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

FORM
CFS(07)-2000
(10-02-2006)

2007 Commodity Flow Survey

07200017

DUE DATE:

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 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.

Please make corrections to name, address, and ZIP code if necessary.

INSTRUCTIONS:

- **Please refer to the accompanying Instruction Guide for help in answering specific questions.**

- **More information is available at www.census.gov/cfs or at 1-800-772-7851.**

PURPOSE OF THIS SURVEY: To develop information on the characteristics of freight flows in the United States. The information you provide is critical to understanding transportation markets, investment needs and the economic, energy, safety, and security consequences of transportation.

Item A   ESTABLISHMENT NAME

Is the establishment name shown above in the mailing address correct?

1 ☐ Yes

2 ☐ No - *Enter establishment name* ⟶ _____

Item B   PHYSICAL LOCATION

Is the establishment's physical location the same as shown in the mailing label above? *PO Box or rural routes are not physical locations.*

1 ☐ Yes

2 ☐ No - *Print physical location below*

Number and street

_____

City, town, village, etc.	State	ZIP Code + 4
		-

If you entered a different location above, please complete the form for that location.

Item C   OPERATING STATUS

Which of the following best describes this establishment's operating status during the week of

_____ **?**

1 ☐ In operation

2 ☐ Temporarily or seasonally inactive

Date (MM-DD-YYYY)

3 ☐ Ceased operation - *Enter date ceased operation* ⟶ [ ] - [ ] - [   ]

Item D   TOTAL NUMBER OF OUTBOUND SHIPMENTS

For this survey, it is important to obtain information about a sample of the outbound shipments made from this establishment.

*An outbound shipment in this survey is defined as a movement of commodities from your establishment to another **single** location. If a truck makes multiple stops on a delivery route, please **count each stop as one shipment.***

- Remember to include only outbound shipments from your physical location (label address or physical location in Item B).
- Also include customer pick-ups, parcels, and all other outbound shipments.

1. What was the total number of all outbound shipments for this establishment the week of

Total number of outbound shipments

_____ **?** . . . . [   ]

Estimates are acceptable.

For further information, refer to the Instruction Guide, page 2.

2. Did you enter 40 or fewer shipments above?

1 ☐ Yes - *Skip Item E and report all outbound shipments in Item F, pages 4-7.*

2 ☐ No - *Continue with Item E, on page 3.*

Item E   SAMPLING INSTRUCTIONS

In order to avoid asking you for information regarding all of your shipments, we will only ask about a sample of them. This section will help you **identify your sample of shipments.**

1. Using the table below, mark the row that includes the total number of outbound shipments reported in Item D, and the corresponding "report every" number.

Number of outbound shipments reported in Line 1	Report every...	Mark (X) one
1-40	Report every outbound shipment	
41-80	Report every **2nd** outbound shipment	
81-100	Report every **3rd** outbound shipment	
101-200	Report every **5th** outbound shipment	
201-400	Report every **10th** outbound shipment	
401-800	Report every **20th** outbound shipment	
801-1600	Report every **40th** outbound shipment	
1601-3200	Report every **80th** outbound shipment	
3201-6400	Report every **160th** outbound shipment	
6401-12800	Report every **320th** outbound shipment	
More than 12800	Call Census at 1-800-772-7851 or go to www.census.gov/cfs	

2. Using your full set of shipments records for the week named in Item D, follow the steps below.

Step 1. Count until you reach the "report every" number marked above.

Step 2. Select that record.

Step 3. Report that record in Line 1 of Item F, pages 4-5.

Step 4. Continuing with the next shipment record, count until you reach the "report every" number again.

Step 5. Select that record.

Step 6. Report in Line 2 of Item F, pages 4-5.

Step 7. Repeat this process until you have gone through your full set of shipment records.

3. Report these selected shipments in Item F.

Example: If an establishment reported 150 shipments in Item D, it would correspond to the range of 101-200 in the table above, and every 5th outbound shipment record would be selected. This means the establishment would count 5 shipment records, select that record, and report it in Item F. Continuing with the next shipment record, the establishment would count 5 shipment records again, select that record, and report it in Item F. The establishment would repeat this until it had gone through the full set of shipment records for the week named in Item D.

For further information, refer to the Instruction Guide, page 3.

Item F   SHIPMENT CHARACTERISTICS

NOTE: Each line runs across pages 4 and 5. After entering column H data on page 4 for any line, continue with column (I) on page 5 for the same line.

Line No. (A)	Your Shipment ID Number (B)	Shipment Date (C) Month	Day	Shipment value (excluding shipping costs) in whole dollars. *Estimates acceptable.* (D)	Net Shipment Weight **in pounds** (E)	SCTG commodity code from accompanying booklet (F)	Commodity Description (G)	If a hazardous material, enter the "UN" or "NA" number (H)	*Continue with column (I) on page 5*
0	123-5	4	26	224,235	4840	34520	Mechanical machinery		→
00	402H	4	26	1,375	50,125	20222	Sulfuric acid	1830	→
1									→
2									→
3									→
4									→
5									→
6									→
7									→
8									→
9									→
10									→
11									→
12									→
13									→
14									→
15									→
16									→
17									→
18									→
19									→
20									→

| U.S. Destination or U.S. Exit Port *(Complete for all shipments.)* (I) | | | Mode(s) of transport to U.S. destination. *Enter all that apply in order used. Use codes at bottom.* (J) | Intermodal shipment? (Y/N) (K) | Export? (Y/N) (L) | Foreign Destination (for export shipments only) **Note:** In column (I) enter the U.S. port, airport, or border crossing of exit. (M) | | Export mode (N) | Line No. (O) |
City	State	ZIP Code		*		City	Country		
Los Angeles	**CA**	**90040**	**2, 4**	**Y**	**Y**	**Beijing**	**China**	**6**	0
Newark	**NJ**	**07105**	**4**	**N**	**N**				00
									1
									2
									3
									4
									5
									6
									7
									8
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									11
									12
									13
									14
									15
									16
									17
									18
									19
									20

