If not shown, please enter your 11-digit Census File Number from the address label on page 1

Census File Number

## Item 17. CONSUMPTION OF SELECTED MATERIALS DURING 1997

## **INSTRUCTIONS**

1. General – The materials, parts, and supplies listed below are those commonly consumed in the manufacture, processing, or assembly of the products listed in item 18B. Please review the entire list and report separately each item consumed. Leave blank if you do not consume the item. If you use materials, parts, and supplies which are not listed, describe and report them in the "Cost of all other materials..." line at the end of this section. If you consumed less than \$25,000 of a listed material, include the value with "Cost of all other materials...," Census material code 970099 8.

Report materials, parts, and supplies purchased, transferred from other plants of your company, or withdrawn from inventory.

If quantities are requested, please use the unit of measure specified.

If the information as requested cannot be taken directly from your book records, REASONABLE ESTIMATES ARE ACCEPTABLE.

2. Valuation of Materials Consumed - The value of the materials, etc., consumed should be based on the delivered cost; i.e., the amount paid or payable after discounts and including freight and other direct charges incurred in acquiring the materials. Materials received from other plants within your company should be reported at their full economic value (the value assigned by the shipping plant, plus the cost of freight and other handling charges).

If purchases or transfers do not differ significantly from the amounts actually put into production, you may report the cost of purchases or transfers. However, if consumption differs significantly from the amounts purchased or transferred, these amounts should be adjusted for changes in the materials and supplies inventories by adding the beginning inventory to the amount purchased or transferred and subtracting ending inventory.

- 3. Contract Work Include as materials consumed those you purchased for use by others making products for you under contract. Amounts paid to the companies doing the contract work should be reported in item 10, line e, and should include freight in and out. On the other hand, materials owned by others but used at this establishment in making products for others under contract or on commission should be excluded.
- 4. Resales Cost for products bought and sold or transferred from other establishments of your company and sold without further manufacture, processing, or assembly should be reported in item 10, line b, not in item 17 below. The value of these products shipped by this establishment should be reported in item 18B under Census product code 99989 00 6, "Resales."

| Line No.   | Materials, parts, and supplies   | Census<br>material<br>code |        | Consumption of purchased materials and of materials received from other establishments of your company  Cost, including delivery cost (freight-in)  (E) |        |               |  |  |  |  |
|--|--|----------------------------|--------|---|--------|---------------|--|--|--|--|
| Li   | (A)  | 571                        | (B)    | 574 Millions  | Thou-  | <br>  Dollars |  |  |  |  |
| 1  | Lens blanks, optical and ophthalmic  | 322                        | 2941 6 | \$  |        | <br> <br>     |  |  |  |  |
| 2  | Lenses and prisms for optical instruments and sighting and fire-control equipment  | 382710 2                   |        |   |        |               |  |  |  |  |
| 3  | Plastics resins consumed in the form of granules, pellets, powders, liquids, etc., but excluding sheets, rods, tubes, and shapes | 282                        | 2104 9 |   |        |               |  |  |  |  |
| 4  | Plastics products consumed in the form of sheets, rods, tubes, and other shapes  | 308                        | 3007 4 |   |        |               |  |  |  |  |
| 5  | Paperboard containers, boxes, and corrugated paperboard  | 265001 8                   |        |   | i      |               |  |  |  |  |
| 6  | Cost of all other materials and components, parts, containers and supplies consumed  | 970099 8                   |        |   | <br>   |               |  |  |  |  |
|  |  |                            |        |   |        | <br>          |  |  |  |  |
| 7  | TOTAL Sum of lines 1-6 should equal item 10, line a  |                            |        | \$  | <br>   |               |  |  |  |  |
| It   | em 18A. TYPE OF MANUFACTURING ACTIVITY DURING 1997   | Key                        | Ma     | ark (X) appropriate box   |        |               |  |  |  |  |
| Is the primary activity of this establishment the <b>grinding of lenses to prescription</b> , <b>except one-hour labs?</b> If yes, report value on line 11; Code 59950 01 4 (report one-hour labs on line 12; code 95995 00 7) |  |                            |        | es  | 8524 🗆 |               |  |  |  |  |
|  | CONTINUE WITH ITEM 18B ON PAGE 6   |                            |        |   |        |               |  |  |  |  |

Form MC-3802 Page 6

## Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1997

## INSTRUCTIONS

1. General – The manufactured products and services listed below are generally made in your industry. If you make products that are not listed, describe and report them in the "All other products made in this establishment" section at the end of item 18B. PLEASE DO NOT COMBINE PRODUCT LINES.

If quantities are requested, please use the unit of measure specified.

If the information as requested cannot be taken directly from your book records, REASONABLE ESTIMATES ARE ACCEPTABLE.

2. Valuation of Products – Report the value of the products shipped and services performed at the net selling value, f.o.b. plant to the customer; i.e., after discounts and allowances, and exclusive of freight charges and excise taxes.

