

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

AS-56101 (02/06/2007)

2007 ECONOMIC CENSUS

Employment Services

OMB No. 0607-0934: 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.

AS-56101

INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

	_	(Freder correct any errors in this	mann	ig u	aaro	,00.,							
	that receive this questionn law, YOUR CENSUS REF	QUIRED BY LAW. Title 13, United States Code, requires aire to answer the questions and return the report to the ORT IS CONFIDENTIAL. It may be seen only by perso ion and may be used only for statistical purposes. Furth process.	U.S. ns sw	Cen orn	sus to	Bu uph	irea nold	u. I the	By t	the Infic	sam Ient	ne :iali	
• Do	e blue or black ballpoint pe not use pencil or felt-tip pe	•	Exam	ple		2	3	4	5	6	7	8	9
• Pla	ce an "X" inside the box.						<i>J</i>				<u></u>	0	_

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																
	0021		Yes - Go to 2	0022		No - Enter curr	ent EIN (9	digits) ——		→ 0025		-	- 1		1	_
2	A. Is	this	s establishment'						iling add	dress?						
	0031		Yes - Go to line	e B												
	0032			→	0035	Number and stre	et									
			location	i	0036	City, town, village	e, etc.		0037	State	0038 Z	IP Co	de			
														1		
					ally	ocated inside th	ne legal b	oundaries of	the city	, town,	village	, etc	:.?			
	0041		Yes 0042	1	No	0043	No legal	boundaries	0044	ı 🗆 [Do not	knov	N			

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

₀₀₄₇ Town or township

0046 City, village, or borough

₀₀₂₄ Do not know

0048 Other

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(Mark "λ	NE of the following best describes this establishment's "only ONE box.)	operational sta	tus at the	end of	f 2007?			
0011	" only ONE box.)							
0014	In operation 0013	Temporarily o	r seasona	lly inac	tive			
00.4	Ceased operation - Give date at right			 [Month	Day	Yea	ar
0015	Sold or leased to another operator - Give date at right			0018	1			
	AND enter name and address of new owner or operate and Employer Identification Number (EIN) below	or						
	0060 Name of new owner or operator			0061 EI	N (9 dig	its)		
					-			
	0062 Mailing address (Number and street, P.O. Box, etc.)							
	0063 City, town, village, etc.		064 State	000E 7II	P Codo			
	olos City, town, vinage, etc.	0	064 State	0065 ZI	Code			
					-			
	Othor Crosify							
	Other - Specify							
MONTHS	S IN OPERATION					1	Mark "X" if None	200
								vuiii
Number	of months in operation during 2007 (If none, mark "X"	and go to ��.)				. 0002		
	Dollar figures should be rounded to		Mark "X			2007		
HOW TO REPORT	thousands of dollars.		if None	\$ Bil	. Mi	l.	Thou.	D
DOLLAR	If a figure is \$1,025,628.79:	Report ——	→ □			1	0 2 6	
FIGURES	If a value is "0" (or less than \$500.00):	Report —	→ ⊠					T
		пероп —	— 🔼					
SALES, S	SHIPMENTS, RECEIPTS, OR REVENUE		Mark "X			2007	7	
Operatin	g receipts (Professional Employer Organizations (PEOs,	should	if None		. Mi	l.	Thou.	D
	oss amounts billed to clients, including gross wages of perployees.)		100					
Not Appl								_
	MENT AND PAYROLL							
Include:								
	- and part-time employees (including worksite employe	es of Profession	nal Emplo	ver Or	aanizat	ions)	whose	
pay	roll was reported on Internal Revenue Service Form 94 er the Employer Identification Number (EIN) shown in	1, Employer's C	Quarterly F	ederal	Tax Re	eturn,	and filed	t
Exclude	:							
• Wo	ksite employees of Professional Employer Organization	ns whose payro	II was no i	t repor	ted un	der th	e EIN sh	owi
in ti	ne mailing address or corrected in 1 , e.g., employmen	t and payroll file	ea unaer a	a ciient	rs EIIV.			
For furth	er clarification, see information sheet(s).				lark "X"		2007	
				T:	f None		Number	
A. Numl	per of employees for pay period including March 12			0320				
			Mark "X			2007	7	
B. Payro	Il before deductions (Exclude employer's cost for fring	e benefits.)	if None	\$ Bil	. Mi	l.	Thou.	D
1. Aı	nnual payroll		0300				- '	
2 F:	rst quarter payroll (<i>January-March, 2007</i>)		0310					

