

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

MI-21302 (08/10/2007)

2007 ECONOMIC CENSUS

Mineral Contract Services

OMB No. 0607-0939: 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.

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

MI-21302

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.

- Please center numbers in their respective hoxes
 Fyamples: Use blue or black ballpoint pen.
- Do not use pencil or felt-tip pen. Do not put slashes through 0 or 7.
- Place an "X" inside the box.

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The reporting unit for this form is a mineral service establishment. A mineral service establishment represents all nationwide mineral support activities performed for operators of mineral properties under your current Employer Identification Number (EIN) on a fee or contract basis.

Mineral service activities include exploration and other mining and quarrying support services.

For more examples and further clarification, see information sheet(s).

0	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 3 0022 No - Enter current EIN (9 digits)								
2	Not Applicable.								

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Which o	ONAL STATUS	3							
(Mark "X	f the following (" only ONE box	best describes x.)	this establishment's ope	erational status	at the end	d of 200	7?		
0011	In operation								
0016	Under constru	ction, develop	ment, or exploration						
0013	Temporarily o	r seasonally in	active						
0014	Ceased operat	ion - <i>Give date</i>	at right ————			0018	Monti	n Day	Year
0015	enter name an	nd address of n	erator - Give date at rigi new owner or operator a ber (EIN) below ⊋	ht AND ——— and		-			
		ew owner or ope				0061 EII	V (9 di	gits)	
						'	-	· · ·	
	0062 Mailing add	iress (Number a	nd street, P.O. Box, etc.)						
	0063 City, town,	villago eta			0064 State	0065 ZII	P Codo		
	oobs City, town,	village, etc.			0064 State	0005 ZII	Code	-	1 1 1
MONTHS	S IN OPERATIO	N						Ma if	rk "X" 200 None _{Numl}
Number	of months in o	peration durin	g 2007 (If none, mark "X	(" and go to ூ .,)				
		Dollar figure	s should be rounded to			Mark "X"	,	200	7
HOW TO REPORT		thousands	of dollars.			if None	\$ Bil.	Mil.	Thou.
DOLLAR FIGURES		If a figure is	\$1,025,628.79:	Report —					1 0 2
ridones		If a value is	"0" (or less than \$500.00): Report —		\boxtimes	'		
SALES,	SHIPMENTS, RI	ECEIPTS, OR R	EVENUE						
Exclude of fixed		ncome such as	s royalties, interest, divid	dends, or the sa	le	Mark "X" if None	, \$ Bil.	200	
							Э БП.	Mil.	Thou.
A. Total	value of produ	cts shipped an	d other receipts (<i>Report</i>	t detail in 2 2.)	0100	Ш			
		κported (This is	s a breakout of the value	e reported on					
line A	•								
line A Repo custo	ort the value of omers in the Pa	nama Canal Zo	ed for export. Include slone, the Commonwealth	of Puerto Rico,					
line A Repo custo and l or ot	ort the value of omers in the Pa U.S. possession her wholesalers	nama Canal Zo is, as well as th s for export. Al		of Puerto Rico, pped to exporte products sold t	ers O			1 1	