If you transfer products to other establishments within your company, you should assign the full economic value to the transferred products; i.e., include all direct costs of production and a reasonable proportion of all other costs and profits.

- 3. Contract Work Report PRODUCTS MADE BY OTHERS FOR YOU FROM YOUR MATERIALS on the specific lines as if they were made in this establishment. On the other hand, do not report on the specific product lines PRODUCTS THAT YOU MADE FROM MATERIALS OWNED BY OTHERS. Report only the amount that you received for "commission or contract receipts" under Census product code 93000 00 8.
- 4. Resales Do not report on the specific product lines those PRODUCTS BOUGHT AND SOLD OR TRANSFERRED FROM OTHER ESTABLISHMENTS OF YOUR COMPANY AND SOLD WITHOUT FURTHER MANUFACTURE. Report only a value under Census product code 99989 00 6, "Resales."
- 5. Detailed Data Reported Elsewhere Items denoted by an asterisk (\*) require totals for groups of products covered in the more frequent Current Industrial Reports (CIR). If you report on the CIR forms, the sum of the detailed CIR products should equal the total reported on this census form.

**NOTE:** Only CIR totals are requested; do not duplicate detail reported on the CIR.

|      | Products and services   |  |   |   | Census     | Products shipped and other receipts |                   |         |  |
|------|---|--|---|---|------------|-------------------------------------|-------------------|---------|--|
| No.  | *Item corresponds to products reported on<br>Current Industrial Reports |  |   |   |            | Value, f.o.b. plant <b>(E)</b>      |                   |         |  |
| Line |   |  | 581 (B)   | 584   | Thou-      | <br>                                |                   |         |  |
|      | Ophthalmic  | FRONTS,  |   | (A)   | (B)        | Millions                            | Sanus             | Dollars |  |
| 1    | Goods   | FINISHED<br>(With or                                 | Plastics fron   | ts  | 38511 15 0 | \$                                  | !<br><del> </del> |         |  |
| 2    | 2   | without<br>decoration),<br>AND<br>TEMPLES<br>(38511) | Other fronts  |   | 38511 17 6 |                                     | i<br>I            |         |  |
| 3    | <u>.</u>  |  | Temples   | Plastics  | 38511 18 4 |                                     | [<br>[            |         |  |
| 4    |   |  |   | Other   | 38511 19 2 |                                     | !<br>[            |         |  |
| 5    | <u>.</u>  | OPHTHALMIC<br>FOCUS<br>LENSES                        | Glass<br>(38514)  | Single vision lenses (ground and polished and moulded blanks)                             | 38514 31 1 |                                     | <br>              |         |  |
| 6    | <u>,</u>  |  |   | Multifocal lenses   | 38514 45 1 |                                     | 1<br>1<br>1       |         |  |
| 7    | _   |  | Plastics <b>(38515)</b>   | Single vision lenses  | 38515 25 0 |                                     | 1<br>[<br>        |         |  |
| ε    | 3   |  | _   | Multifocal lenses   | 38515 27 6 |                                     | <br> <br>         |         |  |
| ç    | <u>,                                    </u>                            |  | Contact<br>Lenses<br>(38516)  | Conventional (hard)   | 38516 12 6 |                                     | [<br>[            | 1       |  |
| 10   | <u>)</u>  |  |   | Soft  | 38516 13 4 |                                     | <br> <br>         |         |  |
| 11   |   |  | Optical labor<br>one-hour lab   | ratories grinding of lenses to prescription (except ss; report one-hour labs on line 12.) | 59950 01 4 |                                     | <br> <br>         |         |  |
| 12   |   |  | One-hour ler  | ns grinding labs  | 95995 00 7 |                                     | [<br>[            | <br>    |  |
| 13   | 3   | ALL OTHER<br>OPHTHALMIC<br>GOODS                     | plates, and r   | Š   | 38517 02 5 |                                     | <br> <br>         | <br>    |  |
| 14   |   | (38517)  | Readymade<br>magnifying   | sun or glare glasses, sungoggles, and<br>or reading glasses                               | 38517 05 8 |                                     | <br>              |         |  |
| 15   | 5_  |  |   | mes and mountings (except fronts and temples)   | 38517 06 6 |                                     | <br>              |         |  |
| 16   |   |  | Other<br>Ophthalmic<br>Goods  | Made of plastics  | 38517 09 0 |                                     | <br>              |         |  |
| 17   | ,   |  |   | Made of other materials   | 38517 19 9 |                                     | !<br>             |         |  |
| 18   | Intraocular I   | enses  | 38421 12 9  |   | <br>       |                                     |                   |         |  |
| 19   |   | ustrial safety o<br>ling helmets, r                  | 38423 00 0  |   | 1<br> <br> |                                     |                   |         |  |
| 20   | Laboratory a<br>and 4541–45   | nd scientific a<br>48 on CIR Forr                    | 38210 10 0  |   | <br>       |                                     |                   |         |  |
| 21   |   |  | s (corresponds to the sum of item codes ed Instruments and Related Products, for 1997)* | 38274 10 6  |            | <br>                                |                   |         |  |
| 22   | equipment)  | l instruments a<br>corresponds to<br>truments and f  | 38274 20 5  |   | <br>       |                                     |                   |         |  |

