Full- and pair Service Form	Go to 6  sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 7. Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file	payroll was re	on 185	\$ Mil.	Thou.	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  • Full- and pai Service Form (EIN) shown  Exclude:	Go to 6  sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 7. Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file	payroll was re	0185 ported or mployer l	\$ Mil.	Thou.  Revenue on Numbe	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  Full- and pair Service Form (EIN) shown  Exclude:  Full- or part-	Go to 6  sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 2. Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in 2.	payroll was re	onted or ported or poloyer I	\$ Mil.	Revenue fon Numbe	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  • Full- and pair Service Form (EIN) shown  Exclude:  • Full- or part- • Temporary s	Go to 6  sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in 4. Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in 2.  -time leased employees whose payroll was filed under a	payroll was re	ported or poloyer I	\$ Mil.	Thou.  Revenue on Numbe	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  • Full- and pair Service Form (EIN) shown  Exclude:  • Full- or part- • Temporary s  For further clarific	sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in . Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in .  -time leased employees whose payroll was filed under a staffing obtained from a staffing service.	payroll was re ed under the Er	ported or poloyer I asing cor Ma	\$ Mil.  Internal dentification mpany's E	Revenue fon Number	Dol
B. E-commerce s sales, receipts  EMPLOYMENT AI  Include:  • Full- and pair Service Form (EIN) shown  Exclude:  • Full- or part- • Temporary s  For further clarific	sales, receipts, and/or revenue of this establishment (Inc. s., and/or revenue in . Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in .  -time leased employees whose payroll was filed under a staffing obtained from a staffing service.  cation, see information sheet(s).	payroll was re ed under the Er	ported or mployer l asing cor Ma if	\$ Mil.  Internal dentification mpany's E	Revenue on Number	Dol
B. E-commerce s sales, receipts  EMPLOYMENT All  Include:  Full- and pair Service Form (EIN) shown  Exclude:  Full- or part- Temporary s  For further clarific  A. Number of em	sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in . Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in .  -time leased employees whose payroll was filed under a staffing obtained from a staffing service.  cation, see information sheet(s).	payroll was re ed under the En	ported or poloyer I asing cor Ma	\$ Mil.  Internal dentification mpany's Eark "X" None	Revenue fon Number 2002	Dol
B. E-commerce s sales, receipts  EMPLOYMENT All  Include:  • Full- and pair Service Form (EIN) shown  Exclude:  • Full- or part- • Temporary so For further clarified  A. Number of em  B. Payroll before	sales, receipts, and/or revenue of this establishment (Inc. s., and/or revenue in . Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in .  -time leased employees whose payroll was filed under a staffing obtained from a staffing service.  cation, see information sheet(s).  Inployees for pay period including March 12	payroll was reed under the En	ported or mployer I asing cor Ma if . 0320 Mark "X" if None	\$ Mil.  Internal dentification mpany's E	Revenue on Number	Dol
B. E-commerce s sales, receipts  EMPLOYMENT All  Include:  • Full- and pair Service Form (EIN) shown  Exclude:  • Full- or part- • Temporary so For further clarified  A. Number of em  B. Payroll before	sales, receipts, and/or revenue of this establishment (Inc., and/or revenue in . Exclude sales taxes.)  ND PAYROLL  rt-time employees working at this establishment whose in 941, Employer's Quarterly Federal Tax Return, and file in the mailing address or corrected in .  -time leased employees whose payroll was filed under a staffing obtained from a staffing service.  cation, see information sheet(s).	payroll was reed under the En	ported or mployer I asing cor Ma if . 0320 Mark "X" if None	\$ Mil.  Internal dentification mpany's Eark "X" None	Revenue fon Number 2002	Dol

