



2007 ECONOMIC CENSUS

Special Food Services

DUE DATE
FEBRUARY 12, 2008

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

AF-72202

**INFORMATION COPY
DO NOT USE TO REPORT**

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.

(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 ballpoint pen. • Please center numbers in their respective boxes. Examples:
- Do not use pencil or felt-tip pen. • Do not put slashes through 0 or 7.
- Place an "X" inside the box.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
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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 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 current EIN (9 digits) → 0025 -

2 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 - Go to line B

0032 No - Enter physical location →

0035 Number and street										
0036 City, town, village, etc.						0037 State		0038 ZIP Code		

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 0044 Do not know

C. In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046 City, village, or borough 0047 Town or township 0048 Other 0024 Do not know

72202013



3 OPERATIONAL STATUS

Which ONE of the following best describes this establishment's operational status at the end of 2007?
(Mark "X" only ONE box.)

0011 In operation 0013 Temporarily or seasonally inactive

0014 Ceased operation - Give date at right _____ →

Month	Day	Year

0015 Sold or leased to another operator - Give date at right _____ →

Month	Day	Year

AND enter name and address of new owner or operator and Employer Identification Number (EIN) below ↴

0060 Name of new owner or operator	0061 EIN (9 digits)
	-

0062 Mailing address (Number and street, P.O. Box, etc.)

0063 City, town, village, etc.	0064 State	0065 ZIP Code
		-

0016 Other - Specify _____ → 0815 _____

4 MONTHS IN OPERATION

Mark "X" if None

2007
Number

Number of months in operation during 2007 (If none, mark "X" and go to 50.) 0002

HOW TO REPORT DOLLAR FIGURES		Dollar figures should be rounded to thousands of dollars.	Mark "X" if None	2007			
		If a figure is \$1,025,628.79:	Report → <input type="checkbox"/>	\$ Bil.	Mil.	Thou.	Dol.
		If a value is "0" (or less than \$500.00):	Report → <input checked="" type="checkbox"/>		1 0 2 6		

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

2007			
\$ Bil.	Mil.	Thou.	Dol.

Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) 0100

6 Not Applicable.

7 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 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).

Mark "X" if None

2007
Number

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

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)	Mark "X" if None	2007			
		\$ Bil.	Mil.	Thou.	Dol.
		1. Annual payroll 0300 <input type="checkbox"/>			
2. First quarter payroll (January-March, 2007) 0310 <input type="checkbox"/>					

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

8 - 18 Not Applicable.

19 KIND OF BUSINESS

Which ONE of the following best describes this establishment's principal kind of business in 2007?
(Mark "X" only ONE box.)

- 0700 722 310 00 1 Contract feeding/food service contractor
- 722 310 00 2 School, university, or other facility cafeteria, operating on a contract basis
- 722 212 00 1 Cafeteria, not operating on a contract basis
- 722 310 00 3 Industrial/institutional/in-plant feeding
- 722 310 00 4 Airline (in-flight) catering
- 722 320 00 6 Caterer for banquets, weddings, etc.
- 454 390 30 2 Coffee service
- 722 330 00 1 Mobile food service, including ice cream, snacks, sandwiches, and meals distributed from trucks, carts, or other vehicles
- 454 390 30 8 Honor snack tray or box service
- 722 110 00 1 Full-service restaurant, patrons order through waiter/waitress service and pay after eating
- 722 211 00 2 Limited-service restaurant, patrons pay before eating; including delivery-only locations
- 722 213 70 1 Refreshment place, including pretzel shops and other specialty snack or nonalcoholic beverage shops
- 772 000 00 1 Other kind of business - Specify

0701

20 CLASS OF CUSTOMER

Estimate the percentage of this establishment's total sales (reported in **5**) by class of customer.

- 1. Household consumers and individuals 0261
- 2. Businesses and government (billed to expense accounts) 0273
- 3. TOTAL

2007	
Whole percent of sales and receipts	
	%
	%
1 0 0	%

21 Not Applicable.

72202039



HOW TO REPORT PERCENTS



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

Report whole percents

2007				
Estimates are acceptable. Report dollars OR percents.				
\$ Bil.	Mil.	Thou.	Dol.	Percent
				39

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE
 (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 5). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above.)

Description of sales, shipments, receipts, or revenue	Census use	2007				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721			0722	
1. Meals, snacks, other food items, and non-alcoholic beverages prepared and served or dispensed for immediate consumption						
a. Meals, snacks, and other food items served at a table, bar, or other place attended by a server	21101					
b. Non-alcoholic beverages served at a table, bar, or other place attended by a server	21102					
c. Meals, snacks, and other food items prepared and dispensed without table service for consumption on the premises	21103					
d. Non-alcoholic beverages prepared and dispensed without table service for consumption on the premises	21104					
e. Meals, snacks, and other food items dispensed via drive-through service	21105					
f. Non-alcoholic beverages dispensed via drive-through service	21106					
g. Meals, snacks, and other food items prepared and dispensed for immediate consumption off the premises, other than via drive-through service, including take-out, curbside pick-up, and delivery	21107					
h. Non-alcoholic beverages prepared and dispensed for immediate consumption off the premises, other than via drive-through service, including take-out, curbside pick-up, and delivery	21108					
i. Meals, snacks, and other food items dispensed via mobile vending service	21112					
j. Non-alcoholic beverages dispensed via mobile vending service (Report office coffee service supplies on line 6.)	21113					
k. Sum lines 1a through 1j	21100					
2. Meals, snacks, other food items, and beverages prepared for immediate consumption under long-term contract (30 days or more)						
a. Meals, snacks, other food items, and beverages prepared for immediate consumption under long-term contract for transportation businesses	21211					
b. Meals, snacks, other food items, and beverages prepared for immediate consumption under long-term contract other than for transportation businesses (Report office coffee service supplies on line 6.)	21212					
c. Sum lines 2a and 2b	21210					

