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



2003 ANNUAL SURVEY OF MANUFACTURES

OMB No. 0607-0449: Approval Expires 09/30/2004

- OR - Write to the address above. nolude your 11-digit Census File Wite to the address above. nolude your 11-digit Census File Wite to the address above. nolude your 11-digit Census File Wite to the address. YOUR RESPONSE IS REOLIRED 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 ink. •Please center numbers in their respective boxes. Examples: •Do not put slashes through 0 or 7. 0 1 2 3 4 5 6 7 8 9 •Place an "X" inside the box. •Complete only the unshaded portion of each item. •Place an "X" inside the box. •Complete only the unshaded portions are performed. For further clarification, see instructions. •Months IN OPERATION Mark "X" and go to \$.) •Wumber of months in operation during 2003 (If none, mark "X" and go to \$.) • •Months IN OPERATION Mark "X" and go to \$.) •Mumber of months in operation during 2003 (If none, mark "X" and go to \$.) • •Months in	<i>Mail</i> your completed form to: U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001	INFORMATION COPY DO NOT USE TO REPORT
There our Web site at www.cansus.gov/econhelp Call: • OR - Write to the address above. nelude your 11-digit Consus File nalling address. VOUR CENSUS REPORT IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations nalling address. VOUR 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' "Ilea en "X" inside the box. *Place an "X" inside the box. *Place an "X" inside the box. *O not put slashes through 0 or 7. *Place an "X" inside the box. *O not put slashes through 0 or 7. *Place an "X" inside the box. *O not put slashes through 0 or 7. *Place an "X" inside the box. *O not put slashes through 0 or 7. *Place an "X" inside the box. *O not put slashes through 0 or 7. *Place an "X" inside the box. *O monthes in operation during 2003 (If none, mark "X" and go to ©.). *Month's IN OPERATION Mark "X" *Mumber of months in operation during 2003 (If none, mark "X" and go to ©.). *If None	Please read the accompanying instructions before answering the questions.	DO NOT USE
• OR - Call: • OR - Write to the address above. Include your 11-digit Census File Number (CR) printed in the VOUR CENSUS REPORT 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 COMPLEXITAL. It may be seen only by persons sworn to uphold the confidentiality files are immune from legal process. • OR on the response in this mailing address. • OVE CENSUS REPORT IS COMPLEXITAL. It may be seen only by persons sworn to uphold the confidentiality files are immune from legal process. • OP on to use pencil. • O I 2 3 4 5 6 7 8 9 • OP not use pencil. • Oon put slashes through 0 or 7. • Place an "X" inside the box. • Complete only the unshaded portion of each item. • O I 2 3 4 5 6 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 instructions. • MONTHS IN OPERATION Mark 'X' and go to ①.) • MONTHS IN OPERATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2003 internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?	Need help or have questions about filling out this form?	
-08 - Write to the address above, include your 11-digit Census File // Mumber (Th) Upited in the address above, include your 11-digit Census File // Mumber (Th) Upited in the address above, include your 11-digit Census File // Mumber (Th) Upited in the address above, include your 11-digit Census File // Mumber (Th) Upited in the address and return the report to the U.S. Census Bureau. By the same inswer the questions and return the report to the U.S. Census Bureau. By the same inswer the questions and return the report to the U.S. Census Bureau. By the same inswer the questions in the sense instruction to uphold the confidentiality files are immune from legal process. // Upit CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality files are immune from legal process. // Place an 'X' inside the box. •Please center numbers in their respective boxes. Examples: ·0 on to use pencil. •Please center numbers in their respective boxe. Examples: ·0 on to use pencil. • 0 on to ustabated portion of each item. ·0 on tuse pencil. • 0 on tuse sense is conducted or where services or industrial operations are performed. For further clarification, see instructions. ·10 MONTHS IN OPERATION Mark 'X' 2003 if None Mumber of months in operation during 2003 (If none, mark 'X' and go to ①,)	Visit our Web site at www.census.gov/econhelp	
Write to the address above, field (Please correct any errors in this mailing address.) Produce your 11-fight Census File (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 for that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same for the remove the legal process. VUS CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality files are immune from legal process. VUS blue or black ink. •Please center numbers in their respective boxes. Examples: •Do not use pencil. •Do not put slashes through 0 or 7. •Place an "X" inside the box. •Complete only the unshaded portion of each item. •Do not use pencil. •Do not put slashes through 0 or 7. •Place an "X" inside the box. •Complete only the unshaded portion of each item. •Do not use pencil. •Do not put slashes through 0 or 7. •Place an "X" inside the box. •Complete only the unshaded portion of each item. •Do not use pencil. •Do not put slashes through 0 or 7. •Do not put slashes through 0 or 7. •Do not put slashes through 0 or 7. •Do not put slashes through 0 or 7. 0 1 2 3 4 5 6 7 8 9	Call:	
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 Do not use pencil. •Do not put slashes through 0 or 7. •Complete only the unshaded portion of each item. D 1 2 3 4 5 6 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 instructions. MONTHS IN OPERATION Mark "X" 2003 if None Number of months in operation during 2003 (If none, mark "X" and go to D.). 2 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 2003 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return? Yes No - Enter current EIN (9 digits) - 3 PHYSICAL LOCATION A. Is this establishment's physical location the same as shown below? (P.O. box and rural route addresses are not physical locations.) Yes No - If incorrect or blank, enter physical location 7 	law, YOUR CENSUS RE of Census Bureau informa	PORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality ation and may be used only for statistical purposes. Further, copies retained in respondents'
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 MONTHS IN OPERATION Mumber of months in operation during 2003 (If none, mark "X" and go to D.) 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 2003 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return? Yes No - Enter current EIN (9 digits)	where business is conduc	s form is an establishment. An establishment is generally a single physical location sted or where services or industrial operations are performed. For further clarification,
Number of months in operation during 2003 (If none, mark "X" and go to D.) Image: Control of the state	1 MONTHS IN OPERATION	
 Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2003 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return? Yes No - Enter current EIN (9 digits) PHYSICAL LOCATION A. Is this establishment's physical location the same as shown below? (P.O. box and rural route addresses are not physical locations.) Yes No - If incorrect or blank, enter physical location 7 Number and street 	Number of months in ope	
Yes No - Enter current EIN (9 digits) → - PHYSICAL LOCATION A. Is this establishment's physical location the same as shown below? (P.O. box and rural route addresses are not physical locations.) Yes No - If incorrect or blank, enter physical location Number and street	Is the Employer Identifica	tion Number (EIN) shown in the mailing address the same as the one used for this
A. Is this establishment's physical location the same as shown below? (P.O. box and rural route addresses are not physical locations.) [] Yes [] No - If incorrect or blank, enter physical location 7 [] <t< td=""><td></td><td></td></t<>		
(P.O. box and rural route addresses are not physical locations.) Yes No - If incorrect or blank, enter physical location 7 Number and street	3 PHYSICAL LOCATION	
	A. Is this establishment's (<i>P.O. box and rural ro</i>	a physical location the same as shown below? <i>ute addresses are not physical locations.</i>)
	Yes	No - If incorrect or blank, enter physical location
City, town, village, etc. State ZIP Code	Number and street	C
City, town, village, etc. State ZIP Code		
	City, town, village, etc.	State ZIP Code
B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?	B. Is this establishment p	physically located inside the legal boundaries of the city, town, village, etc.?
YesNoNo legal boundariesDo not know	□ Yes □	No Do not know