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lf not sh Number	own, pl (CFN) f	lease e rom th	nte ne n	er your 11-digit Census File nailing address.
19 KINI	OF BU	SINESS	S OF	R ACTIVITY
	ch ONE rk "X" or			owing best describes this establishment's principal kind of business or activity in 2007? bx.)
En	nploym	ent pla	acer	ment agencies
0700	561 310 0	00 1		Employment offices (agencies)
	541 612 2	20 1		Executive search services
	561 310 0	00 2		Employment registries
	561 310 0			Casting bureaus or agencies
St	affing s	service	S	
	561 320 0	00 8		Temporary staffing - providing commercial (general office/administrative) and professional (healthcare, technical and IT, accounting, etc.) staffing
	621 610 0	00 1		Home health care provider, including visiting nurse associations
	115 115 0	00 1		Farm labor contractors
Pr	ofessio	nal Em	nplo	yer Organizations
	561 330 0	00 2		Professional Employer Organization (PEO) - providing human resource and human resource management services to client businesses and their employees
Ot	her em	ploymo	ent	services
	541 214 2	20 2		Payroll services
	777 561 0	01 1		Other type of help supply service or labor contractor - Specify service and type of employees
0701				
0.				41.74
Ut	ner kin	α οτ οι	usin	ness or activity
	777 560 0	00 1		Managed services/solutions outsourcing (providing specific services, such as engineering services, security guard services, etc., to a client's organization, offered as a solutions package and assuming responsibility for the final outcome of the contracted service or project) - Specify type of service
0701				
	773 000 0	00 2		Other kind of business or activity - Specify
0701				
20 Not	Applicat	hle		
Was	PORT SI this est blishme	ablishn	nent	t primarily engaged in providing management, administrative, or support services to other enterprise (rather than for the general public or other business firms) in 2007?
0998		es	- 1	· · · · · · · · · · · · · · · · · · ·
0999	□ N	0		

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DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in ⑤). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipts lines.)

- **Line 1** Report commissions or fees from recruiting, selecting, and referring candidates to the client to fill positions on the client's payroll.
- Line 2 Report commissions or fees from recruiting, selecting, and referring candidates to work as independent contractors
- Line 3 Report receipts from specialized search and recruitment services limited to filling highly paid executive, senior manager, and professional positions, according to client specifications. Services may include conducting detailed interviews with the client organization's management team, developing job profiles, conducting original research and advertising to locate potential job candidates, screening possible candidates, negotiating compensation, and providing post-hire follow-up. The client makes the decision as to which candidate to hire. The search agency's fee is charged whether or not the candidate is hired.
- **Line 4** Report gross billings from supplying temporary employees to client organizations.
- **Line 5** Report fees from the conversion of temporary staff to a client's workforce. Report temporary staffing fees on the appropriate detail lines under **line 4**.
- Line 6 Report fees from the coordination of temporary help staff for clients.
- Line 7 Report amounts received for carrying client's employees on this establishment's payroll.
- **Line 8** Report gross billings from providing a staffing arrangement in which the organization, a Professional Employer Organization (PEO), co-employs a client's workforce.
- Line 9 Report receipts from operating online job or resume listing services, job site memberships, and employment database search services.
- Line 12 Report fees from providing a "solutions package" to a customer where this firm is responsible for the final outcome (e.g., completed project, cost savings).
- **Line 17** Report billings for the calculation of employee hours worked, pay rates, deductions, and other payroll-related data from clients. Include receipts from generating paychecks, payroll reports, and tax filings.

