

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

RT-44802 (12/01/2006)

2007 ECONOMIC CENSUS

Shoe Stores

OMB No. 0607-0927: Approval Expires 12/31/2008

DUE DATE FEBRUARY 12, 2008

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 www.census.gov/econhelp

Call 1-800-233-6136, between 8:00 a.m. and 6:00 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.

RT-44802

INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

	(Ficuse correct any errors in this	3 IIIaiiii	ig add	033.)	′					
that receive this questionr law, YOUR CENSUS REF	QUIRED BY LAW. Title 13, United States Code, require to answer the questions and return the report to the PORT IS CONFIDENTIAL. It may be seen only by persetion and may be used only for statistical purposes. Furtal process.	e U.S. ons sw	Censu orn to	s Bu upl	irea hold	u. E I the	By the con	e sa fider	me ntial	
 Use blue or black ballpoint pe Do not use pencil or felt-tip p Place an "X" inside the box. 	•	Exam	ples:	2	3	4	5 6	5 7	8	9
•		\bowtie	0 1	2	3	4	5 6	5 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).													
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 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?													
0021		Yes - Go to	2 0022		No - Enter c	urre	ent EIN (9 digits) —			→ 0025	-		I
Α. Ι	s this	s establishme	ent's phys					nailing	add	ress?			
0031		Yes - Go to	line B										
0032		No - Enter - physical		0035	Number and s	tree	t						
		location		0036	City, town, vill	age,	, etc.		0037	State	0038 ZIP Code		
													İ
B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? (Mark "X" only ONE box.)													
0041		Yes	0042	No	0043		No legal boundaries	S	0044		Do not know		
C . I	n wh	at type of m	unicipalit	y is t	his establishr	nen	t physically located?	? (Mark	("X"	only	ONE box.)		
	whe informal states and the states are states and the states are states and the states are states a	where buinformat EMPLOY Is the Enestablish 0021	where business is corinformation sheet(s). EMPLOYER IDENTIFIC Is the Employer Ident establishment on its Image of the establishment of the establ	where business is conducted of information sheet(s). EMPLOYER IDENTIFICATION Notes that Employer Identification I establishment on its latest 200 model. Yes - Go to 2 model of the stablishment on its latest 200 model of the stablishment of the stablishment's physical of the stablishment's physical of the stablishment of the stablishment of the stablishment physical of the stablishment phys	where business is conducted or whinformation sheet(s). EMPLOYER IDENTIFICATION NUMI Is the Employer Identification Num establishment on its latest 2007 Into the establishment is physical (P.O. Box and rural route address of the establishment is physical (P.O. Box and rural route address of the establishment physical location to the establishment physically (Mark "X" only ONE box.) B. Is this establishment physically (Mark "X" only ONE box.)	where business is conducted or where services of information sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) show establishment on its latest 2007 Internal Revenue. ODENTIFICATION NUMBER Is the Employer Identification Number (EIN) show establishment on its latest 2007 Internal Revenue. ODENTIFICATION A. Is this establishment's physical location the some (P.O. Box and rural route addresses are not publication. ODENTIFICATION NUMBER ODENTIFICATION NUMBER ODENTIFICATION NUMBER Internal Revenue. ODENTIFICATION NUMBER ODENTIFIC	where business is conducted or where services or in information sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown establishment on its latest 2007 Internal Revenue Set 10021 Yes - Go to 2002 No - Enter curred No - Enter curred No - Enter curred No - Box and rural route addresses are not physical ocation in Physical No - Enter physical location Number and stree No - Enter physical location Number and stree No - Enter physical location Number and stree No - Enter physical location Number and Street No - Enter physical location Number (No - Enter curred No - Enter physical location Number (No - Enter curred No - Enter physical location Number (No - Enter curred No - Enter physical location Number (No - Enter curred No - Enter physical location Number (No - Enter curred No - Enter physical location Number (No - Enter curred No	where business is conducted or where services or industrial operations information sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing addrestablishment on its latest 2007 Internal Revenue Service Form 941, Em 0021	where business is conducted or where services or industrial operations are peinformation sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the establishment on its latest 2007 Internal Revenue Service Form 941, Employer OUZ1 Yes - Go to OUZ2 No - Enter current EIN (9 digits) PHYSICAL LOCATION A. Is this establishment's physical location the same as shown in the mailing (P.O. Box and rural route addresses are not physical locations.) OUX1 Yes - Go to line B OUX35 Number and street OUX36 City, town, village, etc. DOX36 City, town, village, etc. OUX37 ON ONE box.) OUX41 Yes OUX2 No OUX3 No legal boundaries	where business is conducted or where services or industrial operations are performinformation sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the same establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Question of the same as shown in the mailing add (Postal Location) PHYSICAL LOCATION A. Is this establishment's physical location the same as shown in the mailing add (P.O. Box and rural route addresses are not physical locations.) Outline B Outline	where business is conducted or where services or industrial operations are performed. information sheet(s). EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the same as establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarter of the Service Fo	where business is conducted or where services or industrial operations are performed. For further clarifical information sheet(s). 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 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return 10021	where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s). 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 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return? O021 Yes - Go to O022 No - Enter current EIN (9 digits) O025 - O025

