

FORM

MA-10000 (05/16/2007)

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

OMB No. 0607-0938: Approval Expires 12/31/2008

DUE DATE FEBRUARY 12, 2008		
<i>Mail</i> your completed form to: U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001		TTT
Please read the accompanying information sheet(s) before answering the questions.	TTATC	NCOPY
Need help or have questions about filling out this form?	TATEORNALL	REPORT
<i>Visit</i> www.census.gov/econhelp	LIST TTSF.	
<i>Call</i> 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday. - <i>OR</i> -	DO NOI USE -	
<i>Write</i> to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.	(Please correct any errors in	n this mailing address.)
that receive this question law, YOUR CENSUS RE	COUIRED 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 pation and may be used only for statistical purposes. For all process.	o the U.S. Census Bureau. By the same ersons sworn to uphold the confidentiality
	en. • Please center numbers in their respective boxes	s. Examples:
 Do not use pencil or felt-tip p Place an "X" inside the box. 	 en. • Do not put slashes through 0 or 7. • Complete only the unshaded portion of each ite 	em. 🛛 0 1 2 3 4 5 6 7 8 9
	form is an establishment. An establishment is gen ted or where services or industrial operations are pe	
1 EMPLOYER IDENTIFICAT	ON NUMBER	
	tion Number (EIN) shown in the mailing address the t 2007 Internal Revenue Service Form 941, Employer	
0021 🗌 Yes - Go to 2	0022 🔲 No - Enter current EIN (9 digits) —	→ 0025 -
	physical location the same as shown in the mailing ute addresses are not physical locations.)	address?
₀₀₃₁ 🗌 Yes - Go to I	ine B	
0032 🔲 No - Enter	0035 Number and street	
physical – location		
	⁰⁰³⁶ City, town, village, etc.	0037 State 0038 ZIP Code
B. Is this establishment p (Mark "X" only ONE b	physically located inside the legal boundaries of the c <i>ox.)</i>	sity, town, village, etc.?
₀₀₄₁ Yes	0042 🗋 No 0043 🔲 No legal boundar	ries 0044 🗌 Do not know
C. In what type of munic	ipality is this establishment physically located? (Mark	k "X" only ONE box.)
0046 🗌 City, village,	or borough 0047 🗌 Town or township 0048	Other 0024 Do not know