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CONTINUE WITH 2 ON PAGE 5

CONTINUE ON PAGE 5

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

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

Description of sales, shipments, receipts, or revenue	Census use	2007				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721				0722
3. Meals, snacks, other food items, and beverages prepared for catered events <i>(Report related equipment rental receipts on line 13h.)</i>						
a. Meals, snacks, other food items, and beverages served at catered events held on the caterer's premises	21221					
b. Meals, snacks, other food items, and beverages served at catered events held on the customer's premises	21222					
c. Meals, snacks, other food items, and beverages dropped off at the customer's event <i>(Report delivery charges on line 13g.)</i>	21223					
d. Meals, snacks, other food items, and beverages prepared for customer pick-up, including party platters	21224					
e. Sum lines 3a through 3d	21220					
4. Alcoholic beverages prepared and served or dispensed for immediate consumption						
a. Wine and wine drinks prepared and served or dispensed for immediate consumption	20132					
b. Beer, ale, and malt beverages prepared and served or dispensed for immediate consumption	20133					
c. Drinks with/of distilled spirits prepared and served or dispensed for immediate consumption	20131					
d. Sum lines 4a through 4c	20130					
5. Packaged alcoholic beverages	20140					
6. Packaged food and non-alcoholic beverages	20100					
7. Cigars, cigarettes, tobacco, and smokers' accessories	20150					
8. Souvenirs and novelty items	20877					
9. All other merchandise <i>Specify principal lines and estimated sales below</i>	29810					
a. _____	29811					
b. _____	29812					
c. _____	29813					
10. Room or unit accommodation for travelers and others	20070					
11. Membership dues and fees	20060					

CONTINUE WITH **22** ON PAGE 6

CONTINUE ON PAGE 6

72202054



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

Description of sales, shipments, receipts, or revenue	Cen- sus use	2007				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721				0722
12. Gambling services						
a. Table wagering games	20041					
b. Gambling machine products, including slot machines and video lottery terminals	20042					
c. Sale of tickets to lotteries and other games of chance to gamblers, for a fee or commission	20043					
d. Hosting of coin-operated gambling machines	20044					
e. Other gambling services	20048					
f. Sum lines 12a through 12e	20040					
13. Other services						
a. Rental of non-residential space, including short-term rental of space for meetings, conventions, weddings, parties, and similar events	29636					
b. Admissions to live performing arts performances	29611					
c. Admissions to dance halls and clubs, including cover charges	29612					
d. Hosting of vending machines, video games, and other non-gambling coin-operated machines	29615					
e. Employment services	29618					
f. Coat check services	29619					
g. Delivery services for food and beverages	29622					
h. Other services	29699					
i. Sum lines 13a through 13h	29600					
14. TOTAL (Should equal 5 if reporting in dollars.)	29990					1 0 0

23-25 Not Applicable.

72202062



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

26 SPECIAL INQUIRIES

A. CONTRACT FEEDING

Mark "X" if None

1. Percentage of this establishment's total sales and receipts (reported in 5) from providing food service UNDER CONTRACT to another company; a hospital; or a governmental, penal, or educational institution to feed its employees, patients, inmates, passengers, students, etc. 2350

2007	
Whole percent of sales and receipts	
	%

2. Percentage of this establishment's total sales and receipts (reported in 5) from providing food service under contract to the following facilities (Report all government hospitals, nursing homes, schools, etc. on line g.)

a. Hospitals 2351

b. Nursing homes 2352

c. Commercial and office buildings 2353

d. Manufacturing and other industrial plants 2354

e. Colleges or universities 2355

f. Primary and secondary schools 2356

g. Governmental organizations (Federal, state, local) 2357

h. Airlines, ships, railroads, buslines, and other in-transit facilities 2358

i. Stadiums, clubs, and other recreation and amusement facilities 2359

j. Other - Specify ↴

0896 2360

k. TOTAL (Sum of lines 2a through 2j should equal percentage reported on line 1) 2361

2007	
Whole percent of sales and receipts	
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%

B. FRANCHISE

Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark "X" only ONE box.)

0237 Yes - franchisee owned establishment

0238 Yes - franchisor owned establishment

0239 No

27-29 Not Applicable.

72202070

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?

Yes No - Enter time period covered →

FROM	Month	Year	TO	Month	Year

Name of person to contact regarding this report

Title

Telephone	Area code	Number		Extension	Fax	Area code	Number	
			-					-

Internet e-mail address

Date completed

Month Day Year

Thank you for completing your 2007 ECONOMIC CENSUS form.

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

72202088

