## 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 22. 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 00970099.
Report materials, parts, and supplies purchased, transferred from other plants of your company, or withdrawn from inventory.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 amounts 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 as 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 (16, 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 16, line A2, not in © . The value of these products shipped by this establishment should be reported in 22 under Census product code 999890 0000, "Resales."


Not Applicable.

TYPE OF OPERATION
(Mark "X" ALL that apply.)
Operations performed in this establishment during 2007
0620
460
Manufacturing only
$462 \square$ Blending purchased materials or materials received from other establishments within your company (Report value of shipments in 22, lines 1-24.)
$464 \quad \square$
Blending inks for others from their own materials (Report value of contract work done in 22, line 31.)

466
Manufacturing and blending
and 21 Not Applicable.

## 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 9300000000.

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 999890 0000, "Resales."

## Special Reporting Instructions and Definitions -

## LETTERPRESS INKS

News Inks - Include inks for printing newspapers, black and color. Do not include web offset news ink.
Packaging Inks - Include all letterpress inks for the packaging industry. Report all letterpress folding carton, corrugated, multiwall bag, label, and paper cup inks.
Other Letterpress Inks - Include all letterpress inks not specified above, including publication inks. Letterpress inks for sheet-fed printing should be reported in this category.

## LITHOGRAPHIC AND OFFSET INKS

News and Nonheat-Set Web Offset Inks - Include inks for printing newspapers by the web offset process, both black and color, including nonheat types. Do not include letterpress news inks.
Publication and Commercial Web Inks - Include all heat-set web offset inks.
Sheet-Fed Inks - Include all sheet-fed lithographic inks for the packaging industry and general printing. Include metal decoration, dry offset, and letterset inks.
Other Lithographic and Offset Inks - Include all lithographic inks not specified above.
GRAVURE (INCLUDING EXTENDERS)
Packaging Inks - Include inks sold to the packaging industry. Report all gravure folding carton, paper wrapper, label, film, and foil inks. Include extenders and transparent whites sold to the packaging gravure industry.
Publication Inks - Include inks for publication printing by the gravure process. Include extenders and transparent whites sold to the publication gravure industry.

Other Gravure Inks - Include all gravure inks not specified above.
FLEXOGRAPHIC (INCLUDING EXTENDERS)

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued
Packaging Inks - Include inks for printing by the flexographic process sold to the packaging industry, including extenders and transparent whites. Differentiate between water and solvent type flexographic inks.
News and Commercial Inks - Include inks for printing newspapers and for commercial use by the flexographic process. Include extenders and transparent whites.
Other Flexographic Inks - Include all flexographic inks not specified above.

## NONIMPACT/DIGITAL INKS

Inkjet Inks - Include all continuous jet, drop-on-demand, bubble-jet and other inkjet inks for all applications.
Electrophotographic Printing Inks - Include all liquid and dry eletrophotographic inks for nonimpact printing. Do NOT include dry toners for office copiers, laser printers or facsimile machines.
Other Nonimpact Printing Inks - Include all electronic, ion deposition, magnetographic, thermal transfer and other nonimpact printing inks not specified above.


CONTINUE WITH 3 ON PAGE 11 Number (CFN) from the mailing address.

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


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

|  |  | Census product code | Products shipped and other receipts |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | Value, f.o.b. plant |  |  |
|  |  |  | \$ Bil. | Mil. | Thou. |
|  |  | 0730 | 0731 |  |  |
| 25 | All other products made in this establishment - 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. |  |  |  |  |
|  |  | 18 |  |  |  |
| 26 |  | 26 |  |  |  |
| 27 |  | 34 |  |  |  |
| 28 |  | 42 |  |  |  |
| 29 |  | 59 |  |  |  |
| 30 |  | 67 |  |  |  |
| 31 | Contract work - Receipts for work done for others on their materials (Specify products worked on and kind of work.) | 9300000000 | 1 |  | I |
| 32 | Resales - Sales of products bought and sold without further manufacture, processing, or assembly (The cost of such items should be reported in (16), line A2.) <br> Miscellaneous receipts, including receipts for repair work, sales of scrap and refuse, etc. | 9998900000 | 1 |  |  |
| 33 |  | 9998000000 |  |  |  |
| 34 | TOTAL (Should equal 5, line A) . . . . . . . . . . . . . . . . . . . . . | 7700000000 |  |  |  |

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.
## SPECIAL INQUIRIES

## OTHER ESTABLISHMENT ACTIVITIES

1. Did this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?
0318
Yes
0319 No
2. Which of the following best describes this establishment's primary activity? (Mark " $X$ " only ONE box.)
$0362 \quad$ Providing contract manufacturing services for others
$0363 \quad \square$
Transforming raw materials or components into new products that this establishment owns or controls

036


Reselling goods manufactured by others (with or without minor final assembly)
$0365 \square$ Other - Specify

0366 $\qquad$
3. Did this establishment purchase contract manufacturing services from other companies or other establishments of your company to process materials or components that this establishment owns or controls?

0496Yes, primarily with establishments WITHIN the 50 States and the District of Columbia
$0497 \quad \square$ Yes, primarily with establishments OUTSIDE of the 50 States and the District of Columbia

0498No

Not Applicable.
REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

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?Yes No - Enter time period covered |  |  |  | FROM | Month | Year |  | TO | Month | Year |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Name of person to contact regarding this report |  |  |  | Title |  |  |  |  |  |  |
| Telephone | Area code | Number | Extension |  | Fax |  | Area code | Number |  |  |
| Internet e-ma | dress |  |  |  |  |  |  | Month | Day | Year |