Form MA-	10000	(05/16/2007)
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OPERATIONAL STATUS Which of the following best describes this establishment's operational status at the end of 2007; ### ### ### In operation ### ### Cased operation ### Cased operation ### Cased operation ### Cased operation ### ### ### Cased operation #### #### ##### ###### ######		00 (05/16/2007)										Page 2
even in Under construction, development, or exploration even in temporarily or seasonally inactive even instruction, development, or exploration and itemporarily intervention and itemporarily of temporarily intervention and itemporarily intervention and i	Which of th	he following b		s establishment's op	peration	nal sta [.]	tus at t	he end	of 200	7?		
001 Temporarily or seasonally inactive 001 Cassed operation - Give date at right	0011 🔲 In	operation										
0114 Ceased operation - Give date at right 0118 Sold or leased to another operator - Give date at right AND 0118 Sold or leased to another operator - Give date at right AND 0118 Constraints and address of new owner or operator and Egy boldway of address on Number (EN) boldway of address (Number and street, P.O. Box, etc.) 0110 Mailing address (Number and street, P.O. Box, etc.) 0110 Mailing address (Number and street, P.O. Box, etc.) 0110 Months in operation during 2007 (If none, mark 'X' and go to ①) 0110 Months is operation during 2007 (If none, mark 'X' and go to ①) 0110 Mourber of months in operation during 2007 (If none, mark 'X' and go to ①) 0111 Thousands of collars. 111 Thou 1111 <	0016 🗌 U	nder construc	tion, developme	nt, or exploration								
and the search of the date at right in the search of th	0013 🔲 Te	emporarily or	seasonally inacti	ve								
Comparison of the second	0014 🗌 Ce	eased operati	on - <i>Give date at</i>	right ———			0018 IVIC	onth Da		Year		
dot: Mailing address (Number and street, P.O. Box, etc.) dot: Mailing address (Number and street, P.O. Box, etc.) dot: City, town, village, etc.	er	nter name and	d address of new	owner or operator a	ght ANI and) ——	→					
weize City, town, village, etc. weize City, town, village, etc. weize City, town, village, etc. MONTHS IN OPERATION Mark 'X' 2007 Number of months in operation during 2007 (If none, mark *X' and go to ♥.)	60	030 Name of nev	w owner or operato	pr					0061 EIN	l (9 digit	s)	
weize City, town, village, etc. weize City, town, village, etc. weize City, town, village, etc. MONTHS IN OPERATION Mark 'X' 2007 Number of months in operation during 2007 (If none, mark *X' and go to ♥.)										-		
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MONTHS IN OPERATION Mark "X" 2007 Number of months in operation during 2007 (If none, mark "X" and go to \$.)												
MONTHS IN OPERATION Mark *X 2007 Number of months in operation during 2007 (If none, mark *X* and go to ①.) 0002 If Nome Number of months in operation during 2007 (If none, mark *X* and go to ①.) 0002 If Nome HOW TO REPORT DOLLAR FIGURES Dollar figures should be rounded to thousands of dollars. Mark *X 2007 If a value is *1,025,628.79: If a value is *0" (or less than \$500.00): Report If 1 0 2 6 SALES, SHIPMENTS, RECEIPTS, OR REVENUE Mark *X 2007 2006 2006 1 1 0 2 6 B. Value of products shipped and other receipts (Report detail in ②) Mark *X 2007 2006 2006 1 1 0 2 6 B. Value of products shipped for export. Duclate reported on line A.) Breakout of the value reported on line A.) Nore famine assembly, or fabrication, or manufacture 0000 1 0	60	⁰³² City, town, v	village, etc.				603	3 State	6034 ZIP	Code		
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REPORT DOLLAR RGURES If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00): Report If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00): SALES, SHIPMENTS, RECEIPTS, OR REVENUE Mark "X" 2007 2006 A. Total value of products shipped and other receipts (Report detail in @.) Mark "X" 2007 2006 B. Value of products exported (This is a breakout of the value reported on line A.) States a breakout of the value of products shipped for export. Include shipments to customers in the Panama Canal Zone, the Commonwealth of Puerto Rico, and U.S. possessions, as well as the value of products shipped to exporters or other wholesalers for export. Also, include the value of products solipped to products shipped for further manufacture, assembly, or fabrication in the United States. 0100 010 1. Is this the only establishment of this firm? 0100 0100 0100 0100 0007 Yes - Go to O 0000 0000 No - Go to line C2 1 If a this the only establishment of this firm? 0007 Yes - Go to O 0000 0000 No - Go to line C2 1<	ном то		Dollar figures sl thousands of c	hould be rounded to dollars.	0					\$ Bil.		Thou.
If a value is "0" (or less than \$500.00); Report ✓ ✓ SALES, SHIPMENTS, RECEIPTS, OR REVENUE Mark "X" 2007 2006 A. Total value of products shipped and other receipts (Report detail in @.) Mark "X" 2007 2006 B. Value of products shipped and other receipts (Report detail in @.) Mark "X" 1	REPORT		If a figure is \$1	,025,628.79:	Re	port					1 (
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 A. Total value of products shipped and other receipts (Report detail in 2.)	SALES, SH	IIPMENTS, RE	CEIPTS, OR REVI	ENUE								
 A. Total value of products shipped and other receipts (Report detail in 2.)					M	ark "X"		200	7		2006	
 (Report detail in ②.)	∧ Total va	alua of produc	to chinned and c	ther receipte	if	None	\$ Bil.	Mil.	Tł	iou.	\$ Tho	J
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 C. Shipments to other domestic plants of your company for further assembly, fabrication, or manufacture 1. Is this the only establishment of this firm? 0907 Yes - Go to Ogo8 No - Go to line C2 2. Market value of products shipped to other domestic plants of your company for further assembly, fabrication, or manufacture (This is a breakout of the second s	shipme	nts to custom	ers in the Panam uerto Rico, and U	a Canal Zone, the I.S. possessions, bed to exporters								
 9007 Yes - Go to 9008 No - Go to line C2 2. Market value of products shipped to other domestic plants of your company for further assembly, fabrication, or manufacture (This is a breakout of the	as well or other of prode to foreig further	r wholesalers ucts sold to th gn governmei manufacture,	for export. Also, ne U.S. Governm nts. Exclude prod assembly, or fab	ent to be shipped lucts shipped for prication in the	0130							
 907 Yes - Go to 908 No - Go to line C2 2. Market value of products shipped to other domestic plants of your company for further assembly, fabrication, or manufacture (This is a breakout of the 	as well or other of produ to foreig further United S C. Shipme	r wholesalers ucts sold to th gn governmen manufacture, States ents to other d	for export. Also, ne U.S. Governm nts. Exclude prod assembly, or fab lomestic plants o	ent to be shipped lucts shipped for rication in the f your company for	0130		-					
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not shown, please enter your 11-digit Census File mber (CFN) from the mailing address.					
E-SHIPMENTS					
A. Did this plant use any electronic network to control or coordinate the	flow of	any of the s	hipments	s of goo	ds reported
in 5 , line A? Or, were the orders for any of the shipments reported i	n 😉, line	e A received	over an	electron	ic network?
Electronic networks include: Electronic Data Interchange (EDI) Extranet					
• E-mail • Other online system	ns				
• Internet					
0181 🔲 Yes - Go to line B 0182 🗌 No - Go to 🔽			20	07	2006
			Perc		Percent
B. Percent of total reported in G, line A that were ordered, or whose m controlled or coordinated over electronic networks (Report whole per are acceptable.).	rcents. E	stimates		%	%
EMPLOYMENT AND PAYROLL					
Include:					
 Full- and part-time employees working at this establishment whose Service Form 941, Employer's Quarterly Federal Tax Return, and fil Number (EIN) shown in the mailing address or corrected in O. 	e payroll ed unde	was reporte r the Employ	d on Inte /er Identi	rnal Rev fication	venue
Exclude:	_				
 Full- or part-time leased employees whose payroll was filed under Temporary staffing obtained from a staffing service. 	an empl	oyee leasing	compan	y's EIN.	
For further clarification, see information sheet(s).					
A. Number of employees	Mark "X"	2007	· [2006
1. Number of production workers for pay periods including:	if None	Numb	er	N	umber
a. March 12					
b. June 12					
c. September 12					
d. December 12			+ + +		
2. Add lines A1a through A1d					
3. Average annual production workers (<i>Divide line 2 by 4</i> -			1 1		
-					
3. Average annual production workers (<i>Divide line 2 by 4</i> -	_				
3. Average annual production workers (<i>Divide line 2 by 4 - omit fractions.</i>)					
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 5. TOTAL (Add lines A3 and A4) 6. 0337 B. Payroll before deductions (Exclude employer's cost for 					
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 		2007			2006
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4)		2007 Mil.	Thou.		2006 Thou.
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 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll 		r	Thou.		
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll a. Production workers 		r	Thou.		
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 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll a. Production workers b. All other employees c. TOTAL (Add lines B1a and B1b) 0300 		Mil.		\$	Thou.
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll a. Production workers b. All other employees c. TOTAL (Add lines B1a and B1b) 0300 		Mil.		\$	Thou. 2006
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll a. Production workers 0304 b. All other employees 0305 c. TOTAL (Add lines B1a and B1b) 0300 2. First quarter payroll (January-March 2007) 0316 	<" * Bil.	Mil.	5	\$	Thou. 2006 Hours
 3. Average annual production workers (Divide line 2 by 4 - omit fractions.) 4. All other employees for pay period including March 12 0336 5. TOTAL (Add lines A3 and A4) 0337 B. Payroll before deductions (Exclude employer's cost for fringe benefits.) 1. Annual payroll a. Production workers b. All other employees c. TOTAL (Add lines B1a and B1b) 0300 	(" 9 \$ Bil. 	Mil.	5	\$	Thou. 2006