2. Number of other employees for pay period including March 12	Mark "X' if None	yer y's EIN.	007 mber
 Full- and part-time employees working at this establishment whose payroll was report Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under Identification Number (EIN) shown in the mailing address or corrected in	Mark "X' if None	yer y's EIN.	
 Full- and part-time employees working at this establishment whose payroll was report Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under Identification Number (EIN) shown in the mailing address or corrected in	Mark "X' if None	yer y's EIN.	
 Full- or part-time leased employees whose payroll was filed under an employee leasing temporary staffing obtained from a staffing service. Subcontractors and their employees. For further clarification, see information sheet(s). A. Number of employees 1. Number of production, development, and exploration workers for pay period including March 12 2. Number of other employees for pay period including March 12 3. TOTAL (Add lines A1 and A2) Man if N Man if N 	Mark "X' if None	, 20	
 Temporary staffing obtained from a staffing service. Subcontractors and their employees. For further clarification, see information sheet(s). A. Number of employees 1. Number of production, development, and exploration workers for pay period including March 12 2. Number of other employees for pay period including March 12 3. TOTAL (Add lines A1 and A2) Mai if N Payroll before deductions (Exclude employer's cost for fringe benefits.) 	Mark "X' if None	, 20	
 Subcontractors and their employees. For further clarification, see information sheet(s). A. Number of employees 1. Number of production, development, and exploration workers for pay period including March 12 2. Number of other employees for pay period including March 12 3. TOTAL (Add lines A1 and A2) Man and A2 and	if None		
For further clarification, see information sheet(s). A. Number of employees 1. Number of production, development, and exploration workers for pay period including March 12 2. Number of other employees for pay period including March 12 3. TOTAL (Add lines A1 and A2) Mai if N	if None		
 Number of employees Number of production, development, and exploration workers for pay period including March 12 Number of other employees for pay period including March 12 TOTAL (Add lines A1 and A2) Payroll before deductions (Exclude employer's cost for fringe benefits.) 	if None		
1. Number of production, development, and exploration workers for pay period including March 12	if None		
1. Number of production, development, and exploration workers for pay period including March 12	0325	Nur	mber
2. Number of other employees for pay period including March 12 3. TOTAL (Add lines A1 and A2) 3. Payroll before deductions (Exclude employer's cost for fringe benefits.) Mai if N	0336		++-
2. Number of other employees for pay period including March 12	0320		
3. TOTAL (Add lines A1 and A2)	0320		
Mar 3. Payroll before deductions (Exclude employer's cost for fringe benefits.) if N			
Mar 3. Payroll before deductions (Exclude employer's cost for fringe benefits.) if N	. ">"		
3. Payroll before deductions (Exclude employer's cost for fringe benefits.) if N			
3. Payroll before deductions (Exclude employer's cost for fringe benefits.) if N	<i>'k " X "</i> I	2007	
1. Annual payroll	None \$ Bil.	Mil.	Thou
1. Allitual payroli			
_	_	T T	
a. Production, development, and exploration workers			+
b. All other employees			
c. TOTAL (Add lines B1a and B1b)			
9 5:			
2. First quarter payroll (January-March, 2007)			
	N.Al. //3//	, 20	007
	Mark "X" if None	-	ours
C. Number of hours worked by production, development, and exploration workers (Annual hours worked by production, development, and exploration		In	iou.
workers reported on line A1.)	00		

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D. Employer's cost for fringe benefits - Employer's cost for legally required programs and programs not required by law.	Mark "X" if None	\$ Bil.	2007 Mil.	Tho
1. Health insurance - Insurance premiums on hospitals, medical plans, and single service plans such as dental, vision, and prescription drug plans. Include premium equivalents for self-insured plans and fees paid to third party administrators (TPAs). Do not include employee contributions.	0333			
2. Pension plans				
a. 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 employee's compensation and years of service and are not allocated to specific accounts maintained for employees.	0335	_	1 1	
b. 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 contributed and the results of the account's activity. Examples include profit sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)	0337		1 1	
3. Other - Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare)	0339			
4. TOTAL (Add lines D1 through D3)	0220			
Not Applicable.				
Report inventories at cost or market using generally accepted accounting practice.	s.			
A. Did this establishment own inventories, regardless of where held, at the end o O486 Yes - Go to line B		2006?		
A. Did this establishment own inventories, regardless of where held, at the end o O486 Yes - Go to line B O487 No - Go to O487		2006?		
A. Did this establishment own inventories, regardless of where held, at the end o O486 Yes - Go to line B O487 No - Go to B. Report inventories for products owned by this establishment as of	f 2007 and/or Mark "X"		End of 20	
A. Did this establishment own inventories, regardless of where held, at the end o O486 Yes - Go to line B O487 No - Go to B. Report inventories for products	f 2007 and/or	\$ Bil.	End of 20 Mil.	
A. Did this establishment own inventories, regardless of where held, at the end o O486 Yes - Go to line B O487 No - Go to B. Report inventories for products owned by this establishment as of	f 2007 and/or Mark "X"			
A. Did this establishment own inventories, regardless of where held, at the end o 0486	f 2007 and/or Mark "X" if None			
A. Did this establishment own inventories, regardless of where held, at the end o Output Out	f 2007 and/or Mark "X" if None			
A. Did this establishment own inventories, regardless of where held, at the end o Outside Yes - Go to line B Outside No - Go to B. Report inventories for products owned by this establishment as of December 31. 1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outside Yes - Go to line B Outside No - Go to B. Report inventories for products owned by this establishment as of December 31. 1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outside Yes - Go to line B Outside No - Go to B. Report inventories for products owned by this establishment as of December 31. 1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outside Yes - Go to line B Outside No - Go to B. Report inventories for products owned by this establishment as of December 31. 1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outstand	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outstand	f 2007 and/or Mark "X" if None	\$ Bil.		
A. Did this establishment own inventories, regardless of where held, at the end o Outso Yes - Go to line B Outso No - Go to B. Report inventories for products owned by this establishment as of December 31. 1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)	f 2007 and/or Mark "X" if None	\$ Bil.		06 Tho

