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

PS-54111

2002 ECONOMIC CENSUS OTHER PROFESSIONAL, SCIENTIFIC, AND TECHNICAL 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

PS-54111

INFORMATION COPY ONOT USE TO REPORT ONOT USE TO

/Places correct any arrara in this mailing address !

	(Please correct any errors	iii tiiis iiiaiiii	iy addire	255./			
that receive this questionnal law, YOUR CENSUS REP	QUIRED BY LAW. Title 13, United States Code, reaire to answer the questions and return the report to ORT IS CONFIDENTIAL. It may be seen only by ion and may be used only for statistical purposes. If process.	to the U.S. persons sw	Census	s Burea uphold	u. By the	e sam fidenti	e ality
Use blue or black ink.	Please center numbers in their respective boxes.	Examples:					
• Do not use pencil.	Do not put slashes through 0 or 7.	\boxtimes	0 1	2 2	4 5 6	7	8 9
• Place an "X" inside the box.			0 1	2 3	4 3 0	/	0 9
The reporting unit for this the where business is conducted information sheet(s).	form is an establishment. An establishment is ge ed or where services or industrial operations are pe	enerally a s erformed.	ingle p For furt	hysical ther cla	location rification	, see	
1 MONTHS IN OPERATION				lark "X"	2	002	
			i	f None	Number	of mo	nths
Number of months in oper	ration during 2002 (If none, mark "X" and go to ② .)		. 0002				
2 EMPLOYER IDENTIFICATIO Is the Employer Identificati establishment on its latest	ON NUMBER on Number (EIN) shown in the mailing address the 2002 Internal Revenue Service Form 941, Employe	e same as t r's Quarterl	he one y Fede	used for	or this Return?		
₀₀₂₁ Yes ₀₀₂₂	□ No - Enter current EIN (9 digits) —	→ 0025		-			
	physical location the same as shown in the mailing te addresses are not physical locations.) 0035 Number and street	address?					
0031							
No - Enter physic	al → 0036 City, town, village, etc.	0037 State	0038 ZI	P Code			
location					-		
B. Is this establishment ph	nysically located inside the legal boundaries of the	city, town,	village	, etc.?			
₀₀₄₁	No 0043 No legal boundaries	0044		Oo not k	now		
C. Type of municipality wh	here this establishment is physically located						
₀₀₄₆ City, village, or bo	orough 0047 U Town or township	0048		Other or	do not l	know	

Form PS-54111 Page 2 2002 Mark "X" Dollar figures should be rounded to if None \$ Mil. Thou. Dol. HOW TO thousands of dollars. **REPORT** 0 2 **DOLLAR** If a figure is \$1,025,628.79: Report -**FIGURES** X If a value is "0" (or less than \$500.00): Report -SALES, SHIPMENTS, RECEIPTS, OR REVENUE 2002 Mark "X if None \$ Mil. Thou. Dol. E-COMMERCE SALES, SHIPMENTS, RECEIPTS, OR REVENUE A. Did this establishment have any e-commerce sales, receipts, and/or revenue in 2002? (E-commerce includes sales, receipts, and/or revenue from any transaction completed over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system. Transactions are agreements between buyers and sellers to transfer ownership of, or rights to use, goods or services. Payment for these goods or services may or may not be made online. Please see the information sheet(s) for further clarification.) ☐ Yes - Go to line B 2002 No - Go to 6 Estimates are acceptable \$ Mil. Thou. Dol. B. E-commerce sales, receipts, and/or revenue of this establishment (Include e-commerce **EMPLOYMENT AND PAYROLL** Include: Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in 2. Exclude: Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. Temporary staffing obtained from a staffing service. 2002 Mark "X if None Number For further clarification, see information sheet(s). 2002 Mark "X" if None Thou. Dol. **B.** Payroll before deductions (Exclude employer's cost for fringe benefits.) \$ Mil



