

2006 Annual Survey of State Administered Public-Employee Retirement Systems

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

In correspondence pertaining to this report, please refer to the ID printed above your address



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RETURN TO:
U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47132-0001

If you have any questions,
please call 1-888-529-1963
weekdays, 8:00 a.m. to
5:30 p.m. EST.

Questions can also be
e-mailed to:
govs.retire@census.gov



STATE EMPLOYEES RETIREMENT SYSTEM
PO BOX 13
SOMECITY XX 12345-6789

Please correct any errors in name, address, or ZIP Code.

GENERAL INSTRUCTIONS

Before filling out this form, please read carefully each part and all related definitions and instructions.

Note especially:

1. Report **separately** for Defined Benefit, Defined Contribution, and Postemployment Healthcare plans.
2. Report corporate stocks and bonds at **market value**, and adhere to Governmental Accounting Standards Board (GASB) guidelines when reporting gains and losses on investments.
3. Report figures relating to all accounts and reserves of your system, including amounts for retirement, disability, survivors, and other benefits, as well as any amounts for administration of the system.
Report in whole dollars. Exclude transfers between reserves of the system, and also any investment transactions relating to loans to system members.
4. Do **not** delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.
5. Use a black or blue ball point pen.

RESPONDENT INFORMATION:

Name of person completing report - *Please print*

Title of person completing report - *Please print*

Area Code	Telephone Number	Ext.

E-mail Address - *Please print*

Part 1 PLAN INFORMATION FOR DEFINED BENEFIT PLANS

A. Are new employees covered under this pension plan? Yes No
B. Fiscal Year Ending Date

Mark (X) in the appropriate box below to indicate the **ending date of your system's fiscal year**. Please report figures for your system's fiscal year that ended between July 1, 2006 and June 30, 2007.

Report for this fiscal year even though a more recent one may be available.

2006

2007

July	October	January	April
August	November	February	May
September	December	March	June

Please continue on the next page

Part 2**RECEIPTS/PAYMENTS FOR DEFINED BENEFIT PLANS**

A. RECEIPTS DURING FISCAL YEAR - Report receipts during the fiscal year indicated in Part 1. **Exclude amounts received from repayment of loans made to members.**

1. EMPLOYEE CONTRIBUTIONS - Total amounts contributed by all member employees or withheld from their salaries for financing benefits.	Employee Contributions
a. State employees - From employees of the state government, including employees of state colleges and other state institutions and agencies	X02 .00
b. Local employees - From employees of the counties, cities, local public schools, and other local government agencies	X01 .00
2. EMPLOYER (GOVERNMENT) CONTRIBUTIONS - Total amounts received from state and local governments for financial support of your system, including any taxes credited directly to the system.	Government Contributions
a. State government contributions - From state government, including state colleges and other state institutions and agencies.	Z99 .00
1. State contributions to own system on behalf of state employees. .	V87 .00
2. State contributions to own system on behalf of local employees. .	X06 .00
3. Total State Contributions - Sum of items 2a1 and 2a2	X05 .00
b. Local government contributions - From counties, cities, local public schools, and other local government agencies	Z79 .00
3. EARNINGS ON INVESTMENTS - Interest, dividends, rents, and other earnings on investments. Exclude any recorded profits or recorded losses on investment transactions and report in Section B below.	Investment Earnings and Other Receipts
a. Rentals from the state government.....	Z98 .00
b. Interest Earnings	Z71 .00
c. Dividend Earnings.....	Z72 .00
d. Other Investment Earnings Please specify.....	Z73 .00
e. Total Earnings on Investments - Sum of items 3a through 3d	X08 .00
4. OTHER RECEIPTS - Private gifts or donations, an the like. Specify..	Z95 .00
B. NET GAINS/LOSSES ON INVESTMENTS IN MARKET/FAIR VALUE - Include both realized and unrealized gains (losses). .	Net Gains (Losses)
Z96	Z91 .00
C. PAYMENTS DURING FISCAL YEAR - Exclude amounts paid out for purchase of investments and for loans made to members.	Payments
1. BENEFIT PAYMENTS - Report annual amounts.	
a. Retirement Benefits	Z13 .00
b. Disability Benefits	Z14 .00
c. Survivor Benefits.....	Z15 .00
d. Other Benefits	Z16 .00
e. Total Benefits Paid - Sum of items 1a through 1d	X11 .00
2. WITHDRAWALS - Amounts paid to employees, former employees, or their survivors, representing return of contributions made by employees during the period of their employment, and any interest on such amounts. .	X12 .00
3. ADMINISTRATIVE EXPENSES - Include investment fees.....	Z93 .00

