



<p style="text-align: center;"><b>DUE DATE</b></p> <p style="text-align: center;"><b>FEBRUARY 12, 2008</b></p> <p><i>Mail your completed form to:</i></p> <p>U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001</p> <p><i>Please read the accompanying information sheet(s) before answering the questions.</i></p> <p><i>Need help or have questions about filling out this form?</i></p> <p><i>Visit our Web site at</i> www.census.gov/econhelp</p> <p><i>Call 1-800-233-6136, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.</i></p> <p style="text-align: center;">-OR-</p> <p><i>Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.</i></p>	<p style="text-align: center;">CC-23803</p> <p style="text-align: right;">(Please correct any errors in this mailing address.)</p>
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**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 CENSUS 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.

<p>† Use blue or black ink.</p> <p>† Do not use pencil.</p> <p>† Place an "X" inside the box.</p>	<p>† Please center numbers in their respective boxes. Examples:</p> <p>† Do not put slashes through 0 or 7.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;">0</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> <td style="text-align: center;">5</td> <td style="text-align: center;">6</td> <td style="text-align: center;">7</td> <td style="text-align: center;">8</td> <td style="text-align: center;">9</td> </tr> </table>	<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9			

The reporting unit for this form is a construction establishment. A construction establishment is generally a permanent office, payroll office, or other place where business activities related to construction are conducted. A construction establishment manages one or more projects or jobs and is usually maintained on a continuing basis. For examples and further clarification, see information sheet(s).

**1 EMPLOYER IDENTIFICATION NUMBER**

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021  Yes - Go to **2**      0022  No - Enter current EIN (9 digits) → 0025      -      [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**2 PHYSICAL LOCATION**

A. Is this establishment's physical location the same as shown in the mailing address? (P.O. box and rural route addresses are not physical locations.)

0031  Yes - Go to line B

0032  No - Enter physical location →

0035 Number and street										
0036 City, town, village, etc.						0037 State		0038 ZIP Code		
								-		

B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?  
(Mark "X" only ONE box.)

0041  Yes      0042  No      0043  No legal boundaries      0044  Do not know

C. In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046  City, village, or borough      0047  Town or township      0023  Other      0024  Do not know

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**3 OPERATIONAL STATUS**

Which ONE of the following best describes this establishment's operational status at the end of 2007?

(Mark "X" only ONE box.)

0011	<input type="checkbox"/>	In operation	0014	<input type="checkbox"/>	Ceased operation - Give date at right _____ →	0018	Month	Day	Year
0013	<input type="checkbox"/>	Temporarily or seasonally inactive	0015	<input type="checkbox"/>	Sold or leased to another operator - Give date at right _____ → AND enter name and address of new owner or operator and Employer Identification Number (EIN) below ↴				

0060 Name of new owner or operator	0061 EIN (9 digits)
	-

0062 Mailing address (Number and street, P.O. Box, etc.)

0063 City, town, village, etc.	0064 State	0065 ZIP Code
		-

0016  Other - Specify \_\_\_\_\_

**4 MONTHS IN OPERATION**

Mark "X" if None 2007 Number

Number of months in operation during 2007 (if none, mark "X" and go to 30.) . . . . . 0002

HOW TO REPORT DOLLAR FIGURES	Dollar figures should be rounded to thousands of dollars.	Mark "X" if None	2007		
	If a figure is \$1,025,628.79: Report _____ →	<input type="checkbox"/>	\$ Bil.	M il.	Thou.
	If a value is "0" (or less than \$500.00): Report _____ →	<input checked="" type="checkbox"/>		1 0 2 6	

**5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

Mark "X" if None

2007 \$ Bil. M il. Thou.

A. Receipts, billings, or sales for construction work . . . . . 0152

(Construction work includes new construction and remodeling as well as maintenance and repair work. The activities of prime and trade contractors are considered to be construction. Some trades, not traditionally thought of as construction are included, such as land subdivision, excavation, building demolition, painting, carpet-laying, and water well drilling.)

Include:

- +Receipts (or billings) derived from contract construction work done for others.
- +Sales of houses and other buildings you built and sold.
- +Construction management and design-build contracts.
- +Site preparation, such as land clearing, laying roads, installing utilities, and subdividing land into lots.

Exclude:

- +Cost of land other than site preparation.
- +Cost of manufacturing and production machinery, furniture, etc. (any item installed that is not part of a building structure).