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

10 INVENTORIES BY VALUATION METHOD

A. LIFO valuation method before adjustment

Specify method

0895

B. Any non-LIFO valuation method -

C. TOTAL (Add lines A and B. Total should equal 9, line B1.)

Thou.

End of 2006

Mil.

Mark "X" if None

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0485

\$ Bil.

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D	and 12 Not Applicable.				
13	ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION				
	See information sheet(s) on how to report leasing arrangements.				
		Mark "X"		2007	
		if None	\$ Bil.	Mil.	Thou.
	A. Gross value of depreciable assets (acquistion cost) at the beginning of the		ı	1 1	
	700.				
	B. Capital expenditures for new and used buildings, structures, machinery, and equipment depreciable assets (Exclude land.)				
	C. Total retirements and disposition of depreciable assets for the year (Gross				
	value of assets sold, retired, scrapped, destroyed, etc.)				
	D. Gross value of depreciable assets at the end of the year (Add lines A and B			1 1	
	minus C)	Ш			
	E. Depreciation charges for the year			1 1	1 1
14	RENTAL PAYMENTS				
		Mark "X"		2007	
		if None	\$ Bil.	Mil.	Thou.
	A. Rental payments for buildings and other structures (Include land.)			1 1	
	B. Rental payments for machinery and equipment		_		
	C. TOTAL (Add lines A and B)		I		
15	Not Applicable.				

Report how much of the inventory reported in 9, line B1 is subject to the following valuation methods.

\$ Bil.

Mark "X" if None

0487

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End of 2007

Thou.

Mil.

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6 SELECTED EXPENSES					
Include costs incurred in mining process such as supplies, resales, contract work, fue	s, and ele	ectricity	<i>'</i> .		
A. Selected production related costs	Mark "X"		2007		
	if None	\$ Bil.	Mil.	Thou.	
1. Cost of supplies used, minerals received for preparation and purchased machinery installed <i>(Report detail in ①.)</i>	1 🗆				
2. Cost of products bought and sold as such without further processing (Report sales in ②.)	6				
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity (<i>Report detail in</i> 3 .)	o 🗆				
4. Cost of purchased electricity (Report quantity on line B1.)	5		-		
5. Cost of work done for you by others on your materials	4 🗌				
6. TOTAL (Add lines A1 through A5)	0 🗆	<u>'</u>			
		2007			
	Mark "X" if None	Kilowatthours			
B. Quantity of Electricity	ii ivone	Bil.	Mil.	Thou.	
1. Purchased electricity (<i>Quantity comparable to cost reported on line A4.</i>) 043	6				
2. Generated electricity (Gross less generating station use.)	7				
3. Electricity sold or transferred to other establishments (<i>Include on lines</i> B1 or B2.)	8 🗌				

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C. Oth	er operating expenses paid by this establishment	Mark "X" if None	\$ Bil.	2007 Mil.	Thou
		ii ivone	э БП.	IVIII.	1 not
1.	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.)	6			
2.	Expensed equipment - Expensed computer hardware and other equipment				
	(e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors) (Report packaged software on line C3.)	4 🔲	·	· ·	
3.	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		I	1 1	
	software upgrades and alterations.)	8 📙			
4.	Data processing and other purchased computer services				
	(Include computer facilities management services, computer input				
	preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training.				
	Exclude expensed integrated systems, repair and maintenance of				
	computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity,	_			
	telephone).)	8 🗌			
5.	Purchased communication services - Telephone, cellular, and fax services;				
	computer-related communications (e.g., Internet, connectivity, online) and	2 🔲		i l	I
	other wired and wireless communication services	۷ 🗀			
6.	Purchased repairs and maintenance to buildings and/or machinery and				
	equipment (Exclude materials, parts, and supplies used for repairs and maintenance performed by this firm's employees.)	4 🔲			
7.	Water, sewer, refuse removal, and other utility payments (Include the costs of hazardous waste removal.)	7		1 1	ı
	costs of mazardous waste removally	<i>,</i>			
8.	Purchased advertising and promotional services (Include marketing and			l l	I
	public relations services.)	5 📙			
9.	Purchased professional and technical services (Include management				
	consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other professional services.				
	Exclude salaries paid to your own employees for these services.)	6			
10.	Governmental taxes and license fees - Payments to government agencies				
	for taxes and licenses (Include business and property taxes. Exclude income taxes.)	6		1 1	ı
		·			
11.	All other operating expenses - All other operating expenses not reported elsewhere (Exclude purchases of merchandise for resale and nonoperating				
	expenses.) - Specify				
	0897	7 🗆	1	1 1	ı
12.	TOTAL (Add lines C1 through C11)	9 📙			



