2007 Annual Services Report Service Annual Survey

Other Personal Care Services



FORM

SA-81T1

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812199

REPORT DUE

Any questions call **1–800–772–7851** M–F, 8:30 a.m. to 5:00 p.m. EST. or

Visit our web site: www.census.gov/econhelp/sas

Please correct any error in the name, address, or ZIP Code.

YOUR RESPONSE IS REQUIRED BY LAW

Title 13, U.S. Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau.

YOUR RESPONSE IS CONFIDENTIAL BY LAW

Title 13, U.S. Code, requires that your response 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.**

YOUR RESPONSE IS IMPORTANT

The services industries account for nearly 70 percent of all economic activity. We conduct this survey to obtain timely, comprehensive and consistent measures needed by policy-makers, businesses, and the public to accurately assess domestic economic performance.

2007

Annual Services Report

- This report should be completed and returned on or before the due date in the preaddressed envelope provided.
- If filing within the required time frame will cause an undue burden and you would like an extension, or if you have any questions, please write to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001

or call a Census Bureau Representative at 1-800-772-7851, weekdays from 8:30 a.m. to 5:00 p.m., Eastern Standard Time.

1 Report Coverage

This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in providing personal care services (except hair, nail, facial, nonpermanent makeup, or nonmedical diet and weight reducing services). Examples include ear piercing services, hair weaving services, massage parlors, sun tanning salons, and tattoo parlors.

Does the above covera	ge describe this firm's business activity?
1 Yes – Go to 2	
2 ☐ No - Specify the firm's	s business activity and complete the report where applicable beginning with 🗵 . ——————————————————————————————————
0002	

2 Report Periods

What periods of time will this data represent?

- Report data for the 2007 calendar year if possible.
- For locations that were sold or acquired during the year, only report for the periods that this firm operated the locations.

			Month	Day	Year
		0007			
0006	1 2007 calendar year – Go to 3	From			
0000	2 Other than calendar year – Enter the periods this report will cover				
	(e.g., fiscal years, periods with less than a full calendar	8000			
	year).	To			

Report the total operating revenue for this firm's locations defined in 1 for the following categories.

- Enter "0" where applicable.Estimates are acceptable.

Exclude:

• Transfers made within the company.

2007 C)perati	ing Re	venue
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_	Bil.	Mil.	Thou.	Dol.
1800				
	\$			

1. TOTAL OPERATING REVENUE

Not Applicable

Operating Expenses

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
 Estimates are acceptable.
 Do not combine data of two or more detail lines.

Exclude:

- Transfers made within the companyCapitalized expenses

- InterestBad debt

•	Income tax Impairment					
Doro	sonnel Costs		200	7 Operati	na Expei	nses
reis	Solitier Costs		Bil.	Mil.	Thou.	Dol.
1.	Gross annual payroll – Total annual Medicare salaries and wages for all employees as reported on your firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period.	1821	\$	IVIII.	THOU.	DOI.
2.	Employer's cost for fringe benefits – Employer's cost for legally required programs and programs not required by law:					
	a. Health insurance – Insurance premiums on hospital plans, medical plans, and single service plans such as dental, vision, prescription drugs plan. Include premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs). Exclude employee contributions.	1841	\$			
	b. Pension plans:					
	1. Defined benefit pension plans – Costs for both qualified and unqualified defined pension plans. Pension plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include the	1842				
	employee's compensation and years of service and are not allocated to specific accounts maintained for employees.		\$			
	 Defined contribution plans – Costs under defined contribution plans. Pension plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount 	1843			1	
	contributed and the results of the account's activity. Examples include profits sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)		\$			
	c. Other – Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare).	1844	\$			
3.	Temporary staff and leased employee expense – Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. Include all charges for payroll, benefits and services.	1823	\$			
Ехр	ensed Materials, Parts and Supplies (not for resale)					
4.	Expensed equipment – Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, and monitors). Report packaged	1824	\$			
	software in line 6. Report leased and rented equipment in line 14		ĮΨ			
_						
5.	Expensed purchases of other materials, parts, and supplies – Materials and supplies used in providing services to others; materials and parts used in repairs; office and janitorial supplies; small tools; containers and other packaging materials; and motor fuels	1825	\$			
Ехр	ensed Purchased Services					
6.	Expensed purchases of software – Purchases of prepackaged, custom coded, or vendor					
	customized software. Include software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.	1826	\$			

Operating Expenses – (Continued)

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
 Estimates are acceptable.
 Do not combine data of two or more detail lines.