₀₀₄₇ Town or township

0046 City, village, or borough

₀₀₂₄ Do not know

0048 Other

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## SALES, SHIPMENTS, RECEIPTS, OR REVENUE Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), and parties experience (EIN) shown in the melling address a disparating stratus from the menchandse and other operating receipts (Exclude sales or other taxes collected), and parties (EIN) shown in the melling address a corrected in Sales of menchandse and other operator Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating receipts (Exclude sales or other taxes collected), Sales of menchandse and other operating at this establishment whose payroll was reported on internal Revenue Service from \$451, Finding particles of the sales and the operating particles of the sales and taxes collected), S	011111	111-770	32 (12/01/2008)							<u>'</u>	age z
Ceased operation - Give date at right Cess Sold or leased to another operator - Give date at right Sold or leased to another operator - Give date at right Sold or leased to another operator - Give date at right Sold or leased to another operator - Give date at right Sold or leased to another operator Sold or leased to another ope	\	Which O	IE of the following best describes this estal	blishment's	operational st	tatus at the	e end c	of 2007?			
Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer (dentification Number (EIN) below?	(0011	n operation	0013	Temporarily	or season	ally ina	ctive			
Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer identification Number (EN) below? So22 Name of new owner or operator	(0014	Ceased operation - Give date at right					Month	Day	Yea	r
Obto Mailing address (Number and street, P.O. Box, etc.) Obto City, town, village, etc. Other - Specify	(AND enter name and address of new owne	er or operat			0018				
Other - Specify →			0060 Name of new owner or operator				0061 E	IN (9 dig	its)		
Other - Specify →			ooo Mailian addusa (Norshan and storat DO E	D				-		<u> </u>	
MONTHS IN OPERATION Mark "X" 2007			Mailing address (Number and street, P.O. E	Box, etc.)			<u>. </u>				
MONTHS IN OPERATION Mark *X 2007			0063 City, town, village, etc.			0064 State	0065 Z	IP Code			
MONTHS IN OPERATION Mark 'X' 2007									-		
Number of months in operation during 2007 (If none, mark "X" and go to ②.) Dollar figures should be rounded to thousands of dollars. General Popular Figures Fi	(0016	Other - Specify —————								
HOW TO REPORT DOLLAR RIGURES Faigure St. 1,025,628.79;				e mark "X"	and go to 📆)						
HOW TO REPORT DOLLAR FIGURES If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00): SALES, SHIPMENTS, RECEIPTS, OR REVENUE Mark "X 2007 if None 1 taxes collected.) Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) Mort Applicable. PEMPLOYMENT 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 1. Exclude: Temporary staffing obtained from a staffing service. Contractors, subcontractors, or independent contractors. Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. 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. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12. Mark "X 2007 if None Number Number Mark "None Number Number	<u>'</u>	Varriber			and go to 3 .,	Mark "	'X "				
If a value is "0" (or less than \$500.00): Report			thousands of dollars.	aea to		if Nor	ne \$Bi	I. M			Dol.
SALES, SHIPMENTS, RECEIPTS, OR REVENUE Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) Not Applicable. PEMPLOYMENT 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 . Exclude: Temporary staffing obtained from a staffing service. Contractors, subcontractors, or independent contractors. Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12. B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll 1. Annual payroll					_	→ □				0 2 6	
