



2002 ECONOMIC CENSUS TRAVELER ACCOMMODATION

FORM
AF-72101

OMB No. 0607-0881: Approval Expires 06/30/2004

DUE DATE
FEBRUARY 12, 2003

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 our Web site at www.census.gov/econhelp

Call 1-800-233-6136, between 8:00 a.m. and 8:00 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.

AF-72101

**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.

- Use blue or black ink.
- Do not use pencil.
- Place an "X" inside the box.
- Please center numbers in their respective boxes. Examples:
- Do not put slashes through 0 or 7.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
-------------------------------------	---	---	---	---	---	---	---	---	---	---

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

1 MONTHS IN OPERATION

Number of months in operation during 2002 (If none, mark "X" and go to 29.) 0002

2002	
Number of months	

Mark "X" if None

2 EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2002 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021 Yes 0022 No - Enter current EIN (9 digits) → 0025

3 PHYSICAL LOCATION

A. 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.)

0031 Yes

0032 No - Enter physical location →

0035 Number and street		
0036 City, town, village, etc.	0037 State	0038 ZIP Code

B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?

0041 Yes 0042 No 0043 No legal boundaries 0044 Do not know

C. Type of municipality where this establishment is physically located

0046 City, village, or borough 0047 Town or township 0048 Other or do not know



72101017

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be **rounded to thousands** of dollars.

If a figure is **\$1,025,628.79**:

Report →

If a value is "0" (or less than \$500.00):

Report →

Mark "X" if None

2002			
\$ Bil.	Mil.	Thou.	Dol.
	1	026	

4 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

Sales of merchandise and other operating receipts (Exclude sales or other taxes collected.) 0100

2002			
\$ Bil.	Mil.	Thou.	Dol.

5 E-COMMERCE SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Did this establishment have any e-commerce sales, receipts, and/or revenue in 2002? (E-commerce includes sales, receipts, and/or revenue from any transaction completed over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system. Transactions are agreements between buyers and sellers to transfer ownership of, or rights to use, goods or services. Payment for these goods or services may or may not be made online. Please see the information sheet(s) for further clarification.)

0181 Yes - Go to line B

0182 No - Go to **6**

B. E-commerce sales, receipts, and/or revenue of this establishment (Include e-commerce sales, receipts, and/or revenue in **4**. Exclude sales taxes.) 0185

2002			
Estimates are acceptable			
\$ Bil.	Mil.	Thou.	Dol.

6 EMPLOYMENT AND PAYROLL

Include:

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in **2**.

Exclude:

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Temporary staffing obtained from a staffing service.

For further clarification, see information sheet(s).

Mark "X" if None

A. Number of employees for pay period including March 12 0320

2002	
Number	

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

Mark "X" if None

1. Annual payroll 0300

2. First quarter payroll (January-March, 2002). 0310

2002		
\$ Mil.	Thou.	Dol.



72101025

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

7 LEASED EMPLOYMENT AND PAYROLL

A. Did this establishment have any full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN?

Exclude:

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.
- Employees already reported in **6**.

For further clarification, see information sheet(s).

0241 Yes - Go to line B

0242 No - Go to **13**

Mark "X" if None	2002		
	Number		

B. Number of leased employees for pay period including March 12. 0370

C. Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.)

1. Annual payroll for leased employees 0350

2002		
\$ Mil.	Thou.	Dol.

2. First quarter payroll for leased employees (January-March, 2002) 0360

Mark "X" if None	2002		
	\$ Mil.	Thou.	Dol.

8-17 Not Applicable.

18 KIND OF BUSINESS

Principal kind of business in 2002
(Mark "X" only ONE box.)

- 0700 721 110 00 16 Hotel, motel, or motor hotel
- 721 191 00 18 Bed and breakfast inn
- 721 120 00 14 Casino hotel (gambling) **with** guestrooms for lodging
- 713 210 00 20 Casino (gambling) **without** guestrooms for lodging
- 721 110 00 24 Ski area or resort **with** guestrooms for lodging
- 713 920 00 21 Ski area or resort **without** guestrooms for lodging
- 721 310 00 14 Rooming and boarding house
- 721 199 00 10 Tourist court or cabin
- 721 310 00 22 Lodging house operated by membership organization
- 721 110 00 32 Hotel operated by membership organization
- 721 310 00 30 Fraternity or sorority boarding house
- 721 199 00 28 Hostel