- · Transfers made within the company
- Capitalized expensesImpairment
- Interest
- Bad debt
- Income tax

Expensed Purchased Services (Continued)

7.	Data processing and other purchased computer services – Include web hosting, computer facilities management services, computer input preparation, data storage,		2007	' Operati	ng Exper	nses
	computer time rental, optical scanning services, and other computer-related advice		Bil.	Mil.	Thou.	Dol.
	and services, including training. Exclude expensed integrated systems, repair and	1845				
	maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone)		\$			
	toos, and expenses for telepolitinarioaden cervises (e.g., memol, cermount, telephone,					
8	Purchased communication services – Telephone, cellular, and fax services; computer-	1846		1	1	
0.	related communications (e.g., Internet, connectivity, online), and other wired and wireless	1040				
	communication services		\$			
9.	Purchased repairs and maintenance to machinery and equipment – Expensed repair and	1848		1	1	
	maintenance services to machinery, vehicles, equipment, and computer hardware. Exclude materials, parts, and supplies used for repairs and maintenance performed by this	1040				
	firm's employees.		\$			
10.	Purchased repairs and maintenance to buildings, structures, and offices – Include	4040		1	1 1	
	repair and maintenance to integral parts of buildings (e.g., elevators, heating systems). Exclude materials, parts, and supplies used for repairs and maintenance performed by	1849				
	this firm's employees. Report janitorial and grounds maintenance services in line 20		\$			
		1850			1	
11.	Purchased electricity - If the cost of electricity is included in lease or rental payments,	.000				
• • • •	report in line 15		\$			
12.	Purchased fuels (except motor fuels) – Fuel for heating, power or generating electricity	1851				
	(e.g., natural gas, propane, oil, coal). If the costs are included in lease or rental payments,		\$			
	report in line 15		[Ψ			
13.	Water, sewer, refuse removal, and other utility payments – Include the cost of hazardous waste removal. If the costs of these utilities are included in a lease or rental payment, report	1852				
	in line 15.		\$			
14.	Lease and rental payments for machinery, equipment, and other tangible items -					
	Include lease and rental of transportation equipment without operators; and penalties	1853				
	incurred for broken leases. Exclude capital and financing lease agreements and		\$			
	licensing/leasing of software		Ψ		<u> </u>	
		4054				
15	Lease and rental payments for land, buildings, structures, store spaces, and offices –	1854				
15.	Include penalties incurred for broken leases		\$			
		1830			1	
16.	Purchased advertising and promotional services – Include marketing and public relations					
	services.		\$			
47	Dividence dispersional and technical comings. Include management	1855		-		
17.	Purchased professional and technical services – Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering,	1000				
	and other professional services. Exclude salaries paid to your own employees for these services		\$			
	,					

5	Operating	Expenses -	(Continued)
O .	Operating	Expenses -	

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
 Estimates are acceptable.
 Do not combine data of two or more detail lines.

Exclude:

- Transfers made within the company
- Capitalized expenses Impairment Interest

- Bad debt
- Income tax

Other Operating Expenses	Other (Operat	ina Ex	penses
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			2007	Operati	ng ∟ xper	ises
18.	Depreciation and amortization charges - Include depreciation charges taken against tangible		Bil.	Mil.	Thou.	Dol.
	assets owned and used by your firm, tangible assets and improvements owned by your firm	1831				
	within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). Exclude impairment		\$			
	charges against intangible assets (e.g., paterils, copyrights). Exclude impairment	• •	T		,	
10	Governmental taxes and license fees – Payments to government agencies for taxes and	1832				
19.	licenses. Include business and property taxes. Exclude income taxes, and sales and excise	.002				
	taxes collected from customers.		\$			
20.	All other operating expenses – All other operating expenses not reported above,	4050				
	unless specifically excluded in the general instructions at the top of the page. Include office postage and package delivery. Exclude purchases of merchandise for resale	1859				
	and non-operating expenses.		\$			
		1900				
		1900				
21.	TOTAL OPERATING EXPENSES – Sum of lines 1–20		\$			

Not Applicable

			P	age 7
7 Not Applicable				
C Commerce Devenue				
8 E-Commerce Revenue				
E-commerce includes sales, receipts, and contributions from any transaction completed over an Inte network, electronic mail or other online system. Transactions are agreements between buyers and so ownership of, or rights to use, goods or services. Payment for these goods and services may or may online.	ellers to	transfei	DI ,	
Did the revenue reported in 3 include any e-commerce			erce Rev	
revenue?	Bil.	Mil.	Thou.	Dol.
1 ☐ Yes – What was this firm's e-commerce revenue?	\$			
0011 2 ☐ No – Go to 111				
9 Not Applicable				
10 Not Applicable				

Did you have an Employer Identification													
	0015												
Yes – Enter the new EIN	Ell	N											
2 No – Continue													
Was there a change in ownership or 1 ☐ Yes – Provide the date of the char		firm'e	inform	natio	n					0018	Month	Yea	ır
(for multiple mergers, provide	each firm's in	forma	tion as	an a	attachr	nent to	this	repor	t)	'			
2 No – Go to 12	0017 N	lame of	f compan	y acqu	uired or	merged	with						
2 - NO - GO 10 12													
	S	Street ac	ddress										
	С	City, Stat	ite, ZIP C	Code									
	001		-										
	EII	N											
Specify the nature of this change here	9 ———	K											
35													
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or fax to: 1-800-447-4613

To see aggregate industry results of previous Service Annual Surveys, go to the following website: www.census.gov/econ/www/servmenu.html