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Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) 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 Exclude: Temporary staffing obtained from a staffing service. Contractors, subcontractors, or independent contractors. Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. 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. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12. Sales in Mark "X" 2007 if None Number Mark "X" 2007 Salis M	5	SALES, S	HIPMENTS, RECEIPTS, OR REVENUE								
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 •. Exclude: • Temporary staffing obtained from a staffing service. • Contractors, subcontractors, or independent contractors. • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. • 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. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12. B. Payroll before deductions (Exclude employer's cost for fringe benefits.) **India Mark "X" 2007 if None Number Number Sill. Mill. Thou. Dol. **India Dol. Dol. Dol. Dol. Dol. Dol. Dol. Dol.							16 2 BI	I. M	11.	I nou.	Doi.
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 Exclude: • Temporary staffing obtained from a staffing service. • Contractors, subcontractors, or independent contractors. • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. • 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. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12	6	Not Appl	cable.								
 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			MENT AND PAYROLL								
 Temporary staffing obtained from a staffing service. Contractors, subcontractors, or independent contractors. Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. 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. For further clarification, see information sheet(s). A. Number of employees for pay period including March 12. B. Payroll before deductions (Exclude employer's cost for fringe benefits.) Mark "X" 2007 if None Number Mark "X" 2007 if None \$Bil. Mil. Thou. Dol. Annual payroll		• Full Ser (EIN	ice Form 941, Employer's Quarterly Federa I shown in the mailing address or corrected	I Tax Retur	nt whose payr n, and filed un	oll was re der the Er	ported nploye	on Inte r Identii	rnal Re ficatio	evenue n Numbe	r
 Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. 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. Mark "X" 2007 For further clarification, see information sheet(s). A. Number of employees for pay period including March 12	L	• Ten	porary staffing obtained from a staffing ser								
Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services. Mark "X"					d under an en	nployee le	asing c	ompan	y's EIN	<i>I.</i>	
consulting, computer programming, engineering, or accounting services. Mark "X" 2007 For further clarification, see information sheet(s). A. Number of employees for pay period including March 12			<u> </u>	_	•						
A. Number of employees for pay period including March 12		con	ulting, computer programming, engineerin	g, or accou	nting services		ı	Mark "X"		2007	
B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll	ŀ	For furth	r clarification, see information sheet(s).							Number	
B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll		A. Numb	er of employees for pay period including N	/larch 12					000	1 1 1	-
	E	B. Payro	l before deductions (Exclude employer's co	ost for fring	e benefits.)			I. M			Dol.
2. First quarter payroll (January-March, 2007)		1. Ar	nual payroll			0300					
		2. Fi	st quarter payroll (January-March, 2007) .			0310					

