



# 2002 ECONOMIC CENSUS

## TRUCKING AND WAREHOUSING (ENTERPRISE SUPPORT)

OMB No. 0607-0882: Approval Expires 07/31/2004

**DUE DATE**  
**FEBRUARY 12, 2003**

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

**TW-48459**

**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](http://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.

**INFORMATION COPY  
DO NOT USE TO REPORT**

*(Please correct any errors in this mailing address.)*

**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 U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ink.
- Do not use pencil.
- Place an "X" inside the box.
- Please center numbers in their respective boxes. Examples:
- Do not put slashes through 0 or 7.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
-------------------------------------	---	---	---	---	---	---	---	---	---	---

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

**1 MONTHS IN OPERATION**

Number of months in operation during 2002 (If none, mark "X" and go to 29.) . . . . . 0002

Mark "X" if None		2002	
		Number of months	

**2 EMPLOYER IDENTIFICATION NUMBER**

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2002 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021  Yes      0022  No - Enter current EIN (9 digits) → 0025  -

**3 PHYSICAL LOCATION**

**A. Is this establishment's physical location the same as shown in the mailing address? (P.O. box and rural route addresses are not physical locations.)**

0031  Yes

0032  No - Enter physical location →

0035 Number and street		
0036 City, town, village, etc.	0037 State	0038 ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

**B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?**

0041  Yes      0042  No      0043  No legal boundaries      0044  Do not know

**C. Type of municipality where this establishment is physically located**

0046  City, village, or borough      0047  Town or township      0048  Other or do not know

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HOW TO REPORT DOLLAR FIGURES

Dollar figures should be rounded to thousands of dollars.

If a figure is \$1,025,628.79:

If a value is "0" (or less than \$500.00):

Report

Report

Mark "X" if None

2002		
\$ Mil.	Thou.	Dol.
1	0 2 6	

4 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

Sales to, or receipts or revenue from, customers outside your enterprise (Exclude billings, sales, receipts, or revenue from establishments of your own enterprise.) . . . 0100

2002		
\$ Mil.	Thou.	Dol.

5 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, commissions, rents, or fees collected 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.)

0181  Yes - Go to line B

0182  No - Go to 6

2002		
Estimates are acceptable		
\$ Mil.	Thou.	Dol.

B. E-commerce sales, receipts, and/or revenue of this establishment (Include e-commerce sales, receipts, and/or revenue in 4. Exclude sales taxes.) . . . . . 0185

6 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.

For further clarification, see information sheet(s).

Mark "X" if None

A. Number of employees for pay period including March 12 . . . . . 0320

2002	
Number	

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

Mark "X" if None

1. Annual payroll . . . . . 0300

2. First quarter payroll (January-March, 2002). . . . . 0310

2002		
\$ Mil.	Thou.	Dol.



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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**7** LEASED EMPLOYMENT AND PAYROLL

**A.** Did this establishment have any full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN?

**Exclude:**

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.
- Employees already reported in **6**.

For further clarification, see information sheet(s).

0241  Yes - Go to line B

0242  No - Go to **10**

Mark "X" if None

2002	
Number	

**B.** Number of leased employees for pay period including March 12 . . . . . 0370

**C.** Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.)

**1.** Annual payroll for leased employees . . . . . 0350

2002		
\$ Mil.	Thou.	Dol.

Mark "X" if None

**2.** First quarter payroll for leased employees (January-March, 2002) . . . . . 0360

2002		
\$ Mil.	Thou.	Dol.

**8 - 9** Not Applicable.



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**10 INVENTORIES**

(Report inventories using generally accepted accounting practices.)

**A.** Did this establishment have inventories at the end of 2001 or 2002?

0486  Yes - Go to line B

0487  No - Go to **15**

**B.** Were inventories of this establishment subject to the Last-in, First-out (LIFO) method of valuation?

0481  Yes - Use the sum of LIFO amount (E2) plus the LIFO reserve (E1) for completing lines C and D2.

0482  No - Complete only lines C and D1.

	Mark "X" if None	End of 2002			Mark "X" if None	End of 2001			
		\$ Mil.	Thou.	Dol.		\$ Mil.	Thou.	Dol.	
<b>C. Total inventories</b> (Include finished products, work-in-process, materials, supplies, fuels, etc.) . . . . . 0460	<input type="checkbox"/>				0470	<input type="checkbox"/>			
<b>D. Of the value on line C report:</b>									
<b>1.</b> Amount not subject to LIFO costing . . . . . 0464	<input type="checkbox"/>				0474	<input type="checkbox"/>			
<b>2.</b> Amount subject to LIFO costing (gross) . . . . . 0465	<input type="checkbox"/>				0475	<input type="checkbox"/>			
<b>E. Of the value on line D2 report:</b>									
<b>1.</b> Amount of LIFO reserve . . . . . 0466	<input type="checkbox"/>				0476	<input type="checkbox"/>			
<b>2.</b> Amount of LIFO value (net) . . . . . 0467	<input type="checkbox"/>				0477	<input type="checkbox"/>			