B. Receipts for all other business activities done by this establishment . . . . . 0153

Include:

- +Architectural services, except the design portion of integrated design-build contracts.
- +Engineering services.
- +Manufacturing.
- +Mining.
- +Rental or lease of properties.
- +Real estate commissions and property management fees.
- +Rental of construction machinery or equipment to others, without an operator.
- +Transportation.
- +Retail trade.
- +Wholesale trade.
- +Other business activities.

C. TOTAL (Add lines A and B) . . . . . 0100

2007		
\$ Bil.	M il.	Thou.

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

6 Not Applicable.

7 EMPLOYMENT AND PAYROLL

A. Number of employees

Include:

† Full- and part-time employees whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in 1.

Exclude:

- † Full- or part-time leased employees whose payroll was filed under a Professional Employer Organization's EIN.
- † Temporary staffing obtained from a staffing service.
- † Contractors, subcontractors, or independent contractors.
- † Purchased or managed services, such as janitorial, guard, or landscape services.
- † Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering or accounting services.

For further clarification, see information sheet(s).

Number of construction workers includes:

- † Apprentices.
- † Working foremen.
- † Equipment operators and mechanics.
- † Journeymen.
- † Job-site record keepers.
- † Craftsmen.
- † Laborers.
- † Truck drivers and helpers.
- † Others engaged directly in construction.

Number of other employees includes:

- † Supervisors above working foremen.
- † Office staff.
- † Executives.
- † Architects.
- † Personnel staff.
- † Engineers.
- † Accounting staff.
- † Purchasing agents.
- † Others engaged in nonconstruction activities.

		Number of employees for pay periods including the 12th of -							
		4	March 2007	5	June 2007	6	September 2007	7	December 2007
1.	Number of construction workers . . . . . 029								
2.	Number of other employees . . . . . 055								
3.	TOTAL (Add lines A1 and A2) . . . . . 057								

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

		2007		
		\$ Bil.	M il.	Thou.
1.	Annual payroll			
a.	Construction workers . . . . . 0301			
b.	Other employees . . . . . 0302			
c.	TOTAL (Add lines B1a and B1b) . . . . . 0300			
2.	First quarter payroll (January-March 2007) . . . . . 0310			
C.	Employer's cost for fringe benefits			
1.	Legally required fringe benefits (Include employer payments for Social Security, Medicare, unemployment compensation, workmen's compensation, and State disability programs, if required.) . . . . . 0221			
2.	Voluntarily provided fringe benefits (Include such items as payments for life insurance, medical insurance, pensions, welfare, benefits, and union-negotiated benefits.) . . . . . 0222			
3.	TOTAL (Add lines C1 and C2) . . . . . 0220			

8 Not Applicable.

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**9** VALUE OF INVENTORIES

Report inventories for materials and supplies, regardless of where held, owned by this establishment as of December 31. (Exclude work-in-progress and finished units.) . . . . . 0462

Mark "X" if None

End of 2007		
\$ Bil.	M il.	Thou.

Mark "X" if None

End of 2006		
\$ Bil.	M il.	Thou.

**10** - **12** Not Applicable.

**13** ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION

(Do not include land. See information sheet(s) for additional information.)

- A. Gross value of depreciable assets (usually original cost) at the beginning of the year. . . . . 0500
- B. Capital expenditures for (new and used) depreciable assets. . . . . 0520
- C. Gross value of depreciable assets sold, retired, scrapped, destroyed, etc. . . . . 0510
- D. Gross value of depreciable assets (usually original cost) at the end of the year (Add lines A and B minus C) . . . . . 0505
- E. Depreciation charges for the year . . . . . 0540

Mark "X" if None

2007		
Estimates are acceptable		
\$ Bil.	M il.	Thou.

**14** RENTAL PAYMENTS

(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.) . . . . . 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

Mark "X" if None

2007		
\$ Bil.	M il.	Thou.

**15** Not Applicable.

**16** SELECTED EXPENSES

A. Cost of materials, subcontract work, fuels, and electricity (include current account expenses normally considered as cost of work performed or job-specific costs.)