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If not shown, please ento Number (CFN) from the i	er your 11-digit Census File									
7 LEASED EMPLOYMEN	·									
	ent have any full- or part-time leased employees whose payroll was filed under an employee									
Exclude:										
• Temporary staf	• Temporary staffing obtained from a staffing service.									
• Contractors, su	Contractors, subcontractors, or independent contractors.									
• Purchased or m	 Purchased or managed services, such as janitorial, guard, or landscape services. 									
 Professional or programming, or 	technical services purchased from another firm, such as software consulting, computer engineering, or accounting services.									
• Employees alre	ady reported in 3 .									
For further clarifica	tion, see information sheet(s).									
₀₂₄₁										
₀₂₄₂	Mark "X" 2002 if None Number									
B. Number of leased	employees for pay period including March 12									
	mployees before deductions (Exclude employer's cost for 2002									
fringe benefits.)	\$ Mil. Thou. Dol.									
1. Annual payroll	for leased employees									
	Mark "X" 2002									
	if None \$ Mil. Thou. Dol.									
2. First quarter pa	yroll for leased employees (January-March, 2002)									
8-17 Not Applicable.										
KIND OF BUSINESS O Principal kind of busin (Mark "X" only ONE busin	ess or activity in 2002									
Professional, scier	tific, and technical services									
0700 541 910 00 28	Market research services									
541 910 00 36	Broadcast media rating services									
541 910 00 44	Public opinion polling services									
541 921 00 17	Photography studio, portrait									
541 922 00 16	Commercial photography service									
541 930 00 16	Translation and interpretation services									
541 930 00 24	Sign language services									
541 940 00 14	Veterinary services									
541 940 00 22	Veterinary testing laboratories									
541 990 10 11	Meteorological consulting and weather forecasting services									
541 990 90 30	Appraiser, except real estate									

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18	B KIND OF BUSINESS OR ACTIVITY - Continued											
	Professional, scientific, and technical services - Continued											
070	541 990 90 22		pitration and conciliation services									
	541 990 90 14		Consumer credit counseling service	sumer credit counseling service								
	777 541 11 14		Other professional, scientific, and t	er professional, scientific, and technical services - Specify								
070	0701											
	777 541 11 22		anagement, scientific, and technical consulting services - Specify									
070												
	777 541 11 30 Computer systems design and related services - Specify											
070	1											
070	Other kind of	huein	ages or activity									
	561 990 90 46	Dusiii	Auctioneer - independent, providin	ia callina services on a	contr	act hasis						
							on quetio	n boo	io			
	453 998 30 A7		Auction house, selling new or used									
	777 541 11 48	Ш	Auction company-wholesale, sellin automobiles, livestock) on an aucti	g goods for resale or con basis -Specify type	lurabl of au	e non-cons ction good	sumer god '⊋	ods (e	.g. used			
070	1											
	773 000 00 28		Other kind of business or activity -	Specify								
070	1											
19-	-21 Not Applicat	ole.										
						Estir	2002 nates are a	ccepta	ble.			
	HOW TO REPORT						rt dollars O					
	PERCENTS		If figure is 38.76% of	Panart whole nave	n to	\$ Mil.	Thou.	Dol.	Percent 3 9			
<u> </u>	DETAIL OF CALE		total sales:	Report whole perce	HILS							
22	(Report receipts b	y sou	PMENTS, RECEIPTS, OR REVENUE urce either as a dollar figure or as a	whole percent of total	receip	ots (report	ed in 4).	See F	нош то			
	REPORT DOLLAR receipts lines.)	FIGU	IRES on page 2 and HOW TO REPO	RT PERCENTS above.	Do no	ot combine	data for t	two o	r more			
					Cen-	F .:	2002					
	Des	criptio	n of sales, shipments, receipts, or reven	ue	sus		mates are a rt dollars O	•				
0723					0720	\$ Mil.	Thou.	Dol.	Percent 0722			
1.	Veterinary medica	al con	vicas									
	·				36710							
2.	Pet and animal se											
	a. Pet grooming	and b	ooarding services		36702							
	b. Pet training se	rvices	s (Exclude horse training services.)		36703							
			CONTINUE WITH	1 2 ON PAGE 5								



22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued			2002		
		Cen-	Estir	nates are a	ccepta	ıble.
	Description of sales, shipments, receipts, or revenue	sus		rt dollars O	1	
23		0720	\$ Mil.	Thou.	Dol.	Percer
. <u>.</u>	Pet and animal services - Continued					
	c. Sale of pet/animal supplies (Include sales of specialized pet food, medicines, toys, etc.)	36705				
	d. Other pet care/animal services - <i>Specify</i> ⊋	00700				
		36704				
	e. Sum lines 2a through 2d	36700				
	Market research and public opinion polling services					
	a. Market research services	36251				
	b. Public opinion polling services	36252				
	c. Sum lines 3a and 3b	36250				
	Media monitoring and analysis services	36600				
	Photography services					
	a. Portrait photography services	36751				
	b. Commercial photography services	36752				
	c. Film and image processing and printing services	36753				
	d. Sum lines 5a through 5c	36750				
	Translation or interpretation services	36800				
-	Appraisal services	36810				
	Arbitration and conciliation services	36820				
	Auctioneering service fees	36830				
0.	Architectural services, excluding landscape architecture	36900				
1.	Landscape architectural services	36910				
2.	Engineering services	36920				
3.	Surveying and mapping services, excluding geophysical surveying	36930				
4.	Geophysical surveying services	36940				
5.	Research and development services	36950				