4. OTHER PAYMENTS - Specify.

..... Z90

.00

Please continue on the next page

Part 3**HOLDINGS AND INVESTMENTS FOR DEFINED BENEFIT PLANS****A. CASH AND SHORT-TERM INVESTMENTS**

	Cash and Short-term Investments
1. CASH ON HAND AND DEMAND DEPOSITS.....	Z88 .00
2. TIME OR SAVINGS DEPOSITS - Include certificates of deposit	Z87 .00
3. ALL OTHER SHORT-TERM INVESTMENTS, including securities in repurchase agreements, commercial and finance company paper and bankers acceptances, and miscellaneous money market funds.....	Z68 .00
4. TOTAL CASH AND SHORT-TERM INVESTMENTS - Sum of items A1 through A3.....	X21 .00

B. FEDERAL GOVERNMENT SECURITIES

	Federal Government Securities
1. FEDERAL TREASURY SECURITIES - Obligations of U.S. Treasury (including short-term notes) and Federal Financing Bank.....	X89 .00
2. FEDERAL AGENCY SECURITIES - Bonds and mortgage-backed securities (where applicable) issued by CCC, Export-Import Bank, FHA, GNMA, Postal Service, and TVA. <i>Report directly held mortgages in Section E below</i>	X33 .00
3. TOTAL FEDERAL GOVERNMENT SECURITIES - Sum of items B1 and B2.....	X30 .00

C. CORPORATE BONDS

	Corporate Bonds
1. FEDERALLY-SPONSORED AGENCIES - Bonds and mortgage-backed securities (where applicable) issued by FHLB, FHLMC, FNMA, Farm credit banks, and SLMA	Z62 .00
2. CORPORATE BONDS, OTHER - Include debentures, convertible bonds, and railroad equipment certificates	Z63 .00
3. TOTAL CORPORATE BONDS - Sum of items C1 and C2.....	Z77 .00

D. CORPORATE STOCKS -

	Corporate Stocks
Include common and preferred stocks, and warrants.....	Z78 .00

E. MORTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, to be reported at B2, C1, or C2; also **exclude** directly held real property to be reported at item G1

Mortgages Held Directly
X42 .00

F. OTHER SECURITIES

	Other Securities
1. INVESTMENTS HELD IN TRUST BY OTHER AGENCIES - Include funds administered by private agencies, guaranteed investment accounts, and your share of funds in governmental investment accounts.....	Z84 .00
2. STATE AND LOCAL GOVERNMENT SECURITIES	X35 .00
3. FOREIGN AND INTERNATIONAL SECURITIES - Include corporate equities and corporate stocks.....	Z70 .00
4. OTHER SECURITIES - Include shares held in mutual funds, conditional sales contracts, direct loans, loans to members, etc. Specify.....	Z83 .00
5. TOTAL OTHER SECURITIES - Sum of items F1 through F4	X44 .00

G. OTHER INVESTMENTS

	Other Investments
1. REAL PROPERTY - Report only directly held property; report property held in investment trusts and in pooled or partnership agreements at G2	X46 .00
2. OTHER INVESTMENTS - Include venture capital, partnerships, real estate investment trusts, and leveraged buy outs - Specify.....	X47 .00
3. TOTAL OTHER INVESTMENTS - Sum of items G1 and G2.....	Z82 .00

H. TOTAL CASH AND SECURITY HOLDINGS OF PUBLIC EMPLOYEE RETIREMENT SYSTEM -

Holdings and Investments
[Redacted]

Sum of items A through G

Z81

.00

Please continue on the next page

Part 4**MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS**

Please report the figures requested below, as of the last month of your fiscal year reported on page 1, or the month nearest to that permitted by your records. If detailed figures are not available for an item, please enter an estimate and mark it with an asterisk (*).

