



**Mail** your completed form to:  
**U.S. CENSUS BUREAU**  
1201 East 10th Street  
Jeffersonville, IN 47132-0001

**Need help or have questions**  
**about filling out this form?**

**Visit** our Web site at  
**www.census.gov/econhelp**

- OR -

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

**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.

**1 OWNERSHIP OR CONTROL**

**A.** Does another domestic company own more than 50 percent of the voting stock of your company **or** have the power to control the management and policies of your company?

Yes - Enter the following information for the owning or controlling company **7**

Name of owning or controlling company	Employer Identification Number (EIN) of owning or controlling company (9 digits) →		-	
Home office address (Number and street)				
City, town, village, etc.	State	ZIP Code		

No - Go to **2**

**B.** What percent of voting stock was held by owning **or** controlling company? (Mark "X" only **ONE** box.)

Less than 50%       50%       More than 50%

**2 NUMBER OF LOCATIONS OF OPERATION**

How many locations report employment and payroll under the EIN shown in the mailing address?

One location - Go to **3**       More than one location - Go to **4**

**3 PHYSICAL LOCATION**

Is this establishment's physical location the same as shown in the mailing address?  
(P.O. box and rural route addresses are not physical locations.)

Yes - Go to **5**

No - Enter physical location and go to **5**

Number and street				
City	State	ZIP Code		

**4 LOCATIONS OF OPERATION**

2005
Number

How many locations were in operation at the end of 2005 under the EIN shown in the mailing address? . . . . .

*(If this EIN had more than 3 physical locations at the end of 2005, copy this page and provide the requested data for all of your locations.)*

- Provide the physical location address and other information requested for each location.
- Provide the headquarter's location first, followed by all other locations.
- For employees that worked at more than one location, report the employment and payroll data for the employees at the ONE location where they spent most of their working time.

<b>1</b>	Name		2005 Estimates are acceptable Number		
	Number and street (P.O box and rural route addresses are not physical locations.)				
	City, town, village, etc.		First quarter payroll (Jan-Mar, 2005)		
	State   ZIP Code		Annual payroll. . . . .		
			\$Bil.	Mil.	Thou.
	Describe kind of business at this location				

<b>2</b>	Name		2005 Estimates are acceptable Number		
	Number and street (P.O box and rural route addresses are not physical locations.)				
	City, town, village, etc.		First quarter payroll (Jan-Mar, 2005)		
	State   ZIP Code		Annual payroll. . . . .		
			\$Bil.	Mil.	Thou.
	Describe kind of business at this location				

INFORMATION COPY  
DO NOT USE TO REPORT

<b>3</b>	Name		2005 Estimates are acceptable Number		
	Number and street (P.O box and rural route addresses are not physical locations.)				
	City, town, village, etc.		First quarter payroll (Jan-Mar, 2005)		
	State   ZIP Code		Annual payroll. . . . .		
			\$Bil.	Mil.	Thou.
	Describe kind of business at this location				

**5 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.**

Name of person to contact regarding this report		Telephone	Area code	Number		Extension
					-	



99007023