

16-17 Not Applicable.

18 TYPE OF OPERATION

Is the primary business of this establishment making artificial teeth, bridges, crowns, dentures, and other orthodontic appliances that are customized for individual application (prescription basis)?

0620 763 Yes
 764 No

19-21 Not Applicable.

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

INFORMATION COPY
 DO NOT USE TO REPORT

Line No.	Products and services	Census product code	Products shipped and other receipts Value, f.o.b. plant		
			\$ Bil.	Mil.	Thou.
0734		0730	0731		
1	Artificial teeth, bridges, crowns, dentures, and other orthodontic appliances that are customized for individual application (prescription basis) (Report artificial teeth that are not customized for individual application on line 15; and report bridges, crowns, dentures, and other orthodontic appliances that are not customized for individual application on line 16.)	339116 0100 4			
2	Dental professional equipment and supplies Dental professional equipment Dental chairs	339114 1101 6			
3	Dental instrument delivery systems (dental units)	339114 1106 5			
4	Dental hand pieces	339114 1111 5			
5	Dental hand instruments, including broaches, cutting instruments, forceps, and pliers	339114 1116 4			
6	Other dental professional equipment, including dental lasers, excluding X ray equipment	339114 1121 4			
7	Dental professional supplies Dental tools for use with dental hand pieces, including burs, disks, abrasive points, diamond points, and wheels	339114 1226 1			
8	Dental alloys for amalgams	339114 1231 1			
9	Dental impression materials, including alginates and silicones	339114 1236 0			
10	Dental cements and other nonmetallic filling materials	339114 1241 0			
11	Other dental professional supplies	339114 1246 9			
12	Dental laboratory equipment and supplies Dental laboratory equipment, including benches, blow pipes, casting machines, flasks, furnaces, lathes, polishing units, and presses	339114 3101 4			

33971045

CONTINUE WITH 22 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 No.	Products and services	Census product code	Products shipped and other receipts			
			Value, f.o.b. plant			
			\$ Bil.	Mil.	Thou.	
	0734	0730	0731			
	Dental laboratory equipment and supplies - Continued					
	Dental laboratory supplies					
	Dental metals					
13	Precious dental metals, including gold, platinum, and silver	339114 3106 3				
14	Nonprecious dental metals	339114 3111 3				
15	Artificial teeth that are not customized for individual application, excluding dentures (<i>Report artificial teeth that are customized for individual application (prescription basis) on line 1.</i>)	339114 3116 2				
16	Other dental laboratory supplies, including gypsums and waxes and bridges, crowns, dentures, and other orthodontic appliances that are not customized for individual application (<i>Report bridges, crowns, dentures, and other orthodontic appliances that are customized for individual application (prescription basis) on line 1.</i>)	339114 3121 2				
17	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		26				
19		34				
20		42				
21		59				
22		67				
23	Contract work - Receipts for work done for others on their materials (<i>Specify products worked on and kind of work.</i>) ↘	000930 0000 8				
24	Miscellaneous receipts (including receipts for repair work, scrap, refuse, etc.)	000999 8000 5				
25	Resales - Sales of products bought and sold without further manufacture, processing, or assembly	000999 8900 6				
26	TOTAL (<i>Should equal 4, line A</i>)	770000 0000 8				

23-28 Not Applicable.

33971052

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	0013 <input type="checkbox"/> Temporarily or seasonally inactive							
0012 <input type="checkbox"/> Under construction, development, or exploration	0014 <input type="checkbox"/> Ceased operation - Give date at right →	0018 <table border="1"> <tr> <th>Month</th> <th>Day</th> <th>Year</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Month	Day	Year			
Month	Day	Year						
	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 <input type="checkbox"/> Yes	0079 <input type="checkbox"/> No - Enter time period covered →	FROM	Month	Year	TO	Month		
		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.

33971060