Mode of transport codes for columns (J) and (N):

1 - Parcel delivery, courier, or U.S. Parcel Post
2 - Private truck
3 - For-hire truck
4 - Railroad
5 - Shallow draft vessel
6 - Deep draft vessel
7 - Pipeline
8 - Air
9 - Other mode
0 - Unknown

* Intermodal shipments (column K): include Trailer on Flat Car (TOFC), Container on Flat Car (COFC), and Intermodal (IM or ISO) tank.

Item F   SHIPMENT CHARACTERISTICS - Continued

NOTE: Each line runs across pages 6 and 7. After entering column H data on page 6 for any line, continue with column (I) on page 7 for the same line.

Line No. (A)	Your Shipment ID Number (B)	Shipment Date (C) Month	Day	Shipment value (excluding shipping costs) in whole dollars. *Estimates acceptable.* (D)	Net Shipment Weight **in pounds** (E)	SCTG Commodity Code from accompanying booklet (F)	Commodity Description (G)	If a hazardous material, enter the "UN" or "NA" (H)	*Continue with column (I) on page 7*
21									→
22									→
23									→
24									→
25									→
26									→
27									→
28									→
29									→
30									→
31									→
32									→
33									→
34									→
35									→
36									→
37									→
38									→
39									→
40									→

U.S.Destination or U.S. Exit Port *(Complete for all shipments.)* (I)			Mode(s) of transport to U.S. destination. *Enter all that apply in order used. Use codes at bottom.* (J)	Intermodal shipment? (Y/N) * (K)	Export? (Y/N) (L)	Foreign Destination (for export shipments only) **Note:** In column (I) enter the U.S. port, airport, or border crossing of exit. (M)		Export mode (N)	Line No. (O)
City	State	ZIP Code				City	Country		
									21
									22
									23
									24
									25
									26
									27
									28
									29
									30
									31
									32
									33
									34
									35
									36
									37
									38
									39
									40

Mode of transport codes for columns (J) and (N):

1 - Parcel delivery, courier, or U.S. Parcel Post
2 - Private truck
3 - For-hire truck
4 - Railroad
5 - Shallow draft vessel
6 - Deep draft vessel
7 - Pipeline
8 - Air
9 - Other mode
0 - Unknown

* Intermodal shipments (column K): include Trailer on Flat Car (TOFC), Container on Flat Car (COFC), and Intermodal (IM or ISO) tank.

Item G — MONTHLY VALUE OF OUTBOUND SHIPMENTS

Which of the following represents your best estimate of the total value of all outbound shipments originating from this establishment for the most recently completed month?

1 ☐ Less than $1 Million

2 ☐ $1 Million or more but less than $10 Million

3 ☐ $10 Million or more but less than $40 Million

4 ☐ $40 Million or more but less than $100 Million

5 ☐ $100 Million or more but less than $400 Million

6 ☐ $400 Million or more

Item H — THIRD-PARTY LOGISTICS

The next series of questions relates to your use of third-party logistics providers (3PLs).

*A 3PL is **not** a contractor who provides only basic logistics services, such as common carrier trucking and/or public warehousing.*

Rather, a 3PL is a contractor that manages and arranges for the provision of multiple logistics services, including freight forwarding, customs brokerage, contract warehousing, transportation, etc.

1. Does this establishment contract out all or a portion of its logistics activities to a 3PL(s)?

1 ☐ Yes   2 ☐ No - *Go to Contact below.*

2. Which of the following services does the 3PL(s) provide, manage and arrange for this establishment? *Mark (X) all that apply.*

1 ☐ Transportation

2 ☐ Contract warehousing

3 ☐ Cross-docking

4 ☐ Re-packing/consolidation

5 ☐ Reverse Logistics

6 ☐ Management of overall transportation and logistics functions (including dedicated trucking services)

7 ☐ Customs brokerage

8 ☐ Freight forwarding

9 ☐ Inventory control and/or management

10 ☐ Information systems

3. Which of the following best represents the percentage of this establishment's outbound shipments (by weight) which was shipped with the involvement of a 3PL(s) during the last 12 months?

1 ☐ 1 to 25%   2 ☐ 26 to 50%   3 ☐ 51 to 75%   4 ☐ 76 to 100%

Contact — Please provide the information below for the contact person regarding this report.

Name - *Please print*

Title - *Please print*

Signature

Area Code   -   Phone Number   -   Extension

Please return this survey in the enclosed envelope or send it to:
U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville IN 47132-0001

THANK YOU FOR COMPLETING THIS REPORT.