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101111111-4-4002 (12/01	
If not shown, please Number (CFN) from	e enter your 11-digit Census File the mailing address.
8-18 Not Applicat	ble.
KIND OF BUSINE Which ONE of the (Mark "X" only O	e following best describes this establishment's principal kind of business in 2007?
0700 448 210 40 1	☐ Family shoe store
448 210 40 5	☐ Men's and women's shoe store
448 210 20 1	☐ Women's shoe store
448 210 10 1	☐ Men's shoe store
448 210 30 1	Children's and juveniles' shoe store
448 210 50 1	Athletic footwear store
448 210 40 3	Orthopedic shoe store
448 120 00 1	☐ Women's clothing store
448 110 00 1	☐ Men's clothing store
448 140 00 1	☐ Family clothing store
811 430 00 2	☐ Shoe repair shop
772 000 00 1	Other kind of business - Specify
0701	
20 CLASS OF CUSTO	OMER
A. As a general k	business practice, did this establishment sell to household consumers and individual users in 2007?
0251 Yes	
0252 No	
B. Were 75% or	more of this establishment's sales to retailers/wholesalers for resale in 2007?
0256 Yes	
0257 No	
C. Did this estab	lishment require proof of business or professional license from new customers in 2007?
0276 Yes	
0277 No	

CONTINUE WITH 20 ON PAGE 4

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20	CLA	SS C	OF CUSTOMER - Continued		
				2007	
	D. E	stim <i>Circl</i>	nate the percentage of this establishment's total sales (reported in ⑤) by class of customer. The all that apply and then report percentages for the items circled.)	Whole perconstant of sales a receipts	nd
	1	. 1	Household consumers and individual users		%
	2	: . 1	Retailers for resale		%
	3	·. '	Wholesale establishments for resale	' '	%
	4	· .	Repair shops for use in repair work		%
	5	. 1	Manufacturing and mining industrial users for use as input goods in production		%
	6	i . 1	Restaurants, hotels, food services, and contract feeding		%
	7	' .	Businesses for end use in their own operation, not for resale or production		%
	8	i. I	Building contractors, heavy construction, and special trade contractors		%
	9) .	Farmers for use in farm production		%
	1	0.	Governmental bodies (Federal, state, and local)		%
	1	1.	Export sales		%
	1	2.	Other - Specify		
			0874		%
	1		TOTAL	1 0 0	%
21	Whi	ch O	O OF SELLING NE of the following best describes this establishment's principal method of selling in 2007? " only ONE box.)		
	0751		Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic	onic means	;)
	0752		Store or display showroom (selling from a fixed or permanent location with physical displays of premerchandise and/or from a counter)	riced	
	0753		Warehouse or office (including telephone/fax orders or outside sales representatives)		
	0754		Mail order		
	0755		Home shopping via television		
	0756		Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, plan, or temporary kiosk sales)	party	
	0757		Vending machines		
	0758		Other - Specify		
		0759			

Forn	n RT-44802 (12/01/2006)							Page 5					
If n Nur	ot shown, please enter your 11-digit Census Fil nber (CFN) from the mailing address.	e											
						2007							
	ноw то					es are acce _l ollars OR pe							
	REPORT PERCENTS			\$ Bil.	Mil.	Thou.	Dol.	Percent					
	If figure is 38.76% of	Damant subala mana	4-	7 2		111001		3 9					
	total sales:	Report whole perce	nts			1 1		3 9					
22	(Report sales for each product line sold by this establishment, either as a dollar figure or as a whole percent of total sales (reported in 6). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above.)												
		Cen-			2007								
	Description of sales, shipments, receipts, or re	evenue	sus			es are acce _l ollars OR pe							
	bescription of sales, simplificates, receipts, or it	cvenuc	use	\$ Bil.	Mil.	Thou.	Dol.	Percent					
0723			0720	0721				0722					
1.	Footwear, including accessories (Report women's homen's hosiery on line 3.)	nosiery on line 2 and											
	a. Men's footwear, including dress and casual foot	twear	20261										
	aon a reaction, moraling areas and casual fool												
	b. Women's footwear, including dress and casual	footwear	20262										
	c. Children's footwear, including boys', girls', infar dress and casual footwear	nts', and toddlers'	20263										
	d. Men's athletic footwear, including sneakers and sports boots		20265										
	e. Women's athletic footwear, including sneakers a sports boots		20266			1 1		1 1					
	f. Children's athletic footwear, including boys', gir toddlers' sneakers and outdoor hiking/sports bo	ls', infants', and ots	20267										
	g. Footwear accessories, including polishes, laces, etc.		20268										
	h. Sum lines 1a through 1g		20260	1	1 1	1 1							
2.	Women's, juniors', and misses' wear, including acc girls', infants', and toddlers' wear on line 4 and foo	essories (Report twear on line 1.)	20220	·		1 1		1 1					
3.	Men's wear, including accessories (Report boys' we												
	footwear on line 1.)		20200										
4.	Children's wear, including boys' (sizes 2 to 7 and 8 4 to 6x and 7 to 14), and infants' and toddlers' clotl (Report footwear on line 1.)	to 20), girls' (sizes hing and accessories	20240										
5.	Sporting goods, including bicycles, parts, and acces	ssories	20500										
6.	Jewelry, including watches, watch attachments, no	velty jewelry, etc	20400										
7.	All other merchandise (Report receipts for services principal lines and estimated sales below		29810										
	a		29811		· ·								
	b.		29812										
	C.		29813										
	CONTIN	UE WITH 🥏 ON PAGE 6											