Mark "X" if None

- 1. Cost of materials, parts, and supplies. . . . . 0421   
 Include:  
 † All job-site, office, and construction materials and supplies.  
 † Cost of materials purchased by this establishment for subcontractors.  
 Exclude:  
 † Cost of manufacturing and production machinery, furniture, etc. (any item installed that is not part of a building structure).
- 2. Cost of construction work subcontracted out to others (Exclude the cost of materials purchased by this establishment for subcontractors.) . . . . . 0423
- 3. Cost of fuels for heat, power, lubricants
  - a. Natural gas and manufactured gas (propane) . . . . . 0431
  - b. Gasoline and diesel fuel - ON highway (not at site). . . . . 0432
  - c. Gasoline and diesel fuel - OFF highway (at site) . . . . . 0433
  - d. All other fuels and lubricants, including heating oils, lubricating oils, and greases . . . . . 0434
- 4. Cost of electricity . . . . . 0425

2007		
\$ Bil.	M il.	Thou.

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

16 SELECTED EXPENSES - Continued

B. Other operating expenses (Exclude expenses reported elsewhere.)

	Mark "X" if None	2007		
		\$ Bil.	Mill.	Thou.
1. Temporary staff and leased employee expense - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. (Include all charges for payroll, benefits, and services.) . . . . . 0176	<input type="checkbox"/>			
2. Expensed equipment - Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors). (Report packaged software on line B3. Report leased and rented equipment in 2, line B.) . . . . . 0444	<input type="checkbox"/>			
3. Expensed purchases of software - Purchases of prepackaged, custom coded or vendor customized software. (Include software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.) . . . . . 0188	<input type="checkbox"/>			
4. Data processing and other purchased computer services (Include computer facilities management services, computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training. Exclude expensed integrated systems, repair and maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone).) . . . . . 0198	<input type="checkbox"/>			
5. Purchased communication services - Telephone, cellular, and fax services; computer-related communications (e.g., Internet, connectivity, online) and other wired and wireless communication services . . . . . 0402	<input type="checkbox"/>			
6. Purchased repairs and maintenance to buildings and/or machinery and equipment (Exclude materials, parts, and supplies used for repairs and maintenance performed by this firm's employees.) . . . . . 0394	<input type="checkbox"/>			
7. Water, sewer, refuse removal, and other utility payments (Include the costs of hazardous waste removal. If the cost of these utilities is included in a lease or rental payment, report in 2, line A.) . . . . . 0407	<input type="checkbox"/>			
8. Purchased advertising and promotional services (Include marketing and public relations services.) . . . . . 0405	<input type="checkbox"/>			
9. Purchased professional and technical services (Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other professional services. Exclude salaries paid to your own employees for these services.) . . . . . 0216	<input type="checkbox"/>			
10. Governmental taxes and license fees - Payments to government agencies for taxes and licenses. (Include business and property taxes. Exclude income taxes.) . . . . . 0396	<input type="checkbox"/>			
11. All other operating expenses - All other operating expenses not reported elsewhere. (Exclude purchases of merchandise for resale and nonoperating expenses.) - Specify <u>7</u>				
0897 <input type="text" value=""/> 0397	<input type="checkbox"/>			
12. TOTAL (Add lines B1 through B11) . . . . . 0449	<input type="checkbox"/>			

17 - 21 Not Applicable.

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**22** DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Kind of business  
Percent of the total reported in **5**, line C due to -

**A.** Construction work activities

Bridge and ship painting contractor (except lane painting for bridges) . . . . .

Painting contractor . . . . .

Wall covering or removal contractor . . . . .

Mable, granite, or slate contractor, exterior . . . . .

Masonry contractor: brick, block, or stone (except brick paving) . . . . .

Stucco contractor . . . . .

Acoustical contractor . . . . .

Drywall contractor . . . . .

Insulation contractor (except boiler, pipe, or ductwork) . . . . .

Plastering, lathing, or fresco contractor . . . . .

Mable, granite, or slate contractor, interior . . . . .

Tile, terrazzo, or mosaic contractor . . . . .

Finish carpentry contractor . . . . .

Framing contractor . . . . .

Garage door and overhead door installation contractor, residential-type . . . . .

Carpet laying or removal contractor . . . . .

Flooring contractor, including wood, resilient, and computer flooring . . . . .

Specialty sheet metal contractor, including metal ceiling, panel, or shelving installation . . . . .

Boiler, pipe, or ductwork insulation contractor . . . . .

Waterproofing and weather stripping contractor . . . . .