orm OS-81201 Page 3

-0riii 03-61201			F	age 3
If not shown, please ento Number (CFN) from the I	er your 11-digit Census File mailing address.			
7 LEASED EMPLOYMEN	IT AND PAYROLL			
<b>A.</b> Did this establishm leasing company's	ent have any full- or part-time leased employees whose payro EIN?	II was filed und	er an employee	
Exclude:				
<ul> <li>Temporary staf</li> </ul>	fing obtained from a staffing service.			
• Contractors, su	bcontractors, or independent contractors.			
• Purchased or m	nanaged services, such as janitorial, guard, or landscape servic	es.		
<ul> <li>Professional or programming, e</li> </ul>	technical services purchased from another firm, such as softwengineering, or accounting services.	are consulting,	computer	
• Employees alre	ady reported in <b>6</b> .			
For further clarifica	ation, see information sheet(s).			
<sub>0241</sub>	to line B			
<sub>0242</sub>	o <b>(B</b>	Mark ". if Non		
<b>B.</b> Number of leased	employees for pay period including March 12	0370		
<b>C.</b> Payroll for leased e fringe benefits.)	employees before deductions (Exclude employer's cost for		2002	
ininge benenis.)		\$	6 Mil. Thou.	Dol.
1. Annual payroll	for leased employees	0350		
		Mark "X"	2002	
		if None	6 Mil. Thou.	Dol.
2. First quarter pa	yroll for leased employees (January-March, 2002)	0360		
8-17 Not Applicable.				
KIND OF BUSINESS O Principal kind of busin (Mark "X" only ONE business)	ess or activity in 2002			
Barber, beautician	, and nail care services			
812 111 00 12	Barber shop			
812 112 00 11	Beauty shop			
812 112 00 29	Unisex hair shop, including combined beauty/barber shop			
812 112 00 37	Facial salon			
812 113 00 10	Nail salon			
611 511 00 14	Cosmetology or beauty schools			
611 511 00 22	Barber colleges or schools			
Other personal car	e and appearance services			
812 191 00 15	Diet or weight reducing centers, excluding physical fitness fa	cilities		
713 940 90 51	Physical fitness, strength development, or weight training ce	nter		
812 199 00 25	Tanning salon			
	CONTINUE WITH <b>©</b> ON PAGE 4			

81201030

orm	05-81201								Page	
18	KIND OF BUSINES	ss o	R ACTIVITY - Continued							
	Other personal	car	e and appearance services - Cor	ntinued						
0700	812 199 00 17		Massage salon							
	621 340 20 40		Massage therapist(s), NCTMB (Na	tionally Certified in The	rapeu	tic Massa	ge and Bo	dywoi	rk)	
	812 199 00 33		Sauna, steam bath, or Turkish bat	h						
	812 199 00 41		Electrolysis service							
	812 199 00 58		Tattoo parlor							
	812 199 00 66		Hair replacement services, excludi	ng services performed	by a p	ohysician				
	777 812 01 18		Other personal care and appearan	ce service - Specify						
0704										
0701			ess or activity							
	624 410 00 19	Jusii	Child day care services, including	those with preschool						
	812 990 10 16		Bail bonding	mose with prosencer						
	812 990 20 14		Dating service							
	773 000 00 28		Other kind of business or activity	- Specify 7						
	773 000 00 20		Other kind of business of delivity	opecity g						
0701	l									
<b>1</b> 9-	Not Applicab	le.								
							2002			
	HOW TO					Estimates are acceptable. Report dollars OR percents.				
	REPORT PERCENTS	7	16 C			\$ Mil.	Thou.	Dol.	Percent	
			If figure is <b>38.76%</b> of total sales:	Report whole perce	ents				3 9	
22		•	IPMENTS, RECEIPTS, OR REVENUE							
	REPORT DOLLAR	y sou FIGL	urce either as a dollar figure or as a JRES on page 2 and HOW TO REPC	n whole percent of total DRT PERCENTS above.	receij Do no	ots (report ot combin	ted in <b>4</b> ). e data for	See I two o	HOW TO r more	
	receipts lines.)						2002	,		
					Cen-	n- Estimates are acceptable.				
	Desc	criptic	on of sales, shipments, receipts, or reve	nue	use	,	Report dollars O		Percent	
723					0720	0721	Tilou.	Dol.	0722	
1.	Hairdressing and	othei	body and appearance care service	s						
	_		n leased stations/booths		30831					
	<b>b.</b> Hair services				30832					
	c. Nail services				30833					
	a. Diet/weight red	ucin	g program fees		30834					
			CONTINUE WIT	H ❷ ON PAGE 5						