CONTINUE WITH **18** ON PAGE 4

72101033

18 KIND OF BUSINESS - Continued

0700

- 531 110 10 33 Apartment building operator
- 813 990 40 18 Property owners' association
- 531 120 90 67 Hotel/motel real estate owner, owning land or building but not the lodging business
- 721 214 00 11 Sporting or recreation camp, including fishing camp, dude ranch, etc.
- 721 211 00 14 Trailer park, recreational vehicle park, or campground, except residential
- 813 410 40 44 Bar or restaurant operated by social or fraternal organization for members
- 722 410 00 11 Bar, tavern, pub, or other drinking place, selling alcoholic beverages for consumption on premises
- 722 110 00 14 Full-service restaurant, patrons order through waiter/waitress service and pay after eating
- 722 211 00 20 Limited-service restaurant, patrons pay before eating; including delivery-only locations
- 772 000 00 12 Other kind of business - *Specify* ↴

0701

19 CLASS OF CUSTOMER

Estimate the percentage of this establishment's total sales (reported in **4**) by class of customer.

2002	
Whole percent of sales and receipts	
	%
	%
1 0 0	%

- 1.** Household consumers and individuals 0261
- 2.** Businesses and government (billed to expense accounts) 0273
- 3. TOTAL** (Sum lines 1 and 2)

20-21 Not Applicable.

HOW TO REPORT PERCENTS



If figure is **38.76%** of total sales:

Report whole percents

2002				
Estimates are acceptable. Report dollars OR percents.				
\$ Bil.	Mil.	Thou.	Dol.	Percent
				3 9

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report sales for each merchandise line sold by this establishment, either as a dollar figure or as a whole percent of total sales (reported in **4**). See **HOW TO REPORT DOLLAR FIGURES** on page 2 and **HOW TO REPORT PERCENTS** above.)

Description of sales, shipments, receipts, or revenue	Cen-sus use	2002								
		Estimates are acceptable. Report dollars OR percents.								
		\$ Bil.	Mil.	Thou.	Dol.	Percent				
0723	0720	0721								0722
1. Guestroom or unit rentals, including campground and RV rental fees EXCLUDING OCCUPANCY TAXES	20010									
2. Camp tuition or fees	20020									
3. Telephone service charges	20030									
4. Gaming receipts, including receipts from the operation of casino games, slot machines, etc. by this establishment	20040									

CONTINUE WITH **22** ON PAGE 5

72101041

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

Description of sales, shipments, receipts, or revenue	Census use	2002				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721				0722
5. Rental of public rooms and areas, including conference/convention meeting rooms	20050					
6. Membership dues and fees	20060					
7. Meals, unpackaged snacks, sandwiches, unpackaged ice cream and yogurt, bakery items, and nonalcoholic beverages generally served for immediate consumption						
a. Food/nonalcoholic beverages prepared for carry-out and consumption off the premises	20121					
b. Food/nonalcoholic beverages prepared for consumption on the premises	20122					
c. Sum lines 7a and 7b	20120					
8. Alcoholic drinks served at this establishment						
a. Distilled spirits	20131					
b. Wine	20132					
c. Beer and ale	20133					
d. Sum lines 8a through 8c	20130					
9. Packaged liquor, wine, and beer	20140					
10. Groceries and other food items for human consumption off the premises, including bottled, canned, or packaged soft drinks; candy; gum; packaged snacks; etc.	20100					
11. Cigars, cigarettes, tobacco, and smokers' accessories, excluding sales from vending machines operated by others	20150					
12. Souvenirs and novelty items	20877					
13. All other merchandise <i>Specify principal lines and estimated sales below</i>	29810					
a.	29811					
b.	29812					
c.	29813					
14. All other nonmerchandise receipts, including receipts from storage and other services provided to customers EXCLUDING SALES AND OTHER TAXES	29980					
15. TOTAL (Should equal 4 if reporting in dollars.)	29990					1 0 0

23-25 Not Applicable.

72101058

26 SPECIAL INQUIRIES

ROOMS

(The number of guestrooms, units, or quarters consists of the number that can be rented as single units. Suites of rooms that cannot be subdivided should be counted as a single unit.)

Number of rooms, units, or quarters, by type

- 1. Primarily rented as residential quarters or units (occupied as one's primary residence). . . 2401
- 2. Primarily rented as transient guestrooms or units 2402
- 3. **TOTAL** (Sum lines 1 and 2) 2400

2002		
Number as of December 31		

27-28 Not Applicable.

29 OPERATIONAL STATUS

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

0011 <input type="checkbox"/> In operation	0014 <input type="checkbox"/> Ceased operation - Give date at right →	0018	Month	Day	Year
0013 <input type="checkbox"/> Temporarily or seasonally inactive	0015 <input type="checkbox"/> Sold or leased to another operator - Give date at right AND enter new name and mailing address below ↴				

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.

72101066