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22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued										
	Description of sales, shipments, receipts, or revenue	Cen- sus use		2002 timates are a ort dollars C							
0723		0720	0721			0722					
16.	Sales of merchandise - Specify		,								
		39054									
17.	All other operating receipts - Specify if more than 10 percent of total receipts										
		39549									
		39549									
18.	TOTAL OPERATING RECEIPTS - Sum of lines should equal 1 if reporting in dollars	39690				1 0	0				
23-	Not Applicable.										
25	NOTE - An exported service is a service performed for a customer or client (individual, government, business establishment, etc.) located outside the United States (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 provided to domestic subsidiaries of foreign firms are excluded. A. Did the receipts or revenue (reported in 4) include any amounts for exported services?										
	o ₉₁₁				2002						
	₀₉₁₂ No			\$ Mil.	Th	ou.	Dol.				
	B. Amount of receipts or revenue for exported services		0914								
26	SPECIAL INQUIRIES SUPPORT SERVICES Was this establishment primarily engaged in providing management, adminis establishments of the same company (rather than for the general public or ot O998 Yes	trativ her bu	e, or sup usiness fi	port service rms) in 200	es to (other					
27	Not Applicable.										



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Activity that best describes this establishment's status at the end of 2002 (Mark "X" only ONE box.) Oot										
Activity that best describes this establishment's status at the end of 2002 Mark **X** only ONE box.	If not sho Number (own, please enter you (CFN) from the mailing	r 11-digi g addres	it Census File ss.						
Temporarily or seasonally inactive Cost	Activ	ity that best describes th	his establ	lishment's status at	the end of 2002					
Seesonally inactive	0011	☐ In operation	0014	Ceased operation	ı - Give date at righ	t	0018	Month	Day	Year
Enter EIN of new owner (9 digits) → 0005 City, town, village, etc. 0006 State 0005 ZIP Code Remarks (Please use this space for any explanations that may be essential in understanding your reported data.) CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. Is the time period covered by this report a calendar year? ON - Enter time period covered by this report accordance with the instructions. Set the time period covered by this report accordance with the instructions. Telephone ON - Enter time period covered by this report accordance with the instructions. FROM Month Year TO Month Year To OND OND OND Area code Number Extension Fax OND OND Month Day Year	0013	Temporarily or seasonally inactive	0015	- Give date at rig	ht AND enter new		→		ı	
Owner (9 digits) Owner (9 digi		0060 Name of new owner	or operato	or	0061 Employer	dentification	Numbe	er		
Occompleted Occom								-		
Remarks (Please use this space for any explanations that may be essential in understanding your reported data.) CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. In the time period covered by this report a calendar year? Remarks (Please use this space for any explanations that may be essential in understanding your reported data.) Month Year TO Mon		0062 Mailing address (num	nber and s	treet, P.O. Box, etc.)	owner (b	uigito, -				
Remarks (Please use this space for any explanations that may be essential in understanding your reported data.) CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. In the time period covered by this report a calendar year? Remarks (Please use this space for any explanations that may be essential in understanding your reported data.) Month Year TO Mon										
CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. s the time period covered by this report a calendar year? OTE Yes		0063 City, town, village, et	C.			0064 State	0065 Z	IP Code		
CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. s the time period covered by this report a calendar year? OTE Yes									-	
CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. s the time period covered by this report a calendar year? OTE Yes	Remarks (Please use this space fo	r anv exi	olanations that may	be essential in und	lerstanding	vour r	eported	data.)	
O78	30 CERT	TFICATION - This report	is substa	antially accurate and	d was prepared in a	ccordance v	vith th	e instru	ctions.	
O72 Name of person to contact regarding this report O72 Name of person to contact regarding this report O73 Title Area code Number Extension Fax O075 O76 Internet e-mail address O76 Internet e-mail address O77 No - Enter time period covered O070 O77 Name of person to contact regarding this report O78 Name of person to contact regarding this report O78 Name of person to contact regarding this report O78 Name of person to contact regarding this	Is the time	period covered by this	report a d	calendar year?	Month	Year			Month	Year
Area code Number Extension Fax O075 Area code Number - O76 Internet e-mail address Date completed O069 Month Day Year	0078 Y	es 0079 No - E	nter time	period covered-	FROM			TO		
Telephone Fax 0075 - Date completed 0069 Month Day Year	0072 Name o	of person to contact regardi	ing this re	port	0073 Title					
Telephone Fax 0075 - Date completed 0069 Month Day Year										
0074	Talas		Nu	mber Ex			ea code		Num	ber
Date completed 0069 Month Day Year	Teleph		-		Fa				-	
completed 0069	0076 Internet		,		, , , , , , , , , , , , , , , , , , , ,			Month	Day	Year
		Thank you	for co	mnleting you	r 2002 Fcond	mic Cer		form		

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