Note - The sum of lines D1 and D2 should equal line C. The sum of lines E1 and E2 should equal line D2.

**11 INVENTORY VALUATION**

Methods of valuation for inventories not subject to LIFO costing at the end of 2002 (Using the inventory value reported in **10**, line D1 above, report the breakdown of the value for end of 2002 according to the inventory valuation methods shown below.)

	Mark "X" if None	End of 2002		
		\$ Mil.	Thou.	Dol.
<b>A.</b> First-in, First-out (FIFO) . . . . . 0491	<input type="checkbox"/>			
<b>B.</b> Average cost. . . . . 0492	<input type="checkbox"/>			
<b>C.</b> Standard cost . . . . . 0493	<input type="checkbox"/>			
<b>D.</b> Other methods - Specify $\nabla$				
0895 <input type="text" value=""/>	0494	<input type="checkbox"/>		
<b>E. TOTAL</b> (Sum of lines A through D should equal the value reported in <b>10</b> , line D1 for end of 2002.) . . . . . 0490	<input type="checkbox"/>			

**12-14** Not Applicable.

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**15** SELECTED EXPENSES

(Report the expenses allocated to this establishment by category. Report expenses directly attributable to this establishment in column 1. Report payments made by this establishment for expenses incurred by other establishments of your enterprise in column 2, where applicable.)

	Mark "X" if None	2002			Mark "X" if None	2002		
		Expenses of this establishment				Payments made by this establishment in behalf of other establishments of your enterprise		
		\$ Mil.	Thou.	Dol.		\$ Mil.	Thou.	Dol.
<b>A.</b> Employer's cost of fringe benefits ( <b>Include</b> fringe benefits for all employees reported in <b>6</b> , line A and in <b>7</b> , line B.) . . . . .	0228	<input type="checkbox"/>						
<b>B.</b> Fuels for heat or power ( <b>Include</b> the value of coal, coke, natural and manufactured gas, fuel oil, liquefied petroleum gas, gasoline, etc. used by this establishment. <b>Exclude</b> gasoline and fuel for highway vehicles.) . . . . .	0451	<input type="checkbox"/>						
<b>C.</b> Electricity . . . . .	0452	<input type="checkbox"/>						
<b>D.</b> Depreciation charges ( <b>Include</b> additions made to accumulated depreciation and amortization accounts. Also include depreciation charges for assets obtained through capital lease agreements and depreciation of software. <b>Exclude</b> depreciation charges for intangible assets (goodwill, patents, copyrights, etc.) as well as depreciation charges for assets not owned by this company.) . . . . .	0543	<input type="checkbox"/>						
<b>E.</b> Administrative and management consulting services ( <b>Exclude</b> salaries paid to your own employees for administrative and management consulting services, and payments by this establishment to the parent enterprise or any of its subsidiaries for administrative or management consulting services.) . . . . .	0453	<input type="checkbox"/>						
<b>F.</b> Materials and supplies ( <b>Include</b> the value of noncapitalized office supplies, parts, supplies, and other goods and materials used by this establishment for repair, maintenance, or other purposes. Also include all noncapitalized materials or supplies not reported on lines B, C, G, or H, such as packaging materials and gasoline and fuel for highway vehicles. <b>Exclude</b> cost of goods purchased for resale.) . . . . .	0454	<input type="checkbox"/>						
<b>G.</b> Communication services ( <b>Include</b> purchased telephone, data transmission, telegraph, telex, ticker tape, photo transmission, facsimile (FAX), paging, cellular telephone, on-line access, and related services.) . . . . .	0413	<input type="checkbox"/>			0673	<input type="checkbox"/>		
<b>H.</b> Other utilities ( <b>Include</b> the value of payments for water, sewer, refuse removal, and other purchased utilities. <b>Exclude</b> fuels and electricity reported on lines B and C.) . . . . .	0455	<input type="checkbox"/>			0456	<input type="checkbox"/>		

