



Reference Number: TA-W- _____
Subject Firm: _____

Contact Person at the Department of Labor: _____

Phone: (202) 693- _____ Fax: (202) 693-3585 E-Mail: _____ @dol.gov

1. Estimate for the product below your total purchases from the subject firm, and other domestic and foreign firms for the last two full years, the most recent year-to-date, and the comparable period in the previous year. Both quantity* and value are needed.

PRODUCT(S): _____

Period	Subject Firm		Other Domestic Firms		Foreign Firms	
	Quantity	Value	Quantity	Value	Quantity	Value
200_ (Full Year)	_____	_____	_____	_____	_____	_____
200_ (Full Year)	_____	_____	_____	_____	_____	_____
Jan thru 200_	_____	_____	_____	_____	_____	_____
Jan thru 200_	_____	_____	_____	_____	_____	_____

*Quantities provided are measured in: _____ (for example: units, dozens, pounds, tons)

2. Were any of the product(s) purchased from other domestic firms wholly manufactured in a foreign country? Yes No

If Yes, indicate percentage for:

200_ _____ %, 200_ _____ %, Jan thru _____ 200_ _____ %, Jan thru _____ 200_ _____ %
(month) (month)

3. Were any of the product(s) purchased from other domestic or foreign firms manufactured in Mexico and/or Canada? Yes No

If Yes, indicate percentage for:

200_ _____ %, 200_ _____ %, Jan thru _____ 200_ _____ %, Jan thru _____ 200_ _____ %
(month) (month)

How many hours were required to complete this form? _____

PRINT NAME	SIGNATURE		TITLE
COMPANY NAME	PHONE NUMBER	FAX NUMBER	E-MAIL

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents' obligation to reply to these reporting requirements is mandatory (Trade Act of 1974, Sections 222, 223 & 249). Public reporting burden for this collection of information is estimated to vary from 1 to 6 hours per response, 6 hours for first time respondents, and 1 hour for firms involved in a previous investigation, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the U.S. Department of Labor, Division of Trade Adjustment Assistance, Room N-5428, Washington, D.C., 20210 (Paperwork Reduction Project 1205-0342). **How this information will be used** – The U.S. Department of Labor will use the information contained on the Form 8562a to determine whether the group of workers meet the certification criteria established by law, for eligibility to apply for adjustment assistance.