Form	RT-44802 (12/01/2006)						F	age 6					
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued												
					2007								
	Description of sales, shipments, receipts, or revenue Cen- Estimates are acceptab sus Report dollars OR percei												
	Description of sales, snipments, receipts, or revenue	use	\$ Bil.	Mil.	Thou.	Dol.	1	cent					
0723		0720	0721				0722						
	All nonmerchandise receipts, including receipts from repairs, reptals												
8.	All nonmerchandise receipts, including receipts from repairs, rentals, storage, and other services provided to customers EXCLUDING SALES AND OTHER TAXES												
9.	. TOTAL (Should equal 6) if reporting in dollars.)												
23	Not Applicable.	1						-					
24)	SHIPPING AND HANDLING												
•	OTHER ING AND HANDLING												
	A. Did this establishment have any receipts from customers for shipping	and h	andling	of merch	andise in	2007	•						
	Yes - Go to line B												
				F	20 stimates ar		ntable						
	₀₉₈₂ No - <i>Go to</i> 3			\$ Bil.	Mil.	1	ou.	Dol.					
	B. Receipts of this establishment from customers for shipping and handling	ng of											
	merchandise		098	5									
	C. Are receipts for shipping and handling included in sales and receipts (report	ed in 5)?									
	□ v												
	0988												
	₀₉₈₉												
25	Not Applicable.												
26	SPECIAL INQUIRIES												
	A. CONCESSION												
	Did this establishment conduct business as a department or concession	n in a	n estab	lishment d	perated l	oy an	other						
	firm in 2007?												
	2241												
	2241												
	2242 No												
	B. FRANCHISE												
	Was this establishment operating under a trademark authorized by a fr	ranchi	sor in 2	007?									
	(Mark "X" only ONE box.)												
	O237 Yes - franchisee owned establishment												
	O238 Yes - franchisor owned establishment												
	0239												
27	-29 Not Applicable.												

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.	•						. ago /
REMARKS (Please use this space for any explanations that may	y be essen	tial in un	derstand	ding your	reporte	d data.)
© CERTIFICATION - This report is substantially accurate and	was prepa	red in ac	cordanc	e with the	e instru	ctions.	
Is the time period covered by this report a calendar year?		Month	Year	.	1	Month	Year
☐ Yes ☐ No - Enter time period covered →	FROM	WOITH	i cai		то	WIOTILIT	Teal
Name of person to contact regarding this report	Title						
	ension			Area code		Num	nber
Telephone -		Fax				-	
Internet e-mail address					Month	Day	Year
			Date complet				
	000==						
Thank you for completing your 2	2007 E	CONO	MIC C	ENSU	S for	n.	

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