Other kinds of construction - Specify **7**

0712  9000

**B.** Other business activity

Engineering services . . . . .

Manufacturing—products manufactured and sold to others . . . . .

Rental of construction machinery or equipment to others, without an operator . . . . .

Wholesale trade . . . . .

Code	2007	
	Percent of total business done	
	0713	0711
8320		0%
8321		0%
8322		0%
8140		0%
8141		0%
8143		0%
8310		0%
8311		0%
8312		0%
8313		0%
8340		0%
8341		0%
8350		0%
8130		0%
8351		0%
8330		0%
8331		0%
8390		0%
8292		0%
8391		0%
9000		0%
9914		0%
9915		0%
9919		0%
9922		0%

CONTINUE WITH **22** ON PAGE 7 FOR ADDITIONAL TYPES OF ACTIVITY

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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

B. Other business activity - Continued

Retail trade . . . . .

Other business activities - Specify **7**

0712 [ ]

C. TOTAL (Percentages reported in A and B should equal 100%) . . . . .

Code	2007	
	Percent of total business done	
0713	0711	
9925		%
9929		%
8005	100	%

**23** TYPE OF CONSTRUCTION

Percent of the construction work reported in **5**, line A involved in the following types of construction.

(Report these percentages in column (1) below on pages 8 and 9. IMPORTANT: Complete column (1) on both pages before completing columns (2) through (4). Then in columns (2), (3), and (4) allocate the percent for each line according to the three categories of construction. The sum of columns (2) through (4) should equal the entry in column (1). Refer to the information sheet(s) for a step by step example and for definitions of the three categories of construction.)

Type of construction	Code	2007							
		Percent of construction work		Categories of construction					
		0614	(1)	New construction		Additions, alterations, or reconstruction		Maintenance and repair work	
0615	0616	0614	(1)	0611	(2)	0612	(3)	0613	(4)
<b>A. BUILDING CONSTRUCTION</b>									
Single-family houses, detached . . . . .	316		%		%		%		%
Single-family houses, attached . . . . .	317		%		%		%		%
Apartment buildings (2 or more units), such as rentals, apartment-type condominiums and cooperatives . . . . .	318		%		%		%		%
Dormitories and barracks . . . . .	319		%		%		%		%
Manufacturing and industrial warehouses . . . . .	321		%		%		%		%
Other manufacturing and industrial buildings, such as factories, assembly plants, and industrial research laboratories . . . . .	323		%		%		%		%
Hotels, motels, and tourist cabins . . . . .	324		%		%		%		%
Office buildings . . . . .	325		%		%		%		%
Stores, restaurants, automobile service stations, parking garages, and other commercial buildings . . . . .	326		%		%		%		%
Commercial warehouses, such as distribution buildings and ministorage . . . . .	327		%		%		%		%
Religious buildings . . . . .	328		%		%		%		%
Educational buildings . . . . .	329		%		%		%		%
Health care and institutional buildings . . . . .	331		%		%		%		%
Public safety buildings such as prisons, police, and fire stations . . . . .	332		%		%		%		%
Farm buildings, nonresidential . . . . .	333		%		%		%		%

CONTINUE WITH **23** ON PAGE 8 FOR ADDITIONAL TYPES OF CONSTRUCTION

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23 TYPE OF CONSTRUCTION - Continued