7 E	MPLOYMENT AND PAYROLL - Continued									
C). Employer's cost for fringe benefits - Emplo									
	legally required programs and programs n by law.	ot require	ed	Mark "> if None		200			200	
	1. Health insurance - Insurance premiun hospitals, medical plans, and single ser such as dental, vision, and prescription Include premium equivalents for self-in and fees paid to third party administrat not include employee contributions.	vice plans drug plan sured pla ors (TPAs	ns ns s). Do		⁹ \$ Bil.	Mil.		าดน.	\$ Th	<u>ou.</u>
	2. Pension plans									
	 a. Defined benefit pension plans qualified and unqualified defined performance Pension plans that specify the benefit to employees upon retirement, generic specific amount or a percentage of a Employer contributions are based or computations that include the employees allocated to specific accounts maintain employees. 	insion pla fit to be p erally eith compensa n actuaria oyee's and are no ained for	ns. aid er a ation. Il ot	0335						
	b. Defined contribution plans - Cost defined contribution plans. Pension define the employer contributions to account provided for each employee employee "benefit" at retirement de the amount contributed and the rest account's activity. Examples include plans, money purchase (e.g., 401k, 4 bonus plans (e.g., ESOPs)	plans tha b a separa e. The pends on ults of the profit sha 103b) and	ate aring stock	0337						
	 Other - Other fringe benefits (e.g., Soci workers' compensation insurance, uner tax, state disability insurance programs benefits, Medicare) 	ial Securit nploymer , life insu	ty, nt rance							
	4. TOTAL (Add lines D1 through D3)			0220						
8 N	lot Applicable.									
A	 ALUE OF INVENTORIES A. Did this establishment own inventories, regords 0488 Yes - Go to line B 0489 No - Go to C Report inventories owned by this establishment on of December 	gardless o	of whei	re held, at	the end	of 2007	and/or	2006?		
	establishment as of December 31 before Last-in, First-out (LIFO)	Mark "X"		End of 200	7		lark "X"		End of 20	06
	adjustment (if any)	if None	\$ Bil.	Mil.	Thou.	in	f None	\$ Bil.	Mil.	Thou.
	1. Finished goods					0471				
	2. Work-in-process		'			0473				
	3. Materials, supplies, fuels, etc 0462					0472				
	4. Total inventories (Add lines B1 through B3)					0470				
	 5. LIFO reserve (if any) 6. Total inventories after LIFO 					0476				
	adjustment (Line B4 minus line B5) 0490					0492				