CONTINUE WITH **16** ON PAGE 6

CONTINUE ON PAGE 6

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**15** SELECTED EXPENSES - Continued

	Mark "X" if None	2002			Mark "X" if None	2002		
		Expenses of this establishment				Payments made by this establishment in behalf of other establishments of your enterprise		
		\$ Mil.	Thou.	Dol.		\$ Mil.	Thou.	Dol.
<b>I. Rental payments (Include payments made by this establishment for lease or rental of land, buildings, structures, offices, machinery, equipment, and other tangible assets. Exclude capital leases and rental payments to your own company.)</b>								
1. Buildings and structures . . . . .	0561 <input type="checkbox"/>				0566 <input type="checkbox"/>			
2. Machinery and equipment . . . . .	0562 <input type="checkbox"/>				0567 <input type="checkbox"/>			
3. Total rental payments (Sum lines I1 and I2) . . . . .	0560 <input type="checkbox"/>				0565 <input type="checkbox"/>			
<b>J. Repair and maintenance services (Include all noncapitalized repair and maintenance to buildings and structures and machinery and equipment. Also include purchased repair and maintenance for equipment that is an integral or permanent part of a building or structure as repairs for buildings and structures, not as machinery and equipment. Exclude capitalized improvements for which depreciation or amortization accounts are ordinarily maintained, repair and maintenance performed by employees of this establishment, and repair and maintenance provided by the owner as part of the rental contract.)</b>								
1. Buildings and structures . . . . .	0411 <input type="checkbox"/>				0671 <input type="checkbox"/>			
2. Machinery and equipment . . . . .	0412 <input type="checkbox"/>				0672 <input type="checkbox"/>			
3. Total purchased repair and maintenance services (Sum lines J1 and J2) . . . . .	0410 <input type="checkbox"/>				0670 <input type="checkbox"/>			
<b>K. Computer services (Include system design, computer facilities management, and data processing services purchased by this establishment. Exclude purchases of custom and prepackaged software, salaries paid to your own employees for data processing and other computer-related services, and payments by this establishment to the parent enterprise or any of its subsidiaries for data processing services.)</b>								
	0414 <input type="checkbox"/>				0674 <input type="checkbox"/>			
<b>L. Accounting, auditing, and bookkeeping services (Exclude salaries paid to your own employees for accounting, auditing, and bookkeeping services, and payments by this establishment to the parent enterprise or any of its subsidiaries for accounting services.)</b>								
	0415 <input type="checkbox"/>				0675 <input type="checkbox"/>			

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CONTINUE ON PAGE 7

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**15** SELECTED EXPENSES - Continued

	Mark "X" if None	2002			Mark "X" if None	2002				
		Expenses of this establishment				Payments made by this establishment in behalf of other establishments of your enterprise				
		\$ Mil.	Thou.	Dol.		\$ Mil.	Thou.	Dol.		
<p><b>M.</b> Legal services (<b>Exclude</b> salaries paid to your own employees for legal services, and payments by this establishment to the parent enterprise or any of its subsidiaries for legal services.) . . . . .</p>	0416	<input type="checkbox"/>				0676	<input type="checkbox"/>			
<p><b>N.</b> Advertising services (<b>Include</b> payments to other companies for printing, media, and other services and materials used for advertising. <b>Exclude</b> salaries paid to your own employees for advertising services, and payments by this establishment to the parent enterprise or any of its subsidiaries for advertising services.) . . . . .</p>	0417	<input type="checkbox"/>				0677	<input type="checkbox"/>			
<p><b>O.</b> Payments to government agencies for taxes, including real property taxes, tobacco and liquor stamps, and license fees (<b>Include</b> business license fees, liquor and tobacco stamps, real and personal property taxes (such as taxes on real estate, motor vehicles, machinery, equipment, and inventories) and special assessments paid to government agencies. <b>Exclude</b> income, sales, payroll, excise taxes (other than for liquor and tobacco stamps), and other taxes collected from customers and paid to local, state, or federal government agencies. Also exclude the cost of computer software purchased under licensing agreements, and license fees paid to nongovernment entities.) . . . . .</p>	0419	<input type="checkbox"/>				0678	<input type="checkbox"/>			
<p><b>P.</b> Other expenses (<b>Include</b> travel expenses, expenses related to temporary help, and all other expenses attributable to this establishment - <b>EXCEPT</b> expenses reported in a previous category. <b>Exclude</b> payroll costs reported in <b>6</b> and <b>7</b>. Also exclude costs associated with custom and packaged software, as well as costs related to the acquisition of all other depreciable assets; depreciation on these assets should be reported on line K.) . . . . .</p>	0418	<input type="checkbox"/>								
<p><b>Q.</b> Total purchased services and expenses of this establishment, excluding payroll costs (Sum lines A through P). . . . .</p>	0459	<input type="checkbox"/>								

**16-17** Not Applicable.

48459077

**18** KIND OF BUSINESS

Principal kind of business in 2002  
(Mark "X" only ONE box.)

