

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

OS-81205 (02/08/2007)

2007 ECONOMIC CENSUS

Other Personal Services

OMB No. 0607-0934: Approval Expires 12/31/2008

DUE DATE FEBRUARY 12, 2008

FORM

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.

OS-81205

INFORMATION COPY DO NOT USE TO REPORT

mailing address.	(Please correct any errors in	this mailing address.)
that receive this questionn law, YOUR CENSUS REF	QUIRED BY LAW. Title 13, United States Code, requaire to answer the questions and return the report to PORT IS CONFIDENTIAL. It may be seen only by petion and may be used only for statistical purposes. Full process.	the U.S. Census Bureau. By the same ersons sworn to uphold the confidentiality
Use blue or black ballpoint pe Do not use pencil or felt-tip per	·	
• Place an "X" inside the box.	in. • Do not put stasties through 6 of 7.	■ 0 1 2 3 4 5 6 7 8 9
	form is an establishment. An establishment is genered or where services or industrial operations are perfe	
	ON NUMBER ion Number (EIN) shown in the mailing address the sa 2007 Internal Revenue Service Form 941, Employer's	
0021	0022 No - Enter current EIN (9 digits)	0025
	physical location the same as shown in the mailing active addresses are not physical locations.)	ddress?
0031 Yes - Go to line		
	0035 Number and street	
0032 No - Enter —— physical	—	E
location	0036 City, town, village, etc.	37 State 0038 ZIP Code
B. Is this establishment p (Mark "X" only ONE bo	hysically located inside the legal boundaries of the cites.	y, town, village, etc.?
0041 Yes 0042	□ No 0043 □ No legal boundaries 00	Do not know

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

☐ Do not know

0024

0048 Other

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(Mark "X" only ONE box.) 0011	nother operator - Give date at right address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	Temporarily or so	easonall	y inact 0018 0061 EIN		y Yea	ar
(Mark "X" only ONE box.) 0011	Give date at right nother operator - Give date at right address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	Temporarily or so	easonall	y inact 0018 0061 EIN	ive //onth Day (9 digits)	y Yea	ar
In operation Ceased operation - Sold or leased to an AND enter name an and Employer Ident O060 Name of new ov O062 Mailing address O063 City, town, village Other - Specify —	Give date at right nother operator - Give date at right and address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	ht ator	0	0018 0061 EIN	Nonth Day	y Yea	ar -
Ceased operation - Sold or leased to an AND enter name an and Employer Ident O060 Name of new ov O062 Mailing address O063 City, town, village Other - Specify —	Give date at right nother operator - Give date at right and address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	ht ator	0	0018 0061 EIN	Nonth Day	y Yea	ar .
Ceased operation - Sold or leased to al AND enter name an and Employer Ident O060 Name of new ov O062 Mailing address O063 City, town, village Other - Specify —	Give date at right nother operator - Give date at right and address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	ht ator	0	0018 0061 EIN	Nonth Day	y Yea	ar
Sold or leased to an AND enter name an and Employer Identification of Name of	nother operator - Give date at right address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	htator	0	0018 0061 EIN	(9 digits)	y Yea	ar
AND enter name an and Employer Iden: 0060 Name of new ov 0062 Mailing address 0063 City, town, village 0016 Other - Specify —	nd address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	ator		061 EIN			
AND enter name an and Employer Identification of Name	nd address of new owner or operatification Number (EIN) below when or operator (Number and street, P.O. Box, etc.) ge, etc.	ator					
and Employer Identification of Name of	wner or operator (Number and street, P.O. Box, etc.) ge, etc.					1 1 1	
0060 Name of new over the control of	(Number and street, P.O. Box, etc.) ge, etc.	0064				1 1 1	
0062 Mailing address 0063 City, town, villag	(Number and street, P.O. Box, etc.) ge, etc.	0064				1 1 1	
0063 City, town, villag	ge, etc. 0815	0064	State 0		-	1 1 1	
Other - Specify —	ge, etc. 0815	0064	State 0	065 7IP			
Other - Specify —	ge, etc. 0815	0064	State 0	065 7IP			
0016 Other - Specify —	0815	0064	State 0	065 7IP			
0016 Other - Specify —	0815	0064	State 0	065 7IP			
					Code		
			1				
MONTHS IN OPERATION							
MONTHO IN OTENATION						Mark "X"	200
						if None	lu m
Number of months in operat	ion during 2007 <i>(If none, mark "X</i>	" and go to 🔞)			000	, \Box	
Number of months in operat	non during 2007 (if hone, mark)			_			
Dollar	figures should be rounded to		Mark "X" if None		20		
HOW IO thous	ands of dollars.		II None	\$ Bil.	Mil.	Thou.	D
REPORT If a fig	ure is \$1,025,628.79 :	Report			1	0 2 6	
FIGURES		_					
lf a va	ue is "0" (or less than \$500.00):	Report ———	\bowtie				
SALES, SHIPMENTS, RECEIF	TS. OR REVENUE						
o, 1223, 31111 11121113, 1123211			Mark "X"	·	20	07	
			if None	\$ Bil.	Mil.	Thou.	D
Operating receipts							
Operating receipts		0100					<u> </u>