055	2
5	כ
Ξ	_
$^{\circ}$	
$\tilde{z}$	_
α	_

e. Diet/ f. All o g. Sum 2. Dryclear laundry, 3. Laundry 4. Tuition, instructi 5. Sales of 6. All othe 7. TOTAL reportion 22 - 23 No 29 OPERAT Activity (Mark ") 0011  0011							
e. Diet/ f. All o g. Sum 2. Dryclear laundry, 3. Laundry 4. Tuition, instructi 5. Sales of 6. All othe 7. TOTAL reportion 23 - 23 No 24 OPERAT Activity (Mark ") 0011  0011		Com			2002		
f. All or g. Sum  2. Dryclear laundry,  3. Laundry  4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reporting  23-23 Nov  29 OPERAT Activity (Mark ")  0011  0011	Description of sales, shipments, receipts, or revenue	Cen- sus use		stimates port doll		•	
1. Hairdres  e. Diet/  f. All o  g. Sum  2. Dryclear laundry,  3. Laundry  4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reporti  23-23 No  29 OPERAT Activity (Mark ")  0011  006	p	use	\$ Mil.	Th	ou.	Dol.	Percer
f. All o  g. Sum  2. Dryclear laundry,  3. Laundry  4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reporting  23 - 23 No  29 OPERAT Activity (Mark ")  0011  0011		0720	0721				0722
f. All o  g. Sum  2. Dryclear laundry,  3. Laundry  4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reporti  23 - 23 No  29 OPERAT Activity (Mark ")  0011   006	irdressing and other body and appearance care services - Continued						
g. Sum 2. Dryclear laundry, 3. Laundry 4. Tuition, instructi 5. Sales of 6. All othe 7. TOTAL reportion 23 – 28 No 29 OPERAT Activity (Mark ") 0011  0011	Diet/weight reducing food supplement and other merchandise sales	30835					
g. Sum 2. Dryclear laundry, 3. Laundry 4. Tuition, instructi 5. Sales of 6. All othe 7. TOTAL reportion 23 – 28 No 29 OPERAT Activity (Mark ") 0011  0011	All other	30836					
2. Dryclear laundry, 3. Laundry 4. Tuition, instructi 5. Sales of 6. All othe 7. TOTAL reportion 23 – 23 No 29 OPERAT Activity (Mark ") 0011	Sum lines 1a through 1f	30830					
Iaundry,  3. Laundry  4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reportion  23 – 23 No  29 OPERAT Activity (Mark ")  0011							
4. Tuition, instructi 5. Sales of  6. All othe  7. TOTAL reportion  23 – 23 No  29 OPERAT Activity (Mark ")  0011	cleaning work, <b>including</b> "wet cleaning" ( <i>Exclude coin-operated, industri</i> andry, linen supply, and rug cleaning.)						
4. Tuition, instructi  5. Sales of  6. All othe  7. TOTAL reportion  23 – 23 No  29 OPERAT Activity (Mark ")  0011	undry work, <b>excluding</b> coin-operated, industrial laundry, and linen supply	, . 30850					
instructi  5. Sales of  6. All othe  7. TOTAL reportion  23 – 28 No  29 OPERAT Activity (Mark ")  0011							
6. All othe  7. TOTAL reporting  23 – 28 No  29 OPERAT Activity (Mark ")  0011	tion, fees, and other payments from providing academic or technical truction	30200					
7. TOTAL reporting 23-28 No 29 OPERAT Activity (Mark ") 0011	es of other merchandise - Specify if more than 10 percent of total receipts	s 🗸					
7. TOTAL reporting 23 – 28 No. 29 OPERAT Activity (Mark ") 0011							
7. TOTAL reporting 23 – 28 No. 29 OPERAT Activity (Mark ") 0011		39024					
23 – 28 No 29 OPERAT Activity (Mark ") 0011		39516					
OPERATA Activity (Mark ")  OO11  OO13	TAL OPERATING RECEIPTS - Sum of lines should equal <b>①</b> if	39516					1 0
Activity (Mark ")  0011  0013	porting in dollars	39516					1 0
0011	porting in dollars	39516					1 0
0013	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002	39516					1 0