Type of construction	Code	2007								
		Percent of construction work		Categories of construction						
				New construction		Additions, alterations, or reconstruction	Maintenance and repair work			
		0614	(1)	0611	(2)	0612	(3)	0613	(4)	
0615										
<b>A. BUILDING CONSTRUCTION - Continued</b>										
Amusement, social, and recreational buildings . . . . .	334		%		%		%		%	
Other building construction - Specify ↴										
0615	338		%		%		%		%	
Bridges and elevated highways . . . . .	346		%		%		%		%	
Tunnels . . . . .	347		%		%		%		%	
Sewers, sewer lines, septic systems, and related facilities	351		%		%		%		%	
Water mains, storage, wells, and related facilities . . . . .	352		%		%		%		%	
Oil and gas pipelines, pumping stations, storage tanks, and mains . . . . .	353		%		%		%		%	
Power and communication transmission lines, cables, towers, and related facilities . . . . .	354		%		%		%		%	
Power and cogeneration plants, except hydroelectric . . . . .	356		%		%		%		%	
Power plants, hydroelectric . . . . .	357		%		%		%		%	
Chemical (except petrochemical) complexes/plants, blast furnaces, and mining appurtenances . . . . .	359		%		%		%		%	
Sewage and water treatment plants . . . . .	361		%		%		%		%	
Petrochemical plants and petroleum refineries . . . . .	364		%		%		%		%	
Mass transit, including railroad construction . . . . .	366		%		%		%		%	
Conservation and development construction, such as dams, drainage canals, and flood control projects . . . . .	368		%		%		%		%	
Harbor and port facilities . . . . .	373		%		%		%		%	
Marine construction, such as dredging, navigational channels, and locks . . . . .	374		%		%		%		%	
Swimming pools . . . . .	375		%		%		%		%	
Decks, residential type . . . . .	376		%		%		%		%	
Fencing . . . . .	378		%		%		%		%	
Outdoor recreational areas, such as outdoor athletic fields, courts, golf courses, and camp grounds . . . . .	381		%		%		%		%	
Ships . . . . .	384		%		%		%		%	
<b>B. NONBUILDING CONSTRUCTION</b>										
Other nonbuilding construction - Specify ↴										
0615	395		%		%		%		%	
<b>C. TOTAL value of construction work done in 2007 (Sum columns 2 through 4 should equal 100% in column 1). . . . .</b>										
	999	100	%		%		%		%	

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

24 and 25 Not Applicable.

26 SPECIAL INQUIRIES

A. OWNERSHIP OF CONSTRUCTION PROJECTS

Percent of the construction work reported in 5, line A on projects owned by the following:

- 1. Private businesses and individuals . . . . . 9000
- 2. State and local governments . . . . . 9001
- 3. Federal government . . . . . 9002
- 4. TOTAL (Percentages reported in lines A1 through A3 should equal 100% .) . . . . .

2007	
Percent	
	%
	%
	%
1 0 0	%

B. CONSTRUCTION WORK DONE AS A SUBCONTRACTOR

Percent of the amount you reported in 5, line A which represents work you did for other contractors or builders

(Enter "0" if you did not subcontract work from other contractors or builders.) . . . . . 9100

2007	
Percent	
	%

CONTINUE WITH 26 ON PAGE 10



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26 SPECIAL INQUIRIES - Continued

C. CONSTRUCTION WORK DONE BY STATE

Percent of the construction work reported in 5, line A which occurred in each state  
(The sum of the percentages reported should equal 100%.)

	State	2007	
		Percent	%
9201	Alabama		%
9202	Alaska		%
9204	Arizona		%
9205	Arkansas		%
9206	California		%
9208	Colorado		%
9209	Connecticut		%
9210	Delaware		%
9211	District of Columbia		%
9212	Florida		%
9213	Georgia		%
9215	Hawaii		%
9216	Idaho		%
9217	Illinois		%
9218	Indiana		%
9219	Iowa		%
9220	Kansas		%
9221	Kentucky		%

	State	2007	
		Percent	%
9222	Louisiana		%
9223	Maine		%
9224	Maryland		%
9225	Massachusetts		%
9226	Michigan		%
9227	Minnesota		%
9228	Mississippi		%
9229	Missouri		%
9230	Montana		%
9231	Nebraska		%
9232	Nevada		%
9233	New Hampshire		%
9234	New Jersey		%
9235	New Mexico		%
9236	New York		%
9237	North Carolina		%
9238	North Dakota		%
9239	Ohio		%

	State	2007	
		Percent	%
9240	Oklahoma		%
9241	Oregon		%
9242	Pennsylvania		%
9244	Rhode Island		%
9245	South Carolina		%
9246	South Dakota		%
9247	Tennessee		%
9248	Texas		%
9249	Utah		%
9250	Vermont		%
9251	Virginia		%
9253	Washington		%
9254	West Virginia		%
9255	Wisconsin		%
9256	Wyoming		%
	United States	100	%

D. FRANCHISE

Was this establishment operating under a trademark authorized by a franchisor in 2007?  
(Mark "X" only ONE box.)

- 0237  Yes - franchisee owned establishment
- 0238  Yes - franchisor owned establishment
- 0239  No

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

27 - 29 Not Applicable.

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?

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-mail address	Date completed	Month	Day	Year

Thank you for completing your 2007 ECONOMIC CENSUS form .

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

23803117