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	ot shown, please nber (CFN) from t		er your 11-digit Census File nailing address.						
•									
	establishment is a	selt	-park service location at which no employees are assigned,	, mark "X	on all line" Mark "X		2007		
	if None Number								
	A. Number of em	ploy	ees for pay period including March 12		0320				
				Mark "X"		200			
	B. Payroll before	dedi	ctions (Exclude employer's cost for fringe benefits.)	if None	\$ Bil. N	∕IiI.	Thou. Dol.		
	1. Annual pay	roll .		o 🗆					
	2. First quarte	er pay	roll (January-March, 2007)			ı			
8-	18 Not Applicab	le.							
19	KIND OF BUSINES Which ONE of the (Mark "X" only ON	follo	owing best describes this establishment's principal kind of	business	or activity	in 200	7?		
	Automobile pa	rkin	g						
0700	812 930 00 1		Parking lot						
	812 930 00 2		Parking structure						
	812 930 00 3		Parking structure and lot at same location						
	812 930 00 4		Parking garage, underground						
	812 930 00 5		Valet parking service						
	Photography s	ervi	ces						
	812 921 00 1		Photofinishing laboratory, excluding one-hour						
	812 922 00 1		One-hour photofinishing service						
	541 921 00 1		Photography studio, portrait						
	541 922 00 1		Commercial photography services						
	Other persona	ser	vices						
	812 990 10 1		Bail bonding						
	812 990 90 5		Personal fitness/training						
	812 990 20 1		Dating service						
	812 990 90 6		Party and event planning						
			CONTINUE WITH © ON PAGE 4						

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orm US-812U5 (02/0								Page 4
		R ACTIVITY - Continued						
Other persona	al ser	vices - Continued						
812 990 90 2	Ш	Escort service, social						
812 990 30 1		Pay telephone operators						
561 730 00 1		Lawn and garden services						
812 910 00 5		Pet care service, including boarding, anin veterinary services)	nal shelters, ke	nnels, t	raining, p	et sitting,	etc. (E	xclude
812 910 00 6		Pet grooming						
541 940 00 1		Veterinary services						
624 410 00 1		Child day care services, including those v	vith preschool					
541 213 00 1		Income tax return preparation services, willing services	vithout also pro	viding	accountin	g, bookke	eping,	or
541 990 90 1 Consumer credit counseling services 812 990 90 4 Consumer buying service (arranges price discounts for members)								
812 990 90 4		Consumer buying service (arranges price	discounts for	membe	rs)			
811 430 00 1		Shoe and leather goods repair						
812 210 10 1		Funeral home						
812 220 00 7		Cemetery						
777 812 02 2		Other personal services - Specify						
0701								
Other kind of	busir	ness or activity						
773 000 00 1		Other kind of business or activity - Specia	fy 🗾					
0701								
20 and 21 Not App	licabl							
and an Not App	nicabi	е.				2007		
ноw то						es are acce		
REPORT PERCENTS				\$ Bil.	Mil.	ollars OR p Thou.	Dol.	s. Percent
PERCENTS		If figure is 38.76 % of total sales:	ole percents		1 1	1 1		3 9
		PMENTS, RECEIPTS, OR REVENUE			, ,			
(Report receipts REPORT DOLLAF	by sou R FIGU	ırce either as a dollar figure or as a whole IRES on page 2 and HOW TO REPORT PEF	percent of tota RCENTS above.	al receip Do no	ots (report ot combine	ed in 5). e data for	See I two o	10W TO r more

receipts lines.)