						Ма	rk "X'	,	2003	
HOW		Dollar figures	should be rounded to	thousand	s of do		Vone		Mil.	Thou.
REPO DOLL	AR	If a figure is \$	51,025,628.79:	Report	t				1	02
FIGUF	RES	-)" (or less than \$500.00)	: Report	t	> [X			
4 SALES		, RECEIPTS, OR RE		•		-				
	,	,		Mark "X' if None		2003				02
			l other receipts <i>(Report</i>	_	\$ Bil.	Mil.		hou.	\$11	hou.
B. Val	ue of product oorted on line	s exported <i>(This is</i> A.)	a breakout of the value							
shi Col as oth	pments to cus mmonwealth well as the va per wholesaler	tomers in the Pana of Puerto Rico, and lue of products shi s for export. Also,	pped to exporters or include the value of							
for	eian aovernm	ents. Exclude prod	ent to be shipped to ucts shipped for further on in the United States.	🗆				-		
fur	ther assembly	ner domestic plants , fabrication, or ma value reported on li	of your company for nufacture (<i>This is a</i> ne A.)							
1.	Is this the onl	y establishment of	this firm?							
	🗌 Yes - Go	to 🖸								
	🗌 No - <i>Go</i>	to line C2								
	plants of your or manufactu	r company for furth re (<i>This is a breakc</i>	d to other domestic her assembly, fabricatio but of the value reported	1						
5 E-CON	IMERCE SALE	S, SHIPMENTS, RE	CEIPTS, OR REVENUE							
A. Did rec cus Inte	l any of the ar eipts? (E-com stomers where ernet, Extrane	nount reported in merce sales, shipm price and/or terms t, Electronic Data Ir	Iine A include e-com ents, or receipts are on s of the sale are accepte tterchange (EDI) networ y not be made online.)	line orders ed or negot	for pro tiated o	ducts froi ver an	m			
	Yes - Go to	line B								
	No - Go to	9					[20	03	2002
					_			Perc	ent	Percent
B. Per e-c	cent of total v ommerce <i>(Re</i>	port whole percents	nipped and other receip s. Estimates are accepta	ble)					%	
		IN DO	IFORMATI NOT USE	on (to r	COF EP	γ ORT	•			