Number (CFN) from the	ter your 11-digit Cens mailing address.	us File									
10 INVENTORIES BY VA	LUATION METHOD										
	the inventory reported	1			f 2007		1			End of 20	0.00
in ᠑, line B4 is subje valuation methods.	ect to the following	Mark "X" if None	\$ Bil.	End c Mil	f 2007	Thou.		/lark "X" if None	\$ Bil.	End of 20 Mil.	Thou.
A. LIFO valuation meadjustment	ethod before	5					0475				
B. First-in, First-out	(FIFO)	3		_		+ +	0496				
C. Average cost	050:	2					0500				
 D. Standard cost E. Other valuation n method → 	nethod - <i>Specify</i>	5					0504				
0895	048	7		_		+ +	0485				
F. TOTAL (Add line should equal 9, .	Ine B4.) 0510						0508				
A. Of the total inven the District of Col	IDE OF THE UNITED STA tories reported in 9 , line lumbia? o to line B	B4 were	e any ste o - <i>Go</i>		r en ro	oute OU	JTSIDE	the 50	U.S. st	tates and	
B. Report the total v					f 2007		1			End of 20	006
inventories (Do n	not report	Mark "X" if None	\$ Bil.	End o Mil	f 2007	Thou.		1ark "X" if None	\$ Bil.	End of 20 Mil.	Thou.
	Foreign Trade warehouses in the		φ ΒΠ.			rnou.	0260		φ Βπ.		THOU.
2 Not Applicable.											
	XPENDITURES, RETIREM				TION						
Refer to the instructi	XPENDITURES, RETIREM ons on how to report lea ue of assets, capital expe	sing arra	ngemei	nts. N	TION lark "X' f None		20 	ю7 Т	-hou.)06 hou.
Refer to the instructi Report the dollar val depreciation A. Gross value of de	ons on how to report lea	sing arrai nditures, tion costs	ngemei and	nts. N	lark "X' f None		1		ħou.	\$т	hou. lected in
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Form MA-10000 (05/16/2007)