**Local trucking without storage - goods carried within a single metropolitan area and its adjacent nonurban areas; generally same-day return trips**

- 0700 484 210 10 18  Household goods moving - used
- 484 110 10 19  General freight, truckload (TL)
- 484 110 20 17  General freight, less-than-truckload (LTL)
- 484 220 30 12  Dump trucking, including coal hauling
- 562 111 00 39  Solid waste collection, excluding hazardous waste
- 562 112 00 38  Hazardous waste collection
- 777 480 00 36  Other waste collection - *Specify* ↴

0701

- 484 220 10 16  Hazardous materials trucking, except waste
- 484 220 20 14  Agricultural products trucking, including log hauling
- 484 220 40 10  Specialized trucking **without storage**, including auto transport, boat transport, manufactured (mobile) home transport, and newspaper delivery - *Specify* ↴

0701

**Local trucking with storage - goods carried within a single metropolitan area and its adjacent nonurban areas; generally same-day return trips**

- 484 210 30 14  Household goods moving - used
- 484 110 30 15  General freight, truckload (TL)
- 484 110 40 13  General freight, less-than-truckload (LTL)
- 484 220 50 17  Specialized trucking **with storage** - *Specify* ↴

0701

**Long-distance trucking - goods carried between metropolitan areas**

- 484 210 20 16  Household goods moving - used
- 484 121 00 18  General freight, truckload (TL)
- 484 122 00 17  General freight, less-than-truckload (LTL)
- 484 230 10 14  Hazardous materials trucking, except waste
- 484 230 20 12  Agricultural products trucking, including log hauling
- 484 230 30 10  Specialized trucking, including auto transport, boat transport, and coal hauling - *Specify* ↴

0701

CONTINUE WITH 18 ON PAGE 9





If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

18 KIND OF BUSINESS - Continued

**Courier and messenger service, including delivery of parcels weighing 100 pounds or less, except by means of air transportation**

- 0700 492 210 00 13  Local messenger and delivery services, including bicycles
- 492 110 10 12  Intercity courier and delivery services

**Warehousing and storage facilities**

- 493 130 00 18  Cotton and linters
- 493 130 00 26  Grain elevators, storage only
- 493 130 00 34  Other farm products, except cold storage
- 493 120 10 18  Refrigerated products, except fur storage
- 493 120 20 16  Fur storage
- 531 130 00 23  Self-service storage or miniwarehouses
- 493 190 10 13  Household goods
- 493 110 10 10  General warehousing and storage, including public and contract warehousing and storage
- 493 110 10 28  Document warehousing and storage
- 493 190 20 11  Specialized goods, including bulk petroleum, chemicals, automobile dead storage, and other products requiring special storage - *Specify* ↴

0701

**Other transportation-related activities**

- 541 614 90 28  Physical distribution and logistics consulting services
- 488 510 20 30  Freight/shipping agent or broker, except freight forwarding
- 488 510 10 14  Freight forwarding service
- 532 120 10 21  Truck rental, **without drivers**
- 532 120 20 29  Truck leasing, **without drivers**, except finance leasing
- 561 330 00 36  Driver leasing, without trucks

**Other business activities**

- 774 000 00 18  Other kind of business or activity - *Specify* ↴

0701

19-20 Not Applicable.



48459093

**21** PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED

**A.** Mark "X" the ONE box which best describes the primary kind of business or activity of the establishments of your enterprise that are managed or serviced by this establishment.