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

6 EMPLOYMENT AND PAYROLL

Include:

- Shown, please enter your 11-digit Census File (CFN) from the mailing address.
 IPLOYMENT AND PAYROLL
 Intervention of the temployees 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 **Q**.
- Full- and part-time employees whose payroll was filed under a Professional Employer Organization's EIN.

Exclude:

(7)

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Purchased or managed services, such as janitorial, guard, or landscaping services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.

For further clarification, see instructions.

A. N	umber of employees	Ī		00	0000
		Mark "X" if None	20		2002
1	. Number of production workers for pay periods including:	II None	Nun	nper	Number
	a. March 12	. 🗆			
	b. May 12	. 🗆			
	c. August 12	. 🗆			
	d. November 12	. 🗆			
2	. Sum lines A1a through A1d				
3	Average annual production workers (Divide line 2 by 4 - omit fractions.).				
4	All other employees for pay period including March 12	. 🗆			
5	. TOTAL (Sum lines A3 and A4)				
	ayroll before deductions (<i>Exclude employer's cost for fringe</i> enefits.)				
		Mark "X"	20	03	2002
1	. Annual payroll	if None	\$ Mil.	Thou.	\$ Thou.
	a. Production workers	. 🗆			
	b. All other employees	. 🗆			
	c. TOTAL (Sum lines B1a and B1b)	. 🗆			
2	. First quarter payroll (January-March, 2003)				
C. E	mployer's cost for fringe benefits				
		Mark "X"	20	03	2002
		if None	Ho	urs	Hours
			Th	ou.	Thou.
D . N и	umber of hours worked by production workers (Annual hours orked by production workers reported on lines A1a through A1d.)	. 🗆			
-9	Not Applicable.				

Form	MA -1	10000(L)	(03-08-2004)
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10	INVENTORIES								
	(Report inventories using generally accepted accou	unting pr	actices	.)					
	Were inventories of this establishment subject to t	he Last-i	n, First	-out (LIFO)	method	of valuati	on?		
	Yes - Use the sum of the LIFO amount plus the LIFO for calendar year 2003, specify in the RE	he LIFO r MARKS	eserve section	for compl	eting line	s A throu	gh F2.	lf you chai	nged to
	No - Complete only lines A through E1. Line	E1 should	d equal	l line D.					
		Mark "X"		End of 20	1	Mark "X'		End of 20	1
		if None	\$ Bil.	Mil.	Thou.	if None	\$ Bil.	Mil.	Thou
	A. Finished goods								
	B. Work-in-process								
	C. Materials, supplies, fuels, etc	. 🗆							
	D. TOTAL								
	E. Of the value on line D report:					_			
	1. Amount not subject to LIFO costing		L.	1 1			l.		1 1
	2. Amount subject to LIFO costing (gross)	. 🗆							
	F. Of the value on line E2 report:								
	1. Amount of LIFO reserve								
	 Amount of LIFO value (net)							col	PY
1	Not Applicable.				- DN	IATI	ON		N R
12	CAPITAL EXPENDITURES			INF		CE '	гО	REP	0
	(Refer to the instructions on how to report leasing	arranger	ments.)	h NC)T U	36			
	A. Capital expenditures for new and used deprecia	able asse	ets in 20	003 Mar	k "X"	2003		20	02
	1. Capital expenditures for new and used build	dinas and	1 othor	if N	lone \$1	Viil. T	nou.	\$ Tł	iou.
	structures (Exclude land.)			C					
	2. Capital expenditures for new and used mac			[
	3. TOTAL (Sum lines A1 and A2)								
	B. Breakdown of expenditures for new and used r	nachinar	vand						
	equipment by type (Reported on line A2.)	nacimiei	yanu						
	1. Automobiles, trucks, etc., for highway use			C					
		equipmer	nt	C					
	2. Computers and peripheral data processing e					1	1		
	 Computers and peripheral data processing e All other expenditures for machinery and ec 	quipment	:	[