RENTAL PAYMENTS					
(Exclude capital leases (leases with a contract to own at the		r	2007		
	if None	\$ Bil.	Mil.	Thou.	
A. Rental or lease of buildings, job-site trailers, and other structures (Include land.)	551				
B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles	552				
C. TOTAL (Add lines A and B)	550				
Not Applicable.					
SELECTED EXPENSES					
A. Selected production related costs	Mark "X' if None		2007 Mil	Трои	2006 \$ Thou.
 Cost of materials, parts, containers, packaging, etc. used (Report detail in ♥.)	.21	I			
 Cost of products bought and sold as such without further processing (Report sales in 29.) 	26				
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity	30				
4. Cost of purchased electricity (Report quantity on line B1.)	25				
5. Cost of work done for you by others on your materials	24				
6. TOTAL (Add lines A1 through A5)	120				
			2007		2006
				urs	Kilowatthours
B. Quantity of Electricity	if None	Bil.	Mil.	Thou.	Thou.
1. Purchased electricity (Quantity comparable to cost reported on line A4.)	.36				
	.37				
3. Electricity sold or transferred to other establishments (Include on lines B1 or B2.)	38				
CONTINUE WITH 😨 O	N PAGE 7				
	 (Exclude capital leases (leases with a contract to own at the end of the lease).) A. Rental or lease of buildings, job-site trailers, and other structures (Include land.)	(Exclude capital leases (leases with a contract to own at the end of the lease).) Mark "X" if None A. Rental or lease of buildings, job-site trailers, and other structures (Include land.) 0551 B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552 C. TOTAL (Add lines A and B) 0550 Not Applicable. 0550 SELECTED EXPENSES Mark "X" if None A. Selected production related costs Mark "X" if None 1. Cost of materials, parts, containers, packaging, etc. used (Report detail in ①) 0421 2. Cost of products bought and sold as such without further processing (Report sales in 2) 0421 3. Cost of purchased fuels consumed for heat, power, or the generation of electricity (Report quantity on line B1.) 0425 5. Cost of work done for you by others on your materials 0424 6. TOTAL (Add lines A1 through A5) 0420 1. Purchased electricity (Quantity comparable to cost reported on line A4.) 0436 2. Generated electricity (Gross less generating station use.) 0437 3. Electricity sold or transferred to other establishments 0437	(Exclude capital leases (leases with a contract to own at the and of the lease).) Mark 'X' since the structures (Include land.) A. Rental or lease of buildings, job-site trailers, and other structures (Include land.) 0551 B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552 B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552 C. TOTAL (Add lines A and B) 0550 Not Applicable. SELECTED EXPENSES A. Selected production related costs 1. Cost of materials, parts, containers, packaging, etc. used (Report detail in 0 .) 0426 2. Cost of purchased fuels consumed for heat, power, or the generation of electricity 0426 3. Cost of purchased fuels consumed for heat, power, or the generation of electricity (Report quantity on line B1.) 0424 4. Cost of work done for you by others on your materials 0424 5. Cost of work done for you by others on your materials 0426 6. TOTAL (Add lines A1 through A5) 0427 9. Generated electricity (Gross less generating station use) 0437 9. Generated electricity (Gross less generating station use) 0438 1. Purchased electricity (Gross less generating station use) 0438 2. Gene	(Exclude capital leases (leases with a contract to own at the end of the lease).) Mark 'X' 2007 A. Rental or lease of buildings, job-site trailers, and other structures (Include land.) 0551 1 1 B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552 1 1 1 B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552 1 1 1 C. TOTAL (Add lines A and B) 0550 1 1 1 1 1 SELECTED EXPENSES A. Selected production related costs Mark 'X' 2007 1 1 1 C. Cost of products bought and sold as such without further processing (Report sales in Q 2) 0420 1	(Exclude capital leases (leases with a contract to own at the end of the lease). Mark *X 2007 8. Rental or lease of buildings, job-site trailers, and other structures (Include land.) 0051 1 <td< td=""></td<>

er (CFN)	lease enter your 11-digit Censu from the mailing address.						
LECTED	EXPENSES - Continued						
Other o	perating expenses paid by this esta	ıblishment	Mark "X" if None	\$ Bil.	2007 Mil.	Thou.	
-To Org	porary staff and leased employee tal costs paid to Professional Empl anizations (PEOs) and staffing ager connel. (Include all charges for pay	over ncies for				1	
and	services.)	0176					
and tele	ensed equipment - Expensed comp other equipment (e.g., copiers, fax ohones, shop and lab equipment, (nitors). (Report packaged software	a machines, CPUs,					
pre soft by c lice mai	ensed purchases of software - Purc backaged, custom coded or vendor ware. (Include software developed others, web-design services and pu nsing agreements, upgrades of sof ntenance fees related to software u rations.)	customized or customized rchases, tware; and ıpgrades and			L 1		
serv stor stor serv inte of c and for	a processing and other purchased of ices (Include computer facilities m ices, computer input preparation, of age, computer time rental, optical ices, and other computer-related a ices, including training. Exclude ex- grated systems, repair and mainter omputer equipment, payroll proces credit card transaction fees, and e elecommunication services (e.g., In nectivity, telephone).)	computer anagement data scanning dvice and cpensed nance ssing xpenses					
5. Pure cell com and	chased communication services - T ular, and fax services; computer-rel imunications (e.g., Internet, connec other wired and wireless commun ices.	elephone, ated tivity, online)					
or n part	chased repairs and maintenance to nachinery and equipment (Exclude s, and supplies used for repairs an ormed by this firm's employees.)	buildings and/ materials, d maintenance					
рау	er, sewer, refuse removal, and oth ments (Include the costs of hazardo oval.)	ous waste					
	chased advertising and promotiona ude marketing and public relations						
9. Pure (Inc aud pro pro	chased professional and technical s ude management consulting, acco iting, bookkeeping, legal, actuarial, sessing, architectural, engineering, essional services. Exclude salaries	services unting, payroll and other paid to your					
10. Gov gov	employees for these services.) ernmental taxes and license fees - ernment agencies for taxes and lic ness and property taxes. Exclude i	Payments to enses. (Include					
11. All exp of n	other operating expenses - All other enses not reported elsewhere. (Exc herchandise for resale and nonope enses.) - <i>Specify</i>	r operating lude purchases				1	
0417		0415					