- 0651  Mineral extraction, production, or exploration
- 0652  Construction, including general contracting, subcontracting, and land subdividing and developing
- 0653  Manufacturing
- 0654  Wholesale trade, including manufacturers' sales branches and offices
- 0655  Accommodation and food services
- 0656  Retail trade
- 0657  Transportation and warehousing
- 0658  Finance and insurance
- 0659  Real estate and rental and leasing, including rental and leasing of consumer, commercial, and industrial goods and equipment
- 0660  Professional, scientific, and technical services
- 0661  Administrative and support and waste management and remediation services, including travel arrangement
- 0662  Educational services
- 0663  Health care and social assistance
- 0664  Arts, entertainment, and recreation
- 0665  Repair and maintenance
- 0666  Personal and laundry services
- 0667  Publishing
- 0668  Other - *Specify* ↴

0868

**B.** Describe the principal kinds of merchandise sold, products produced, types of services rendered, or activities performed by the establishments of your enterprise that are managed or serviced by this establishment.

0869



48459101

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

HOW TO REPORT PERCENTS

If figure is **38.76%** of total sales:

**Report whole percents**

2002

Estimates are acceptable. Report dollars OR percents.

\$ Bil.	Mil.	Thou.	Dol.	Percent
				3 9

**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report sources of operating revenue for this establishment, either as a dollar figure or as a whole percent of total operating revenue (reported in 4). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more lines.)

**Line 1** - Report all revenue from the transportation of freight, including hauling of nonhazardous and hazardous waste by long-distance motor vehicle. Include revenue from rental and leasing of vehicles with drivers. Report courier and messenger service revenue on **line 2**. Report all nonhazardous and hazardous waste collection transported locally and/or if establishment is involved in collection of nonhazardous and hazardous waste on **line 7**.

**Line 3** and **line 4** - Report storage revenue only. Handling and other service charges should be reported on **line 6**.

**Line 5** - Include consulting fees received for counseling and advising clients on aspects of operating businesses (not providing management services for day-to-day operation).

**Line 6** - Report all amounts billed separately for labor, packing and crating, handling, accessorial services, etc. Include booking and origin commissions. Include revenue from truck repair and parts installed in repair work on **line 9**.

**Line 8** - Report gross value of goods sold on own account. For goods sold for others on a commission or brokerage basis, report commissions on **line 10**. Do not include the sale of used vehicles, equipment, or parts.

Description of sales, shipments, receipts, or revenue	Census use	2002							
		Estimates are acceptable. Report dollars OR percents.							
		\$ Bil.	Mil.	Thou.	Dol.	Percent			
0723	0720	0721							0722
<b>1.</b> Motor carrier revenue									
<b>a.</b> Local motor carrier revenue . . . . .	42000								
<b>b.</b> Long-distance motor carrier revenue . . . . .	42010								
<b>2.</b> Courier and messenger services, including parcel delivery . . . . .	42020								
<b>3.</b> Contract warehousing and storage . . . . .	42030								
<b>4.</b> Public warehousing and storage . . . . .	42040								
<b>5.</b> Process, physical distribution, and logistics consulting . . . . .	42050								
<b>6.</b> Other services related to motor carrier and storage activities									
<b>a.</b> Packing/packaging services . . . . .	42060								
<b>b.</b> Order assembly services . . . . .	42070								
<b>c.</b> Physical processing/transforming of goods . . . . .	42080								
<b>d.</b> Other services . . . . .	42090								
<b>7.</b> Waste collection									
<b>a.</b> Collection of garbage and trash, excluding hazardous waste . . . . .	43200								
<b>b.</b> Hazardous waste collection . . . . .	43250								
<b>8.</b> Sales of merchandise . . . . .	43750								

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CONTINUE ON PAGE 12

48459119

**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue	Cen- sus use	2002					
		Estimates are acceptable. Report dollars OR percents.					
		\$ Bil.	Mil.	Thou.	Dol.	Percent	
0723	0720	0721				0722	
<b>9.</b> Repair and maintenance, including parts installed . . . . .	43650						
<b>10.</b> All other operating revenue - <i>Specify</i> ↴  	49810						
<b>11. Total</b> (Should equal <b>4</b> if reporting in dollars.) . . . . .	49990						1 0 0

**23-25** Not Applicable.

**26** SPECIAL INQUIRIES

SUPPORT SERVICES

Was this establishment primarily engaged in providing management, administrative, or support services to other establishments of the same company (rather than for the general public or other business firms) in 2002?

0998  Yes

0999  No

**27** Not Applicable.



48459127

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**28** ESTABLISHMENT ACTIVITIES

**A.** Indicate activities that were performed by this establishment or were performed for this establishment by another company during 2002.  
(Mark "X" ALL that apply.)

