

**16** DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES

**General** - The materials, parts, and supplies listed below are those commonly consumed in the manufacture, processing, or assembly of the products listed in **2**. 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 that are not listed, describe and report them in the "Cost of all other materials . . ." 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 009700 99 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Report materials, parts, and supplies purchased, transferred from other plants of your company, or withdrawn from inventory.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.

**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 amount 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.

**Contract Work** - Include all 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 **15**, line A5, 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.

**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 **15**, line A2, not in **16**. The value of these products shipped by this establishment should be reported in **2** under Census product code 000999 8900 6, "Resales."

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Line No.	Materials, parts, and supplies	Census material code	Consumption of purchased materials and of materials received from other establishments of your company		
			Cost, including delivery cost (freight-in)		
			\$ Bil.	Mil.	Thou.
0634		0630	0631		
<b>1</b>	Lens blanks, optical and ophthalmic . . . . .	001900 37 2			
<b>2</b>	Lenses and prisms for optical instruments and sighting and fire-control equipment . . . . .	333314 03 7			
<b>3</b>	Plastics resins consumed in the form of granules, pellets, powders, liquids, etc., but excluding sheets, rods, tubes, and other shapes . . . . .	325211 05 0			
<b>4</b>	Plastics products consumed in the form of sheets, rods, tubes, film, and other shapes . . . . .	326100 13 8			
<b>5</b>	Paperboard containers, boxes, and corrugated paperboard . . . . .	322210 01 4			
<b>6</b>	Cost of all other materials and components, parts, containers, and supplies consumed ( <i>Specify the principal materials, etc., included in this value.</i> ) ↘	009700 99 8			
<b>7</b>	<b>TOTAL</b> ( <i>Should equal total reported in 15, line A1</i> ) . . . . .	771000 00 7			

**17** Not Applicable.

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

**18** TYPE OF OPERATION

Is the primarily business of this establishment retailing prescription eyeglasses in combination with the grinding of the eyeglass lenses to order on the premises?

0620 765  Yes  
 766  No

**19-21** Not Applicable.

**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

**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 22. 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.

**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.

**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 code 000930 0000 8.

**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 code 000999 8900 6, "Resales."

Line No.	Products and services	Census product code	Products shipped and other receipts		
			Value, f.o.b. plant		
			\$ Bil.	Mil.	Thou.
0734		0730	0731		
<b>1</b>	Ophthalmic goods				
	Ophthalmic finished fronts				
	Plastics finished fronts . . . . .	339115 1101 3			
<b>2</b>	Other finished fronts . . . . .	339115 1106 2			
<b>3</b>	Ophthalmic temples . . . . .	339115 1121 1			
	Ophthalmic focal lenses, including semifinished lenses, ground and polished lenses, and finished lenses, excluding molded lens blanks				
	Eyeglass lenses, excluding prescription ground eyeglass lenses				
	Glass eyeglass lenses				
<b>4</b>	Single-vision glass eyeglass lenses . . . . .	339115 3101 1			
<b>5</b>	Multifocal glass eyeglass lenses . . . . .	339115 3106 0			
	Plastics eyeglass lenses				
<b>6</b>	Single-vision plastics eyeglass lenses . . . . .	339115 5101 9			
<b>7</b>	Multifocal plastics eyeglass lenses . . . . .	339115 5206 6			
<b>8</b>	Prescription ground eyeglass lenses (Report receipts from retailing prescription eyeglasses in combination with the grinding of the eyeglass lenses to order on the premises on lines 18 through 23.) . .	339115 B102 0			

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

Line No.	Products and services	Census product code	Products shipped and other receipts			
			Value, f.o.b. plant			
			\$ Bil.	Mil.	Thou.	
	0734	0730	0731			
	Ophthalmic goods - Continued					
	Ophthalmic focal lenses, including semifinished lenses, ground and polished lenses, and finished lenses, excluding molded lens blanks - Continued					
	Contact lenses					
9	Conventional (hard) contact lenses . . . . .	339115 7101 7				
10	Soft contact lenses . . . . .	339115 7206 4				
11	Intraocular lenses . . . . .	339113 1231 3				
	Molded lens blanks					
	Glass molded lens blanks					
12	Glass molded lens blanks that were made from purchased glass .	327215 3100 5				
13	Glass molded lens blanks that were not made from purchased glass . . . . .	327212 7100 8				
14	Plastics molded lens blanks, including plastics buttons . . . . .	326199 6185 0				
	All other ophthalmic goods					
15	Industrial eye protectors, goggles, mountings, and welding circles and plates . . . . .	339115 B104 6				
16	Ready-made antiglare glasses, reading glasses, sunglasses, and sungoggles . . . . .	339115 B106 1				
	Other ophthalmic goods ( <i>Specify kind of ophthalmic goods.</i> ) ↴					
17		339115 B117 8				
	All other products made in this establishment - <i>Specify and report each product with sales value of \$50,000 or more that cannot be assigned to one of the "listed products and services". For all remaining products, write "Other" and report a single total value.</i>					
18		18				
19		26				
20		34				
21		42				
22		59				
23		67				
	Contract work - Receipts for work done for others on their materials ( <i>Specify products worked on and kind of work.</i> ) ↴					
24		000930 0000 8				

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

Line No.	Products and services	Census product code	Products shipped and other receipts			
			Value, f.o.b. plant			
			\$ Bil.	Mil.	Thou.	
	0734	0730	0731			
<b>25</b>	Miscellaneous receipts (including receipts for repair work, scrap, refuse, etc.)	000999 8000 5				
<b>26</b>	Resales - Sales of products bought and sold without further manufacture, processing, or assembly (The cost of such items should be reported in 15, line A2.)	000999 8900 6				
<b>27</b>	<b>TOTAL</b> (Should equal 4, line A)	770000 0000 8				

**23-27** Not Applicable.



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**28** ESTABLISHMENT ACTIVITIES

**A.** Indicate activities that were performed by this establishment or were performed for this establishment by another company during 2002.  
(Mark "X" ALL that apply.)