			1		2007			_
	Description of sales, shipments, receipts, or revenue	Cen- sus use			2007 es are acce ollars OR p			
			\$ Bil.	Mil.	Thou.	Dol.	Perc	ent
0723		0720	0721				0722	
1.	Permanent (direct employee) placement services	32700						
2.	Independent contractor placement services	32710						
3.	Retained executive search services	32720		1 1	' '			
4.	Temporary staffing services							
	a. Office/clerical and administrative support staff	32731						
	b. Industrial/trades staff	32732						
	c. Health care staff	32733						
	d. Information technology (IT) staff	32734						_
	e. Engineering staff	32735						_
	f. Scientific staff	32736	,	· ·				
	g. Accounting/financial staff	32737						

If no	ot shown, please enter your 11-digit Census File aber (CFN) from the mailing address.						
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued						
		Cen-		Fatire 4	2007	nt o l- l	
	Description of sales, shipments, receipts, or revenue	sus			es are acce _l ollars OR p		
0723		0720	\$ Bil.	Mil.	Thou.	Dol.	Percent
4.	Temporary staffing services - Continued	0720	0721				0722
	h. Management (including executives) staff	32738	1		1 1		1 1
	i. Sales/marketing staff	32739					
	j. Legal staff	32741					
	k. Other professional staff	32742					1 1
	I. Other temporary staffing services - Specify						
	· ·		1		1 1		1 1
		32743					
	m. Sum lines 4a through 4l	32730	·				
5.	Temporary staffing-to-permanent placement services	32750					1 1
6.	Management and coordination of temporary help (program						
0.	management)	32760					
7.	Payroll services	32770					1 1
8.	Co-employment services						
	a. Co-employment services with payroll and benefit services	32781	1				
		32701					
	b. Co-employment services with payroll and human resource services .	32782					
	c. Co-employment services with payroll, benefit, and human resource services	32783					1 1
	d. Sum lines 8a through 8c	22700					
	_	32780					
9.	Online employment services	32790					
10.	Sale of online job site advertising space	32800					
11.	Employment-related software, development, and sales	32820					1 1
12.	Managed services (outsourcing) - Specify						
	·		ı		1 1		1 1
		39010					
13.	Human resource consulting services	32830					
14.	Employee evaluation services	32840					
15.	Medical examinations for employment	32860					
16.	Outplacement/career counseling services	32850					
	CONTINUE WITH ② ON PAGE 6						