	This activity was performed by this establishment	This activity was performed for this establishment by another company	This activity was not provided by this establishment
<b>1. Product Development</b>			
<b>a.</b> Product design/engineering . . . . .	0921 <input type="checkbox"/>	0941 <input type="checkbox"/>	0961 <input type="checkbox"/>
<b>b.</b> Materials fabrication/processing/assembly/blending . . . . .	0922 <input type="checkbox"/>	0942 <input type="checkbox"/>	0962 <input type="checkbox"/>
<b>2. Order Fulfillment</b>			
<b>a.</b> Bundling or kitting (combining multiple items into a prepackaged product) . . . . .	0923 <input type="checkbox"/>	0943 <input type="checkbox"/>	0963 <input type="checkbox"/>
<b>b.</b> Pick and pack (taking goods from inventory and packaging them to fill orders) . . . . .	0924 <input type="checkbox"/>	0944 <input type="checkbox"/>	0964 <input type="checkbox"/>
<b>c.</b> Warehousing . . . . .	0925 <input type="checkbox"/>	0945 <input type="checkbox"/>	0965 <input type="checkbox"/>
<b>d.</b> Breaking bulk (reducing large shipments into smaller portions for customers) . . . . .	0926 <input type="checkbox"/>	0946 <input type="checkbox"/>	0966 <input type="checkbox"/>
<b>e.</b> Local delivery (within a city, town, or other local area, including adjoining towns and suburban areas) . . . . .	0927 <input type="checkbox"/>	0947 <input type="checkbox"/>	0967 <input type="checkbox"/>
<b>f.</b> Long distance delivery (beyond local areas and commercial zones) . . . . .	0928 <input type="checkbox"/>	0948 <input type="checkbox"/>	0968 <input type="checkbox"/>
<b>g.</b> Less than truckload . . . . .	0929 <input type="checkbox"/>	0949 <input type="checkbox"/>	0969 <input type="checkbox"/>
<b>3. Other Services</b>			
<b>a.</b> Customs brokerage (providing the services of a licensed customs broker). . . . .	0930 <input type="checkbox"/>	0950 <input type="checkbox"/>	0970 <input type="checkbox"/>
<b>b.</b> Logistics consulting (providing advice and expertise) . . . . .	0931 <input type="checkbox"/>	0951 <input type="checkbox"/>	0971 <input type="checkbox"/>
<b>c.</b> Processing of returned merchandise . . . . .	0932 <input type="checkbox"/>	0952 <input type="checkbox"/>	0972 <input type="checkbox"/>

**B.** During 2002 did this establishment:

<b>1.</b> Manage inventory owned by this establishment AND held at this location? . . . . .	0936 <input type="checkbox"/>	Yes	0937 <input type="checkbox"/>	No
<b>2.</b> Manage inventory owned by this establishment BUT held at a customer's location? . . . . .	0956 <input type="checkbox"/>	Yes	0957 <input type="checkbox"/>	No
<b>3.</b> Manage inventory owned by another company BUT held at this location? . . . . .	0976 <input type="checkbox"/>	Yes	0977 <input type="checkbox"/>	No
<b>4.</b> Manage inventory owned by another company AND held somewhere other than at this location? . . . . .	0994 <input type="checkbox"/>	Yes	0995 <input type="checkbox"/>	No



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**29 OPERATIONAL STATUS**

Activity that best describes this establishment's status at the end of 2002  
(Mark "X" only ONE box.)

0011 <input type="checkbox"/> In operation	0014 <input type="checkbox"/> Ceased operation - Give date at right →	0018	Month	Day	Year
0013 <input type="checkbox"/> Temporarily or seasonally inactive	0015 <input type="checkbox"/> Sold or leased to another operator - Give date at right AND enter new name and mailing address below ↴				

0060 Name of new owner or operator		0061 Employer Identification Number			
		Enter EIN of new owner (9 digits) →		-	
0062 Mailing address (number and street, P.O. Box, etc.)					
0063 City, town, village, etc.			0064 State	0065 ZIP Code	
				-	

Remarks (Please use this space for any explanations that may be essential in understanding your reported data.)

**30 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?

0078  Yes      0079  No - Enter time period covered →

FROM 0070	Month	Year	TO 0071	Month	Year

0072 Name of person to contact regarding this report	0073 Title

Telephone 0074	Area code	Number	Extension	Fax 0075	Area code	Number
		-				-

0076 Internet e-mail address	Date completed 0069	Month	Day	Year

**Thank you for completing your 2002 Economic Census form.**  
**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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