

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

17 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 009700 99.

Report materials, parts, and supplies purchased, transferred from other plants of your company, or withdrawn from inventory.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 **17**. The value of these products shipped by this establishment should be reported in **22** under Census product code 999899 1000, "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		
1	Clay, ceramic, and refractory minerals	212320 11			
2	Precious metals (gold, platinum, etc.), all forms (including ingot, sheet, strip, solder, plating, electrodes, etc.)	331419 01			
3	Fabricated metal products (excluding forgings)	332000 57			
4	Steel shapes and forms (excluding castings, forgings, and fabricated metal products)	331200 01			
5	Chemical, all types (including resins)	325000 06			
6	Fabricated plastics products (excluding gaskets)	326190 11			
7	Paperboard containers, boxes, and corrugated paperboard	322210 01			

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17 DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES - Continued

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		
8	Cost of all other materials and components, parts, containers, and supplies consumed (Specify the principal materials, etc., included in this value.) 7	009700 99			
9	TOTAL (Should equal total reported in 16, line A1)	771000 00			

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18 Not Applicable.

19 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

20 and 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 999899 2000.

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 999899 1000, "Resales."

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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			
1	Orthodontic appliances (artificial teeth, bridges, crowns, dentures, etc.), customized for individual application (prescription basis) <i>(Report artificial teeth, bridges, crowns, dentures, and other orthodontic appliances that are not customized for individual application on line 5.)</i>	339116 0100				
2	Dental equipment, professional (including dental chairs, dental units, hand pieces, hand instruments, and other equipment) (excluding X-ray equipment)	339141 105				
3	Dental supplies, professional (including tools to use with dental hand pieces, alloys for amalgams, inlay materials, filling materials, etc.)	339141 251				
4	Dental equipment, laboratory (including benches, blow pipes, casting machines, flasks, furnaces, lathes, polishing units, and presses)	339114 3101				
5	Dental metals, artificial teeth not customized for individual application, and other dental laboratory supplies <i>(Specify kind)</i> ↘ 	339114 3102				
6	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 pre-listed products and services. For all remaining products, write "Other" and report a single total value.)</i> 	18				
7		26				
8		34				
9		42				
10		59				
11		67				
12	Contract work - Receipts for work done for others on their materials <i>(Specify products worked on and kind of work.)</i> ↘ 	999899 2000				
13	Resales - Sales of products bought and sold without further manufacture, processing, or assembly <i>(The cost of such items should be reported in 16, line A2.)</i>	999899 1000				

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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			
14	Miscellaneous receipts, including receipts for repair work, sales of scrap and refuse, etc.	999899 9000				
15	TOTAL (Should equal total reported in 5)	770000 0000				

23-25 Not Applicable.

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26 SPECIAL INQUIRIES

A. PURCHASE OF CONTRACT MANUFACTURING

1. Did this establishment **purchase** contract manufacturing services from other companies or foreign plants of your company in 2012?

Include:

- Products for which the manufacturing (i.e., transforming or otherwise processing materials or components based on specifications provided by your company) was outsourced to other companies.
- Products for which the manufacturing was performed by your company's foreign plants.

Exclude:

- Services for packaging and assembling.
- Purchases of merchandise for resale (sale of products bought and sold without further processing or transformation).

1011 Yes - Go to line 2

1012 No - Go to **B**

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2. Report the costs incurred by this establishment for contract manufacturing purchased in 2012 1013

2012		
\$ Bil.	Mil.	Thou.

3. Report the value of sales, shipments, receipts, or revenue generated in 2012 from products whose purchases were reported as contract manufacturing costs in line 2 1015

2012		
\$ Bil.	Mil.	Thou.

B. RECEIPTS FROM CONTRACT MANUFACTURING

1. Did this establishment **provide** contract manufacturing services to others in 2012 (*regardless of materials ownership*)?

Include:

- Products manufactured at this location (i.e., transforming or otherwise processing materials or components based on specifications provided by the contracting company).
- Products manufactured and transferred to other plants of your company.
- Products manufactured and exported.

Exclude:

- Services for packaging and assembling.
- Sales of products purchased and sold without further processing or transformation.

1017 Yes - Go to line 2

1018 No - Go to **30**

2. Report the value of sales, shipments, receipts, or revenue generated in 2012 from contract manufacturing performed at this location for others (**regardless of materials ownership and based on specifications provided by the contracting company**) 1019

2012		
\$ Bil.	Mil.	Thou.

Please describe the product(s) being manufactured for others at this establishment. ↴

1020

27-29 Not Applicable.

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

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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?

Yes

No - Enter time period covered →

FROM	Month	Year	TO	Month	Year
	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>

Name of person to contact regarding this report

Title

Area code	Number	Extension
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax	Area code	Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

E-mail address

Date completed	Month	Day	Year
	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Thank you for completing your 2012 ECONOMIC CENSUS form.
PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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