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DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued									
Description of sales, shipments, receipts, or revenue	Cen- sus use				2007 s are ac llars OF				
723	0720	\$ Bil.	Mil	•	Thou	. Do	_	Perce	ent
17. Payroll accounting services	36880								_
18. Training services	32870	·							
9. Personal background checks	33100	·							
20. Resale of merchandise - Specify									
	20020								
21. All other operating receipts - Specify if more than 10 percent of total	39638								
receipts									
	39737								
22. TOTAL OPERATING RECEIPTS - Sum of lines should equal 6 if							1	0	
									(
reporting in dollars and 24 Not Applicable.	39850								(
and 24 Not Applicable. EXPORTED SERVICES NOTE - An exported service is a product (e.g., service performed, license or transferred to, a customer or client (individual, government, business e	agree establi	shment	t, etc.)	locar	ted ou	tside	or sol		
and 24 Not Applicable. EXPORTED SERVICES	agree stabli onwe foreig firms.	shment alth Te an pare	t, etc.) rritorie nt firm	loca: es, or	ted ou ' U.S. p	tside osses	or sol		
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and Not Applicable. EXPORTED SERVICES NOTE - An exported service is a product (e.g., service performed, license or transferred to, a customer or client (individual, government, business e United States (i.e., outside the 50 States, District of Columbia, U.S. Communication (e.g., branches). Exclude products provided to unaffiliated and affiliated foreign firms (e.g., branches). Exclude products provided to domestic subsidiaries of foreign A. Did the receipts or revenue (reported in 5) include any amounts for expenses.	agree stabli onwe foreig firms.	shment alth Te an pare	t, etc.) rritorie nt firm ces?	loca: es, or	ted ou · U.S. p ıbsidia	tside posses ries,	or sol	s).	
and Not Applicable. EXPORTED SERVICES NOTE - An exported service is a product (e.g., service performed, license or transferred to, a customer or client (individual, government, business e United States (i.e., outside the 50 States, District of Columbia, U.S. Comm Include products provided to unaffiliated and affiliated foreign firms (e.g., branches). Exclude products provided to domestic subsidiaries of foreign A. Did the receipts or revenue (reported in) include any amounts for exported in Solution of the services Solution of the Solution So	agree establi onwe foreig firms.	shment alth Te in pare d servi	t, etc.) rritorie nt firm ces?	locat	ted ou · U.S. p ubsidia	tside posses ries,	or soli the ssion	s).	
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A. Did the receipts or revenue (reported in 1) include any amounts for exported Service or transfer or sor to line B Note - Go to 1 B. Amount of receipts or revenue for exported services A. PROFESSIONAL EMPLOYER ORGANIZATIONS	agree establi onwe foreig firms.	shment alth Te in pare d servi	t, etc.) rritorie nt firm ces?	locat	ted ou · U.S. p ubsidia	tside posses ries,	or soli the ssion	s).	
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A. Did the receipts or revenue (reported in 1) include any amounts for exported. Note - Go to line B PECIAL INQUIRIES A. PROFESSIONAL EMPLOYER ORGANIZATIONS (worksite) payroll costs, such as salaries, benefits, and taxes paid to worksite) payroll costs, such as salaries, benefits, and taxes paid to worksite, only worksite) payroll costs, such as salaries, benefits, and taxes paid to completed, and affiliated foreign firms (e.g., branches). Exclude products provided to domestic subsidiaries of foreign A. Did the receipts or revenue (reported in 3) include any amounts for exported in 3 includ	agree establi ionwe foreig firms. xporte	shmen alth Te in pare d servi	t, etc.) rritorie nt firm ces? \$	Bil.	Mil.	2007	Thou	. [t	Do
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A. Did the receipts or revenue (reported in The Special Not a Country of the Professional Employer Organizations (PEOs) only B. Amount of receipts or revenue for exported services A. PROFESSIONAL EMPLOYER ORGANIZATIONS (To be completed by Professional Employer Organizations (PEOs) only 1. Net revenues (i.e., gross amounts billed to client firms LESS clients (worksite) payroll costs, such as salaries, benefits, and taxes paid to a cuthorities).	agree establi ionwe foreig firms. xporte	shmen alth Te in pare d servi	t, etc.) rritorie nt firm ces? \$	Bil.	Mil.	2007	Thou	. [t	Do
A. Did the receipts or revenue (reported in 1) include any amounts for exported. Note - Go to line B PECIAL INQUIRIES A. PROFESSIONAL EMPLOYER ORGANIZATIONS (worksite) payroll costs, such as salaries, benefits, and taxes paid to worksite) payroll costs, such as salaries, benefits, and taxes paid to worksite, only worksite) payroll costs, such as salaries, benefits, and taxes paid to completed, and affiliated foreign firms (e.g., branches). Exclude products provided to domestic subsidiaries of foreign A. Did the receipts or revenue (reported in 3) include any amounts for exported in 3 includ	agree establi ionwe foreig firms. xporte	shmen alth Te in pare d servi	t, etc.) rritorie nt firm ces? \$	Bil.	Mil.	2007	Thou	. [t	Do

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

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SPECIAL INQUIRIES - Continued

A. PROFESSIONAL EMPLOYER ORGANIZATIONS - Continued

(To be completed by Professional Employer Organizations (PEOs) only.)

		Number of			Annual pay	roll roll	
Payroll and employment Clients' (worksite) employees paid by this establishment, by industry category of client	Cen- sus use	employees for pay period including March 12, 2007	Cen- sus use	\$ Bil.	Mil.	Thou.	Dol
1. Agriculture, forestry, hunting	0738		0739				
2. Mining	0740		0741				
3. Utilities	0742		0743				
4. Construction	0744		0745				
5. Manufacturing	0746	_	0747				
6. Wholesale	0748	_	0749				
7. Retail	0760		0761				
8. Transportation and warehousing	0762		0763				
 Information services (e.g., publishing, motion picture, sound recording, and communications) 	0764		0765				
10. Finance and insurance	0766		0767				
11. Real estate and rental and leasing	0768		0769				
12. Professional, scientific, and technical services	0770		0771				
13. Administrative and support and waste management and remediation services	0772		0773				
14. Educational services	0774		0775				
15. Health care and social assistance	0776		0777				
16. Arts, entertainment, and recreation	0778		0779				
17. Accommodation (e.g., hotels and motels) and food services (e.g., restaurants)	0780		0781				
18. Repair, personal care, and laundry services	0782		0783				
19. Other - <i>Specify</i>							
, in the second second	0701		0707				
0786	0784		0785				
b. Management and administrative employees of this establishment	3562		3567	<u>'</u>			
c. TOTAL (Add lines a1 through b. Total should equal ♥, line A for column 1 and ♥, line B1 for		1 1 1 1			1 1		
column 2.)	3200		3300				