006	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)	39516	0018	Month	Day		1 0
	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation  Only One date at right	39516	0018	Month	Day		
006	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation 0014 Ceased operation - Give date at right	39516	0018	Month	Day		
006	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation  Out  Temporarily or seasonally inactive  Out  Sold or leased to another operator - Give date at right  Give date at right AND enter new	39516 39690	<b>→</b>		Day		
	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation  Temporarily or seasonally inactive  O060 Name of new owner or operator  O061 Employer Interests  O061 Employer Interests	39516 39690  t dentification of new	<b>→</b>		Day		
	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation  Temporarily or seasonally inactive  Outside the setablishment's status at the end of 2002 ark "X" only ONE box.)  Sold or leased to another operator - Give date at right AND enter new name and mailing address below processing to the setablishment's status at the end of 2002 ark "X" only ONE box.)  Outside the setablishment's status at the end of 2002 ark "X" only ONE box.)  Outside the setablishment's status at the end of 2002 ark "X" only ONE box.)  Outside the setablishment's status at the end of 2002 ark "X" only ONE box.)  Outside the setablishment's status at the end of 2002 ark "X" only ONE box.)	39516 39690  t dentification of new	<b>→</b>		Day		
006	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation 0014 Ceased operation - Give date at right Sold or leased to another operator seasonally inactive - Give date at right AND enter new name and mailing address below 7  0060 Name of new owner or operator 0061 Employer I Enter EIN owner (9)	39516 39690  t dentification of new	n Numbe	er -	Day		
	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation 0014 Ceased operation - Give date at right Sold or leased to another operator seasonally inactive 0015 Sold or leased to another new name and mailing address below 7  0060 Name of new owner or operator Enter EIN owner (9)	39516 39690  t dentification of new	n Numbe		Day		
	Not Applicable.  ERATIONAL STATUS tivity that best describes this establishment's status at the end of 2002 ark "X" only ONE box.)  In operation 0014 Ceased operation - Give date at right Sold or leased to another operator seasonally inactive - Give date at right AND enter new name and mailing address below 7  0060 Name of new owner or operator 0061 Employer I Enter EIN owner (9)	dentification of new digits)	n Numbe	er -	Day		

Remarks (Please use this space for any explanations that may be es	sential in und	lerstandi	ng your rep	orted data.)	
© CERTIFICATION - This report is substantially accurate and was	prepared in a	ccordanc	e with the i	nstructions.	
Is the time period covered by this report a calendar year?	Month	Year		Month	Year
0078 ☐ Yes 0079 ☐ No - Enter time period covered → FR	ROM		TO	)	
	0070			0071	
0072 Name of person to contact regarding this report 0073	Title				
Area code Number Extension	.		Aron code	N1	hor
Area code Number Extension Telephone	n Fax	·	Area code	Num	nei
0074	i d	0075		-	
0076 Internet e-mail address			N	Month Day	Year
		Date comple		20,	
		comple	0069		
Thank you for completing your 20	02 Foors	mic C	oneue f	orm	
I mank you for completing your 20	JZ LUIIU	,,,,,,,,	ciiono i	oriii.	

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.