A. MEMBERS OF YOUR RETIREMENT SYSTEM - Exclude beneficiaries.	Number of Participants	
1. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans.		
a. Employed by your state government (including state institutions and agencies)	Z76	
b. Employed by local governments (including local agencies)	Z75	
c. Total active members - Sum of items 1a and 1b	Z01	
2. INACTIVE MEMBERS - Former employees and employees on military or other extended leave without pay having retained retirement credits, but not currently receiving retirement benefit payments.	Z02	
B. BENEFICIARIES RECEIVING PERIODIC BENEFIT PAYMENTS DURING MONTH - Please provide estimates if detailed data is not available.	Number of Payees (a)	Amount paid during month <i>Omit cents</i> (b)
1. Former active members of system, retired on account of age or service	Z03	Z08 .00
2. Former active members of system, retired on account of disability	Z04	Z09 .00
3. Survivors of deceased former active members	Z05	Z10 .00
C. RECIPIENTS OF LUMP-SUM PAYMENTS DURING MONTH REPORTED	Number of Payees (a)	Amount paid during month <i>Omit cents</i> (b)
1. Withdrawals and other one-time payments (other than loans) made to present or former members of system	Z06	Z11 .00
2. Lump-sum (nonrecurrent) payments made to survivors of deceased former active members	Z07	Z12 .00

Part 5**LIABILITIES FOR DEFINED BENEFIT PLANS**

A. Please provide an actuarial estimate of your pension fund's total liabilities (present value of current and future benefits).

Beginning of reference year Z17 .00 End of reference year ... Z18 .00

B. Please provide an actuarial estimate of accrued liabilities for plan benefits for the reference year.....

Z19 .00

C. Please check the actuarial cost method used to produce the estimates above.

Entry age or entry age normal If other, please specify

D. Please indicate the discount rate used in present value calculations.

.....

E. Are future benefits indexed to inflation? Please check the appropriate selection.

Greater than CPI CPI Less than CPI

Please continue on the next page

Part 6**PLAN INFORMATION FOR DEFINED CONTRIBUTION PLANS**

A. In addition to the defined benefit plan reported here, does your system offer a defined contribution plan?
If not, skip to Part 10. Yes No

B. Are new employees covered under this pension plan? Yes No

C. List all defined contribution plans that your system offers below. Report summary data combining all defined contribution plans.

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Part 7**RECEIPTS/PAYMENTS FOR DEFINED CONTRIBUTION PLANS**

A. **RECEIPTS DURING FISCAL YEAR** - Report receipts during the fiscal year indicated in Part 1. **Exclude amounts received from repayment of loans made to members.**

1. **EMPLOYEE CONTRIBUTIONS** - Total amounts contributed by all member employees or withheld from their salaries for financing benefits.

	Employee Contributions
a. State employees - From employees of the state government, including employees of state colleges and other state institutions and agencies	X02DC .00
b. Local employees - From employees of the counties, cities, local public schools, and other local government agencies	X01DC .00

2. **EMPLOYER (GOVERNMENT) CONTRIBUTIONS** - Total amounts received from state and local governments for financial support of your system, including any taxes credited directly to the system.

	Government Contributions
a. State government contributions - From state government, including state colleges and other state institutions and agencies.	
1. State contributions to own system on behalf of state employees..	Z99DC .00
2. State contributions to own system on behalf of local employees..	V87DC .00
3. Total State Contributions - Sum of items 2a1 and 2a2	X06DC .00
b. Local government contributions - From counties, cities, local public schools, and other local government agencies	X05DC .00

3. **EARNINGS ON INVESTMENTS** - Interest, dividends, rents, and other earnings on investments. Exclude any recorded profits or recorded losses on investment transactions and report in Section B below.

