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



FORM **QSS-1(E)** (2-25-2004)

DUE DATE •

NOTICE — Your report to the Census Bureau is **confidential** by **law (Title 13, U.S. Code)**. It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. The law also provides that copies retained in your files are **immune from legal process**.

RETURN COMPLETED FORM TO: U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001 OR

Fax: 1-800-447-4613

NEED HELP?

Visit our web site: http://www.census.gov/econhelp/qss or

or **Call** 1–800–772–7851 between 8:30 a.m. and 5:00 p.m. EST, Monday through Friday.

QUARTERLY SERVICES SURVEY

(Please correct any errors in name, address, or ZIP Code)

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	INTERNET REPORTING You may complete this survey online at:		https://www.census.gov/econhelp/qss						
	Username:	Password:	using your firm's unique username and original password. If you change your password, please keep a record for reference.						
0	SURVEY COVERAGE								
	Does this firm have domestic locations providing the business activities described in the above survey coverage statement?								
	01 1 ☐ Yes – Continue	_							
	2∐No – Specify yo	our business activity and con	ntinue with 🛭 📈						
2	FEDERAL EMPLOYE	R IDENTIFICATION NUM	MBER (EIN)						
Is the Federal Employer Identification Number (EIN) printed in the upper left of the address label the same									
as that used for this firm on its latest Employer³s Quarterly Federal Tax Return (Treasury Form 941)? o3 1 ☐ Yes – Go to Item ❸									
		_	d reporting payroll under this EIN.						
	Federal 04	Employer Identification Number	r (EIN) Month Year						

REVENUE								
		06 \$ Bil.	Mil.	Thou. Dol.	006 \$ Bil.	Mil.	Thou.	Dol.
A. What was this firm's quarterly revenue the domestic locations (See ①) covered by this report?								
	07	7 1 Bo	ok figures	007 1 Book figures				
B. Are the revenues reported in A ale or estimates?	07 1☐ Book figures 2☐ Estimates			2 Estimates				
REPORT PERIODS		I			<u> </u>			
1 ☐ Yes – Continue with ⑤ 2 ☐ No – Provide beginning and ending of		Мо	st rece	nt quarter		Prior q	uarter	
		Mo	st rece	nt quarter Year	Month	Prior q	juarter Ye	ar
2 No − Provide beginning and ending o		Month 08			008			ar
2 No − Provide beginning and ending o	ers.	Month						ar
2 No − Provide beginning and ending o	Beginning date	Month 08			008			ar
2 No - Provide beginning and ending of the most recent and prior quarters. SOURCE OF REVENUE What percentage of revenue (reported is received from each of the following the source of the source).	Beginning date Ending date	Month 08			008			ar
2 No - Provide beginning and ending of the most recent and prior quarted the most recent and prior quarted. 5 SOURCE OF REVENUE What percentage of revenue (reported)	Beginning date Ending date ed in ③) ng types	Month 08			008			ar
SOURCE OF REVENUE What percentage of revenue (reporte is received from each of the following of customers?	Beginning date Ending date ed in ③) ng types ot available.	Month			008			ar
SOURCE OF REVENUE What percentage of revenue (reporte is received from each of the following of customers? Estimates are acceptable if actual data is not the source.	Beginning date Ending date ed in ③) ag types ot available.	Month 08		Year	008			
SOURCE OF REVENUE What percentage of revenue (reports is received from each of the following of customers? Estimates are acceptable if actual data is not acceptable.	Beginning date Ending date ed in ③) ag types of available.	Month		Year	008			%

6	ACQUISITIONS OR MERGERS	OR MERGERS 14 Name of company acquired or merged with												
		Number and street												
	13 1 Yes													
	2 No	City, State, and ZIP Code												
		15 Month Year												
		Acquisition or date of merger EII	16 N →	-										
Ø	REMARKS - Please use this space i	for comments or to explain any significan	t differe	ence between you	r									
	current and prior quart	ter revenue.												
8	CONTACT INFORMATION													
17	Name of person to contact regarding this rep	port	18	Telephone										
			Area code	Number	Extension									
	E con the deleter													
20	E-mail address													
			19 Area code	Fax										
21	Company website		Area code	Number										
	, ,													
THANK YOU for completing your Quarterly Services Survey.														

INSTRUCTIONS FOR ②

Taxable Firms

Firms operating on a commission basis should report commissions, fees, and other operating income, not gross billings or sales.

Include -

- Total value of service contracts.
- Amounts received for work subcontracted to others.
- Market value of compensation in lieu of cash.
- Revenue from services performed by domestic locations for foreign parent firms, subsidiaries, branches, etc.
- Dues and assessments from members and affiliates.

Exclude -

- Taxes (sales, amusement, occupancy, use, or other) collected directly from customers or clients and paid directly to a local, State, or Federal tax agency.
- Revenue from a domestic parent organization, or from franchise locations owned by others and any franchise or license fees.
- Rents from and revenue of separately operated departments, concessions, etc., which are leased to others.
- Revenue from customers for carrying or other credit charges.
- Commissions from vending machine operators.
- Revenue of foreign subsidiaries (those located outside the U.S., i.e., outside the 50 states, District of Columbia, U.S. Commonwealth Territories, or U.S. Possessions).
- Nonoperating revenue such as income from investments, sales of company-owned real estate (land and building), or other assets, (except inventory held for resale), securities, gifts, loans, contributions, royalties, or grants.
- Revenue from the sale of used equipment.
- Installment payments from leasing under capital, finance, or full-payout leases.
- Intracompany transfers.
- Interest income.

Tax-Exempt Firms

Firms operating on a commission basis should report commissions, fees, and other operating income, not gross billings or sales.

Include -

- Program service revenue for services provided in the quarter, whether or not payment was received in that quarter.
- Gross sales of merchandise, minus returns and allowances.
- Income from interest, dividends, gross rents (including display space rentals and share of receipts from departments operated by other companies), royalties, and other investments.
- Net gains (or losses) from the sale of real estate (land and buildings), investments, or other assets (except inventory held for resale).
- Gross contributions, gifts, and grants (whether or not restricted for use in operations).
- Dues and assessments from members and affiliates.
- Commissions earned from the sale of merchandise owned by others (including commissions from vending machine operators).
- Gross receipts from fundraising activities.

Exclude -

- Sales and other taxes collected directly from customers or clients and paid directly to a local, State, or Federal tax agency.
- Gross receipts of departments or concessions operated by other companies.
- Amounts transferred to operating funds from capital or reserve funds.

Public reporting burden for this collection of voluntary information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0907, U.S. Census Bureau, 4700 Silver Hill Road, Stop 1500, Washington, DC 20233-1500. You may e-mail comments to Paperwork@census.gov; use "Paperwork Project 0607-0907" as the subject. PLEASE INCLUDE FORM NAME AND NUMBER IN ALL CORRESPONDENCE.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the top right corner on the front of this form.