15 SELECTED EXPENSES				
Mark "X		2003	1	2002
A. Selected production related costs if None	9 \$ Bil.	Mil.	Thou.	\$ Thou.
1. Cost of materials, parts, containers, packaging, etc				
2. Cost of products bought and sold as such without further processing (<i>Report sales in</i> ②.)				
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity				
4. Cost of purchased electricity (<i>Report quantity on line B1.</i>).				
5. Cost of work done for you by others on your materials \ldots				
6. TOTAL (Sum lines A1 through A5)				
	<u> </u>	20	003	2002
	Mark "X"		atthours	Kilowatthours
D. Country of electrony	if None	Mil.	Thou.	Thou.
1. Purchased electricity (<i>Quantity comparable to cost reported on line A4.</i>).				
2. Generated electricity (<i>Gross less generating station use.</i>)				
3. Electricity sold or transferred to other establishments (<i>Include on</i>				
lines B1 or B2.)				
16–21 Not Applicable.				
10-21 Not Applicable.	PY >OR	1		
16–21 Not Applicable.	PY >OR	1		
10-21 Not Applicable.	PY >OR	1		
D-2 Not Applicable.	PY >OR	1		
D-2 Not Applicable.	PY >OR	1		
D-2 Not Applicable.	PY	1		
D-2 Not Applicable.	PY >OR	1		
D-2 Not Applicable.	PY			
10-21 Not Applicable.	PY >OR	1		
10-21 Not Applicable.	PY			
10-21 Not Applicable.	PY	1		
10-21 Not Applicable.	PY			

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENU	E				
If you cannot locate the description of any products that in column (a) and enter their value in column (c). If addi Report separately for each major kind of product. Includ appropriate product line. They should also be reported s	tional lines are n e the value of pr	leeded pl	lease use	the "REMAF	RKS" section.
An asterisk (*) at the end of a description denotes a con (CIR) questionnaire. See paragraph on "Comparability" i	parability with p Part C of CIR in	oroducts Instructior	collected 1 manual	on a Curren for item cod	t Industrial Repo le references.
Enter TOTAL value of shipments under code 7700000 8.					
	Product Class	in	Products s	shipped and o terplant transf	ther receipts, ers and exports
Products and services	code		2003		2002
(a)	(b)	\$ Bil.	(c) Mil.	Thou.	(d) \$ Thou.
	018				
	026				
OPY					
INFORMATION COPY DO NOT USE TO REPORT					
INFORMATE TO REPORT	034				
DONOT USE 1					
	042				
	050				
	059				
	067				
	075				
	083				
	091				

CONTINUE ON NEXT PAGE

23-	28	Not Applic	able.														
29	OPE	RATIONAL	STATUS														
Ū	Activ	rity that be	t describe	s this est	ablishm	ent's stati	us at th	e end o	f 2003 <i>(l</i>	Mark ".	X" onl	y ONE	box.)			
		In operatio	n														
		Under con	struction,	developn	nent, or	exploratio	on										
		Temporari	y or seas	onally ina	ctive												
		Ceased op	eration - (Give date	at right				Month	Day		′ ear					
		Sold or lea	sed to an	other ope	erator - C	Give date .	at right ow⊋										
		Name of n	w owner o	r operator			-		Employ	yer Ider	ntificati	on Nur	nber				
									Enter E	IN of n <i>(9 digit</i>	ew		-				
		Mailing ad	Iress (Num	ber and st	reet, P.O.	Box, etc.)			owner		5/						
		City, town,	village, etc								State	ZIP C	ode				
															-		
REM	ARKS	S (Please u	-				-						r repo	orted	data.)	<u> </u>	
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