	Investment Earnings and Other Receipts
a. Rentals from the state government.....	Z98DC .00
b. Interest Earnings	Z71DC .00
c. Dividend Earnings.....	Z72DC .00
d. Other Investment Earnings Please specify.....	Z73DC .00
e. Total Earnings on Investments - Sum of items 3a through 3d	X08DC .00

4. **OTHER RECEIPTS** - Private gifts or donations, an the like. Specify..

	Net Gains (Losses)
B. NET GAINS/LOSSES ON INVESTMENTS IN MARKET/FAIR VALUE - Include both realized and unrealized gains (losses).	Z96DC .00

C. **PAYMENTS DURING FISCAL YEAR** - **Exclude** amounts paid out for purchase of investments and for loans made to members.

1. **WITHDRAWALS** - Amounts paid to employees, former employees, or their survivors, representing return of contributions made by employees during the period of their employment, and any interest on such amounts..

X12DC .00

2. **ADMINISTRATIVE EXPENSES** - Include investment fees.

Z93DC .00

3. **OTHER PAYMENTS** - Specify....

Z90DC .00

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Part 8**HOLDINGS AND INVESTMENTS FOR DEFINED CONTRIBUTION PLANS**

		Cash and Short-term Investments
A. CASH AND SHORT-TERM INVESTMENTS		
1. CASH ON HAND AND DEMAND DEPOSITS	Z88DC	.00
2. TIME OR SAVINGS DEPOSITS - Include certificates of deposit	Z87DC	.00
3. ALL OTHER SHORT-TERM INVESTMENTS , including securities in repurchase agreements, commercial and finance company paper and bankers acceptances, and miscellaneous money market funds.	Z68DC	.00
4. TOTAL CASH AND SHORT-TERM INVESTMENTS - Sum of items A1 through A3.....	X21DC	.00
B. FEDERAL GOVERNMENT SECURITIES		Federal Government Securities
1. FEDERAL TREASURY SECURITIES - Obligations of U.S. Treasury (including short-term notes) and Federal Financing Bank.	Z89DC	.00
2. FEDERAL AGENCY SECURITIES - Bonds and mortgage-backed securities (where applicable) issued by CCC, Export-Import Bank, FHA, GNMA, Postal Service, and TVA. <i>Report directly held mortgages in Section E below</i>	X33DC	.00
3. TOTAL FEDERAL GOVERNMENT SECURITIES - Sum of items B1 and B2.....	X30DC	.00
C. CORPORATE BONDS		Corporate Bonds
1. FEDERALLY-SPONSORED AGENCIES - Bonds and mortgage-backed securities (where applicable) issued by FHLB, FHLMC, FNMA, Farm credit banks, and SLMA	Z62DC	.00
2. CORPORATE BONDS, OTHER - Include debentures, convertible bonds, and railroad equipment certificates	Z63DC	.00
3. TOTAL CORPORATE BONDS - Sum of items C1 and C2.....	Z77DC	.00
D. CORPORATE STOCKS - Include common and preferred stocks, and warrants.....	Z78DC	.00
E. MORTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, to be reported at B2, C1, or C2; also exclude directly held real property to be reported at item G1	X42DC	.00
F. OTHER SECURITIES		Corporate Stocks
1. INVESTMENTS HELD IN TRUST BY OTHER AGENCIES - Include funds administered by private agencies, guaranteed investment accounts, and your share of funds in governmental investment accounts.	Z84DC	.00
2. STATE AND LOCAL GOVERNMENT SECURITIES	X35DC	.00
3. FOREIGN AND INTERNATIONAL SECURITIES - Include corporate equities and corporate stocks.....	Z70DC	.00
4. OTHER SECURITIES - Include shares held in mutual funds, conditional sales contracts, direct loans, loans to members, etc. Specify.....	Z83DC	.00
5. TOTAL OTHER SECURITIES - Sum of items F1 through F4	X44DC	.00
G. OTHER INVESTMENTS		Other Investments
1. REAL PROPERTY - Report only directly held property; report property held in investment trusts and in pooled or partnership agreements at G2	X46DC	.00
2. OTHER INVESTMENTS - Include venture capital, partnerships, real estate investment trusts, and leveraged buy outs - Specify.....	X47DC	.00
3. TOTAL OTHER INVESTMENTS - Sum of items G1 and G2.....	Z82DC	.00
H. TOTAL CASH AND SECURITY HOLDINGS OF PUBLIC EMPLOYEE RETIREMENT SYSTEM -		Holdings and Investments