17 DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES

Delivered cost of individual items listed below. Delivered cost is the amount paid or payable after discounts and including freight and other direct charges incurred by the establishment in acquiring the materials. The figures reported should represent the total purchase cost of supplies, minerals received for preparation, machinery installed, etc., actually used or processed during 2007. Include purchases, interplant transfers, and withdrawals from inventories. If the data are not available from your records, reasonable estimates are acceptable.

Include:

Items listed below whether charged to current or capital accounts.

Cost of items for which less than \$25,000 worth was used in "All other supplies," line 6.

Supplies purchased by this establishment for use by companies performing subcontract work for this establishment.

Associated labor costs of the kind reported in **7** and **6**, line A5.

Payments made for subcontract services performed, including payments for supplies and equipment furnished by the contractor incidental to this work.

Line No.	Machinery installed and supplies used	Machinery installed and supplies used Census materi code			Purchased from others or received from other establishments of this company Cost, including delivery configuration (freight-in)			
				0630		Mil.	Thou.	
1	Machinery, purchased and installed (including mobile loading transportation, and other equipment installed at the operation charges to both current and capital accounts.)	on) (Including		07	0631	1 1	1 1	
2	Parts and attachments for mining, mineral preparation, conconveying machinery and equipment		333000	333000 09				
	Supplies used					1 1		
3	Ammonium nitrate		325920	05				
4	Explosive materials (excluding ammonium nitrate) and blasting accessories Steel shapes and forms (excluding castings and forgings) such as plates, sheets, strip, piling, bars, rails, wheels, track accessories, pipe, tubing, wire, wire products, and structural shapes All other supplies (Specify the three principal types of supplies included here.)		325920	15		1 1		
5			331000	52			1 1	
6			009700	98			1 1	
7	TOTAL (Should equal total reported in 🕡, line A1)		771000	00				
18	FUELS USED				000=			
Line No.	Kind of fuel (Report total delivered cost, not cost per unit. Fuels received from other establishments of your company should be included at estimated market value.)	Census fuel code	Unit of measure for quantities	t of ire for			cluding ry cost	
	0643	0640	0645	0642		\$ Mil.	Thou.	
1								
	Coal (bituminous, subbituminous, lignite, and anthracite) .	212110 03	short tons					
	CONTINUE WITH ® ON PAGE 9							