| _ |  |                       |  |                                     |                 |                |           |  |  |  |  |  |
|---|--|-----------------------|--|-------------------------------------|-----------------|----------------|-----------|--|--|--|--|--|
|   | If not shown, please enter your 11-digit Census File Number from the address label on page 1 |                       |  |                                     |                 |                |           |  |  |  |  |  |
|   | Item 18B. PRODUCTS AND SERVICES OF THIS ESTABLISHMENT DURING 1997 – Continued                |                       |  |                                     |                 |                |           |  |  |  |  |  |
|   |  |                       | Census   | Products shipped and other receipts |                 |                |           |  |  |  |  |  |
|   | e No.  |                       | product<br>code  | Value, f.o.b. plant <b>(E)</b>      |                 |                |           |  |  |  |  |  |
|   | Line   |                       | (A)  | (B)                                 | 584<br>Millions | Thou-<br>sands |           |  |  |  |  |  |
|   | 23   | codes 8001-819        | cientific instruments, except optical (corresponds to the sum of item<br>6 on CIR Form MA38B, Selected Instruments and Related Products,<br><b>60)</b> | 38260 00 6                          | \$              | <br>           |           |  |  |  |  |  |
|   |  | ALL OTHER<br>PRODUCTS | Describe and report separately each product with a sales value of \$50,000 or more which cannot be assigned to one of the lines                        |                                     |                 | <br>           | <br> <br> |  |  |  |  |  |

|    |   | (A)   | (B)        | Thou-<br>  sands      |      |
|----|---|---|------------|-----------------------|------|
| 23 | Analytical and s<br>codes 8001–819<br>for 1997)* (382       | cientific instruments, except optical (corresponds to the sum of item<br>6 on CIR Form MA38B, Selected Instruments and Related Products,<br><b>60)</b>  | 38260 00 6 | \$<br> <br> <br> <br> |      |
|    | ALL OTHER<br>PRODUCTS<br>MADE IN THIS<br>ESTABLISH-<br>MENT | Describe and report separately each product with a sales value of \$50,000 or more which cannot be assigned to one of the lines above. Specify unit of measure for quantity. For all remaining products, write "Other" and report a single total value. |            | <br>                  |      |
| 24 |   |   | 18         | <br> <br>             |      |
| 25 |   |   | 26         | <br>                  |      |
| 26 |   |   | 34         |                       |      |
| 27 |   |   | 42         | <br> <br>             |      |
| 28 |   |   | 59         | <br> <br>             |      |
| 29 |   |   | 67         |                       |      |
| 30 |   |   | 75         | <br> <br>             |      |
| 31 |   |   | 83         | <br>                  |      |
| 32 |   |   | 91         | <br>                  |      |
| 33 | CONTRACT<br>WORK  | Receipts for work done for others on their own materials  | 93000 00 8 | <br> <br> <br>        |      |
|    |   | ,   |            |                       |      |
|    |   |   |            | <br>                  |      |
|    |   |   |            | <br> <br>             |      |
|    |   |   |            | <br> <br>             | <br> |
|    | MISCELLA-<br>NEOUS  | Sales of scrap and refuse   | 99980 13 8 | <br> <br>             |      |
| 35 | RECEIPTS  | Receipts for research and developmental work  | 99980 41 9 | <br>                  |      |
| 36 |   | Other miscellaneous receipts (including receipts for repair work, etc.)   | 99980 98 9 | <br>                  |      |
| 37 | RESALES   | Sales of products bought and sold without further manufacture, processing, or assembly in this establishment. The cost of such items should be reported in item 10, line b.   | 99989 00 6 | <br> <br> <br>        |      |
| 38 | TOTAL va  | alue of shipments and other receipts<br>es 1-37 column (E)  | 77000 00 8 | \$<br> <br> <br>      |      |

Items 19–21 - Not applicable to this report

**REMARKS** – Please use this space for any explanations that may be essential in understanding your reported data.

| Item 22. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions. |             |       |           |        |  |     |        |      |      |  |
|---|-------------|-------|-----------|--------|--|-----|--------|------|------|--|
| Name of person t  |             |       | Area code | Number | Extension  |     |        |      |      |  |
| 667 1   |             | . 3,  |           | T€     | elephone   | 2   |        |      |      |  |
| Name of company A   |             |       |           |        | Address (Number and street, city, State, ZIP Code) |     |        |      |      |  |
|   |             |       |           |        |  |     |        |      |      |  |
|   | FROM: Month | Day   | Year      | -      | TO: Mo   | nth | Day    |      | Year |  |
| Period covered  | 666 1       | !<br> | !<br>[    |        | 2  |     | i<br>I |      |      |  |
| Signature of authorized person T  |             |       | le        |        | •  |     |        | Date |      |  |
|   |             |       |           |        |  |     |        |      |      |  |