Sum of items A through G

X81DC

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Please continue on the next page

Please report the figures requested below, as of the last month of your fiscal year reported on page 1, or the month nearest to that permitted by your records. If detailed figures are not available for an item, please enter an estimate and mark it with an asterisk (*).

MEMBERS OF YOUR RETIREMENT SYSTEM - Exclude beneficiaries.	Number of Participants
1. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans.	Z01DC [REDACTED]
2. INACTIVE MEMBERS - Former employees and employees on military or other extended leave without pay having retained retirement credits, but not currently receiving retirement benefit payments.	Z02DC [REDACTED]

Part 10 PLAN INFORMATION FOR POSTEMPLOYMENT HEALTHCARE PLANS

A. In addition to the defined benefit and/or defined contribution plans reported here, does your system offer a postemployment healthcare plan? If not, skip to Part 1 Yes No

B. Are new employees covered under this pension plan? Yes No

C. List all postemployment healthcare plans that your system offers below. Report summary data combining all postemployment healthcare plans.

Part 11 RECEIPTS/PAYMENTS FOR POSTEMPLOYMENT HEALTHCARE PLANS

A. RECEIPTS DURING FISCAL YEAR - Report receipts during the fiscal year indicated in Part 1. Exclude amounts received from repayment of loans made to members.

1. EMPLOYEE CONTRIBUTIONS - Total amounts contributed by all member employees or withheld from their salaries for financing benefits.

	Employee Contributions
a. State employees - From employees of the state government, including employees of state colleges and other state institutions and agencies	X02HC .00
b. Local employees - From employees of the counties, cities, local public schools, and other local government agencies	X01HC .00

2. EMPLOYER (GOVERNMENT) CONTRIBUTIONS - Total amounts received from state and local governments for financial support of your system, including any taxes credited directly to the system.

	Government Contributions
a. State government contributions - From state government, including state colleges and other state institutions and agencies.	
1. State contributions to own system on behalf of state employees ..	Z99HC .00
2. State contributions to own system on behalf of local employees ..	V87HC .00
3. Total State Contributions - Sum of items 2a1 and 2a2	X06HC .00
b. Local government contributions - From counties, cities, local public schools, and other local government agencies	X05HC .00

3. EARNINGS ON INVESTMENTS - Interest, dividends, rents, and other earnings on investments. Exclude any recorded profits or recorded losses on investment transactions and report in Section B below.

	Investment Earnings and Other Receipts
a. Rentals from the state government	Z98HC .00
b. Interest Earnings	Z71HC .00
c. Dividend Earnings	Z72HC .00
d. Other Investment Earnings Please specify	Z73HC .00
e. Total Earnings on Investments - Sum of items 3a through 3d	X08HC .00