This activity was performed -			
By this establishment	By another establishment of this company	By another company	Not at all
0921 <input type="checkbox"/>	8071 <input type="checkbox"/>	0941 <input type="checkbox"/>	0961 <input type="checkbox"/>
<b>1.</b> Product design/engineering . . . . .			
<b>2.</b> Order fulfillment			
0923 <input type="checkbox"/>	8072 <input type="checkbox"/>	0943 <input type="checkbox"/>	0963 <input type="checkbox"/>
<b>a.</b> Bundling or kitting (combining multiple items into a prepackaged product) . . . . .			
0924 <input type="checkbox"/>	8073 <input type="checkbox"/>	0944 <input type="checkbox"/>	0964 <input type="checkbox"/>
<b>b.</b> Pick and pack (taking goods from inventory and packaging them to fill orders). . . . .			
0925 <input type="checkbox"/>	8074 <input type="checkbox"/>	0945 <input type="checkbox"/>	0965 <input type="checkbox"/>
<b>c.</b> Warehousing of finished products . . . . .			
0926 <input type="checkbox"/>	8075 <input type="checkbox"/>	0946 <input type="checkbox"/>	0966 <input type="checkbox"/>
<b>d.</b> Breaking bulk (reducing large shipments into smaller portions for customers) . . . . .			
0927 <input type="checkbox"/>	8076 <input type="checkbox"/>	0947 <input type="checkbox"/>	0967 <input type="checkbox"/>
<b>e.</b> Local delivery (within a city, town, or other local area, including adjoining towns and suburban areas) . . . . .			
0928 <input type="checkbox"/>	8077 <input type="checkbox"/>	0948 <input type="checkbox"/>	0968 <input type="checkbox"/>
<b>f.</b> Long distance delivery (beyond local areas and commercial zones) . . . . .			
0932 <input type="checkbox"/>	8078 <input type="checkbox"/>	0952 <input type="checkbox"/>	0972 <input type="checkbox"/>
<b>g.</b> Processing of returned merchandise . . . . .			

**B.** During 2002 did this establishment:

- |  |                                   |                                  |
|--|-----------------------------------|----------------------------------|
| <b>1.</b> Manage inventory owned by this establishment AND held at this location? . . . . .  | 0936 <input type="checkbox"/> Yes | 0937 <input type="checkbox"/> No |
| <b>2.</b> Manage inventory owned by this establishment BUT held at a customer's location? . . . . .  | 0956 <input type="checkbox"/> Yes | 0957 <input type="checkbox"/> No |
| <b>3.</b> Manage inventory owned by another company BUT held at this location? . . . . .   | 0976 <input type="checkbox"/> Yes | 0977 <input type="checkbox"/> No |
| <b>4.</b> Manage inventory owned by another company AND held somewhere other than at this location? . . . . .  | 0994 <input type="checkbox"/> Yes | 0995 <input type="checkbox"/> No |
| <b>5.</b> Contract with another firm for any of your production using materials owned by this location? . . . . .  | 8041 <input type="checkbox"/> Yes | 8042 <input type="checkbox"/> No |
| <b>6.</b> Send any partially completed products to a foreign facility for processing that were then returned to this establishment for completion? . . . . . | 8044 <input type="checkbox"/> Yes | 8045 <input type="checkbox"/> No |
| <b>7.</b> Manufacture products for a government to their specifications? . . . . .   | 8047 <input type="checkbox"/> Yes | 8048 <input type="checkbox"/> No |
| <b>8.</b> Manufacture products for another business to their specifications? . . . . .   | 8016 <input type="checkbox"/> Yes | 8017 <input type="checkbox"/> No |
| <b>9.</b> Manufacture products for a final retail customer to their specifications? . . . . .  | 8060 <input type="checkbox"/> Yes | 8062 <input type="checkbox"/> No |



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**29 OPERATIONAL STATUS**

Activity that best describes this establishment's status at the end of 2002  
(Mark "X" only ONE box.)

- 0011  In operation
- 0012  Under construction, development, or exploration
- 0013  Temporarily or seasonally inactive
- 0014  Ceased operation - Give date at right →
- 0015  Sold or leased to another operator - Give date at right AND enter new name and mailing address below ↴

0018	Month	Day	Year

0060 Name of new owner or operator	0061 Employer Identification Number		
	Enter EIN of new owner (9 digits) →	-	
0062 Mailing address (number and street, P.O. Box, etc.)			
0063 City, town, village, etc.	0064 State	0065 ZIP Code	
		-	

Remarks (Please use this space for any explanations that may be essential in understanding your reported data.)

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

Is the time period covered by this report a calendar year?

- 0078  Yes      0079  No - Enter time period covered →

FROM	Month	Year	TO	Month	Year
0070			0071		

0072 Name of person to contact regarding this report	0073 Title

Telephone	Area code	Number	Extension	Fax	Area code	Number
0074		-		0075		-

0076 Internet e-mail address	Date completed	Month	Day	Year
	0069			

**Thank you for completing your 2002 Economic Census form.**  
**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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