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B. PLACEMENT SERVICES Estimate the percentage of placement fees reported in ②, lines 1 through 3, from the following Sources: 1. Business clients 3722 2. Individual clients 3723 3. Other clients 4. TOTAL C. FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark 'X' only ONE box.) 2222 Yes - franchisee owned establishment 2223 No Post Applicable. EMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)	ODESIAL INSU											1 6	geo
Estimate the percentage of placement fees reported in ②, lines 1 through 3, from the following Percent 1. Business clients													
1. Business clients						.		0.6				2007	
2. Individual clients 3722 3. Other clients 3722 4. TOTAL 7. C. FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark 'X' only ONE Dox.) 2227		e percenta	age of placem	nent fees repoi	rted in (🤓, lines T	through	3, from	the follow	wing			t
3. Other clients 3723 4. TOTAL 70 0 25 C. FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark 'X' only ONE Dox.) 2237	1. Busines	s clients									. 3722		%
4. TOTAL C. FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark 'X' only ONE box.) 233	2. Individu	al clients									. 3721		%
C. FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark "X" only ONE box.) 2237	3. Other cl	ients									. 3723		
Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark "X" only ONE box.) 2237	4. TOTAL											1 0 0	%
Yes - franchisor owned establishment No No No No Applicable.	Was this es	stablishme	nt operating box.)	under a trader	mark au	ıthorized l	oy a fran	chisor ir	1 2007?				
Not Applicable. EMARKS (Please use this space for any explanations that may be essential in understanding your reported data.) CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. the time period covered by this report a calendar year? Yes No - Enter time period covered → FROM TO TO Name of person to contact regarding this report Title Area code Number Extension Fax Area code Number Telephone Area code Number Extension Fax Month Day Year completed	0237 Ye	es - franch	isee owned e	establishment									
Description Property Propert	0238	es - franch	iisor owned e	establishment									
© CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. the time period covered by this report a calendar year? Yes No - Enter time period covered — FROM TO TO Name of person to contact regarding this report Area code Number Extension Fax Area code Number Telephone — Date completed — Date	0239 N	o											
CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions. the time period covered by this report a calendar year? Yes No - Enter time period covered To Name of person to contact regarding this report Title Telephone Area code Number Extension Fax Area code Number Internet e-mail address Date completed	27-29 Not Appli	cable.											
the time period covered by this report a calendar year? Yes No - Enter time period covered FROM Name of person to contact regarding this report Title Area code Number Extension Fax Internet e-mail address Month Year Area code Number Fax Month Year Month Year Area code Number Fax Month Day Year													
Yes No - Enter time period covered Name of person to contact regarding this report Title Area code Number Extension Fax Area code Number Fax - Internet e-mail address Date completed Month Day Year	30 CERTIFICATION	N - Inis re	port is substa	antially accura	ite and	was prepa	ired in a	ccordan	e with th	e Instru	ctions.		_
Name of person to contact regarding this report Title Area code Number Extension Telephone Fax Date completed Month Day Year	s the time period co	vered by	this report a	calendar year?	? [Month	Yea	r		Month	Year	
Area code Number Extension Fax Area code Number Internet e-mail address Date completed Month Day Year	☐ Yes		o - Enter time	period covere	ed—▶	FROM				ТО			
Telephone Fax	Name of person to	contact re	garding this re	port		Title							
Telephone Fax													
Telephone Fax		Area code	, Nu	ımber	Exte	nsion			Area code		Nun	nber	_
Date completed	Telephone	, ii su sode			LAG		Fax	(50 0000				
completed	Internet e-mail add	dress						_		Month	Day	Year	f
Thank you for completing your 2007 ECONOMIC CENSUS form.													
	Tha	ank yo	u for con	npleting y	our 2	2007 E	CONO	MIC C	ENSU	S for	m.		•

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

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