Line 1a - Report receipts from providing services to improve the appearance and hygiene of pets, such as cutting and shaving hair, trimming nails, and cleaning hair, ears, and teeth. Exclude veterinary services.

Line 3 - Report receipts from providing parking for automobiles, motorcycles, and bicycles. Include the provision of space only and the provision of space bundled with an automobile parking service (valet service). Include the collection of fees for parking on streets, roads, and public places. Exclude rental services of lock-up garages or garage premises for vehicles by the month or year.

CONTINUE WITH ON PAGE 5

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

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Line 4 - Report receipts from providing photofinishing services. Include the developing of negatives, printing, re-sizing, and other effects. These services may be provided on-site or off-site. The services may be provided to film or digital photos.

Line 9 - Report receipts from operating coin-operated machines, such as photo-taking machines, binoculars, telescopes, and lockers. Include machines in which paper money and credit cards are accepted as payment. Exclude receipts from coin-operated entertainment, gambling, laundry, and vending machines.

		ĭ								
		Report Sus Report Sus Sus		2007 mates are acceptable.						
	Description of cales chipments receipts or revenue	sus								
	Description of sales, snipments, receipts, or revenue	use	\$ Ril		Thou.	Dol.	Percent			
0723		0720		IVIII.	i iiou.	DO1.	0722			
1.	Pet care services									
	a Pat are aming convices	00404	1	1 1	1 1		1 1			
	a. Fet grooming services	32421								
	b. Animal training services	32422	1	1 1	1 1		1 1			
					i					
	c. Animal boarding services	32423								
	d. Pet funeral services	32424								
	ar foctunital solvious for the foctor of the	02424								
	e. Other pet care services - Specify									
	, and the second									
		32425								
	f. Sum lines 1a through 1e	32420								
2	Decale of not and animal augustica	20000		1 1	1 1		1 1			
2.	Resale of pet and animal supplies	39699								
3.	Parking services									
				1 1	l l					
	a. Off-street parking services	32431								
	b. On-street parking services	32432								
	c. Valet parking services	32433								
	d Cum lines 2s through 2s	00400		1 1	1 1		1 1			
	d. Sum lines sa through Sc	32430								
4.	Photofinishing services	32440		1 1	1 1		1 1			
_										
5.	Dating services	32450								
6.	Social event planning and coordination services	32460								
-										
7.	Psychic and astrology services	32470								
8.	Charachining agains		1	1 1	1 1		' '			
0.	Since stiffling services	32480								
9.	Operation of coin-operated machines	32490		1 1	1 1					
10.	Bail bond services	32500								
11	Resale of other merchandise	39604								
11.	nesale of other merchandise	33034								

CONTINUE WITH @ ON PAGE 6

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01111	1 00-0 1200 (02/08/2007)						i age o		
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued								
	Description of sales, shipments, receipts, or revenue	Cen- sus use				7 acceptabl OR percen			
			\$ Bil.	Mil.	Tho	u. Dol			
0723		0720	0721				0722		
12.	All other operating receipts - Specify if more than 10 percent of total receipts								
		39774			'				
13.	TOTAL OPERATING RECEIPTS - Sum of lines should equal 6 if reporting in dollars	39850					1 0 0		
23-	Not Applicable.	<u> </u>							
26	SPECIAL INQUIRIES								
•									
	FRANCHISE Was this establishment operating under a trademark authorized by a franchisor in 2007? (Mark "X" only ONE box.)								
	Yes - franchisee owned establishment								
	O238 Yes - franchisor owned establishment								
	0239 No								
27-	Not Applicable.								
REM	IARKS (Please use this space for any explanations that may be essential in	n unde	erstand	ing your	reporte	d data.)			
30	CERTIFICATION - This report is substantially accurate and was prepared	n acco	ordance	e with the	e instruc	tions.			
ls the	e time period covered by this report a calendar year?	nth	Year			Month	Year		
	☐ Yes ☐ No - Enter time period covered → FROM				то				
N	lame of person to contact regarding this report Title								
	Area code Number Extension			Area code		Numbe	er		
	Telephone -	Fax				-			
lr	nternet e-mail address		Date	·	Month	Day	Year		
		(omplet	ed					
	Thank you for completing your 2007 FCO	ПОМ	IC C	FNSII	Sfor	n	,		

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Thank you for completing your 2007 ECONOMIC CENSUS form.

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