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<u>18</u>	FUELS USED - Continued						
				2007	2007 consumption		
Line No.	Kind of fuel (Report total delivered cost, not cost per unit. Fuels received from other establishments of your company should be included at estimated market value.)	Census fuel code	Unit of measure for quantities	Quantity	Cost, including delivery cost (freight-in)		
_	0643	0640	0645	0642	\$ Mil.	Thou	
	Fuel oil	0040		0042	0041		
	Distillate (light) grade numbers 1, 2, 4, and light diesel fuel	324110 17	barrels				
	Residual (heavy) grade numbers 5 and 6 and heavy diesel fuel	324110 19	—				
	Gas (natural, manufactured, and mixed)	211110 15	mil ft³				
	Gasoline	324110 15	1000 gal				
	Other fuels (liquefied petroleum gas, coke, wood, and other) (Specify.)				1 1	1 1	
	, and the second	009600 18					
	TOTAL (Should equal total reported in 6 , line A3)	007720 00					
06:	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest in the operation operation operation of the largest in the operation of the largest in the operation of the largest in the operation opera	ons.) receipts.)					
	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of	ons.) receipts.) nts served					
06:	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of the Principal mineral activity of establishments of the Metal mining 452 Metal mining 454 Coal mining 456 Mining of nonmetallic minerals, except fuels 458 Crude petroleum, natural gas, and natural gas	ons.) receipts.) nts served					
062	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of the Principal mineral activity of establishments of the Metal mining 452 Metal mining 454 Coal mining 456 Mining of nonmetallic minerals, except fuels 458 Crude petroleum, natural gas, and natural gas	ons.) receipts.) nts served					
062 22	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of the Principal mineral activity of establishments of the Metal mining 452 Metal mining 454 Coal mining 456 Mining of nonmetallic minerals, except fuels 458 Crude petroleum, natural gas, and natural gas and 21 Not Applicable.	ens.) receipts.) nts served s liquids nineral services potental to the conti	ract work.				
062	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of th	ens.) receipts.) nts served sliquids nineral services potental to the continut of others, but i	ract work. not delivere	d during 2007			
06:	TYPE OF OPERATION (Include production, development, and exploration operation) (Mark "X" the ONE box for which you received the largest of large of	ens.) receipts.) nts served sliquids nineral services potental to the continut of others, but i	ract work. not delivere	d during 2007			

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued						
No.	Products and services	Census product		of receipts,		
Line	0734	co de	\$ Bil.	Mil.	Thou.	
_	Metal mining services	0,00	0,01			
	D. A.	04.044.4.0404		1 1	I I	
1	Prospect and test drilling	213114 0431				
2	Exploration work (excluding prospect and test drilling and geophysical surveying services)	213114 0111				
3	Sinking metal mine shafts and driving metal mine tunnels	213114 0441				
4	Open-pit mining of metal ores not for your own account	213114 0221		1 1	1 1	
	Other metal mining services (including stripping overburden) (Specify kind.)					
5		213114 0493				
		213114 0433				
	Coal mining services			1 1		
6	Prospect and test drilling	213113 0431				
7	Sinking coal mine shafts and driving coal mine tunnels services	213113 0461				
	Other coal mining services (including strip, auger or underground mining not for own account, drilling, overburden stripping, and recovering culm bank) (Specify kind.)					
8		213113 0471				
	Nonmetallic minerals (excluding fuels) services					
9	Prospect and test drilling	213115 0331				
10	Open-pit or quarry mining minerals not for your own account	213115 0111				
	Other nonmetallic services (including overburden stripping, drilling services, and blasting) (Specify kind.)					
11		213115 0351		1 1	1 1	
	Work performed All other oil and gas field services (Specify kind.)	213119 0331				
1.		040440.5555		l l		
12		213112 3595				
13	Hauling minerals and mine equipment beyond mine property	999830 1000				
	Other miscellaneous receipts (including receipts for repair work, etc.) (Specify kind.)					
14		999809 8000				
	All other products made in this establishment - Specify and report each product with sales value of \$50,000 or more that cannot be assigned to one of the "listed products and services". For all remaining products, write "Other" and report a single total value.	211 3000				
	CONTINUE WITH 🥸 ON PAGE 11					

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If n	not shown, please enter your 11-digit Census File mber (CFN) from the mailing address.					1
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued					
Line No.	Products and services		Census product	\$ Bil.	of receipts Mil.	, f.o.b. plant Thou.
7	0734		0730 18	0731	1 1	1 1
15						
16			26		1 1	
17			34		1 1	
18	Resales - Sales of products bought and sold without further manufacture, processing, or assembly (The cost of such items should be reported in Coline A2.)),	999890 0000			
19	TOTAL (Should equal 9 , line A)		770000 0000		1 1	1 1
23	-29 Not Applicable.					
•	CERTIFICATION - This report is substantially accurate and was prepared	in acc	ordance with th	a instru	ctions	
┢			ordanoo with th	io motra		
Is th		onth	Year	то	Month	Year
	Yes INO - Enter time period covered					
	Name of person to contact regarding this report Title					
				_		
	Area code Number Extension	Fax	Area cod	е	Numbe	r
	Telephone	гах			-	, , , E
	Internet e-mail address		Date	Month	Day	Year
			completed			
	Thank you for completing your 2007 ECO	NOM	IIC CENSU	S for	m.	

Thank you for completing your 2007 ECONOMIC CENSUS form.

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