4. OTHER RECEIPTS - Private gifts or donations, an the like. Specify. .

	Net Gains (Losses)
Z95HC .00	

B. NET GAINS/LOSSES ON INVESTMENTS IN MARKET/FAIR VALUE - Include both realized and unrealized gains (losses).

	Net Gains (Losses)
Z96HC .00	
Z91HC .00	

C. PAYMENTS DURING FISCAL YEAR - Exclude amounts paid out for purchase of investments and for loans made to members.

1. HEALTHCARE PREMIUMS TO INSURANCE CARRIERS

Z94HC .00

2. CLAIMS PAID

Z95HC .00

3. ADMINISTRATIVE EXPENSES - Include investment fees.

Z93HC .00

4. OTHER PAYMENTS - Specify. . . .

Z90HC

.00

Please continue on the next page

Part 12 HOLDINGS AND INVESTMENTS FOR POSTEMPLOYMENT HEALTHCARE PLANS

		Cash and Short-term Investments
A. CASH AND SHORT-TERM INVESTMENTS		Cash and Short-term Investments
1. CASH ON HAND AND DEMAND DEPOSITS	Z88HC	.00
2. TIME OR SAVINGS DEPOSITS - Include certificates of deposit	Z87HC	.00
3. ALL OTHER SHORT-TERM INVESTMENTS , including securities in repurchase agreements, commercial and finance company paper and bankers acceptances, and miscellaneous money market funds.	Z68HC	.00
4. TOTAL CASH AND SHORT-TERM INVESTMENTS - Sum of items A1 through A3.	X21HC	.00
B. FEDERAL GOVERNMENT SECURITIES		Federal Government Securities
1. FEDERAL TREASURY SECURITIES - Obligations of U.S. Treasury (including short-term notes) and Federal Financing Bank.	Z89HC	.00
2. FEDERAL AGENCY SECURITIES - Bonds and mortgage-backed securities (where applicable) issued by CCC, Export-Import Bank, FHA, GNMA, Postal Service, and TVA. <i>Report directly held mortgages in Section E below</i>	X33HC	.00
3. TOTAL FEDERAL GOVERNMENT SECURITIES - Sum of items B1 and B2.	X30HC	.00
C. CORPORATE BONDS		Corporate Bonds
1. FEDERALLY-SPONSORED AGENCIES - Bonds and mortgage-backed securities (where applicable) issued by FHLB, FHLMC, FNMA, Farm credit banks, and SLMA	Z62HC	.00
2. CORPORATE BONDS, OTHER - Include debentures, convertible bonds, and railroad equipment certificates	Z63HC	.00
3. TOTAL CORPORATE BONDS - Sum of items C1 and C2.....	Z77HC	.00
D. CORPORATE STOCKS - Include common and preferred stocks, and warrants.....	Z78HC	.00
E. MORTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, to be reported at B2, C1, or C2; also exclude directly held real property to be reported at item G1	X42HC	.00
F. OTHER SECURITIES		Other Securities
1. INVESTMENTS HELD IN TRUST BY OTHER AGENCIES - Include funds administered by private agencies, guaranteed investment accounts, and your share of funds in governmental investment accounts.	Z84HC	.00
2. STATE AND LOCAL GOVERNMENT SECURITIES	X35HC	.00
3. FOREIGN AND INTERNATIONAL SECURITIES - Include corporate equities and corporate stocks.....	Z70HC	.00
4. OTHER SECURITIES - Include shares held in mutual funds, conditional sales contracts, direct loans, loans to members, etc. Specify.....	Z83HC	.00
5. TOTAL OTHER SECURITIES - Sum of items F1 through F4	X44HC	.00
G. OTHER INVESTMENTS		Other Investments
1. REAL PROPERTY - Report only directly held property; report property held in investment trusts and in pooled or partnership agreements at G2	X46HC	.00
2. OTHER INVESTMENTS - Include venture capital, partnerships, real estate investment trusts, and leveraged buy outs - Specify.....	X47HC	.00
3. TOTAL OTHER INVESTMENTS - Sum of items G1 and G2.....	Z82HC	.00
H. TOTAL CASH AND SECURITY HOLDINGS OF PUBLIC EMPLOYEE RETIREMENT SYSTEM -		Holdings and Investments

Sum of items A through G

Z81HC

00

Please continue on the next page

Part 13**MEMBERSHIP AND BENEFITS FOR POSTEMPLOYMENT HEALTHCARE PLANS**

Please report the figures requested below, as of the last month of your fiscal year reported on page 1, or the month nearest to that permitted by your records. If detailed figures are not available for an item, please enter an estimate and mark it with an asterisk (*).

MEMBERS OF YOUR RETIREMENT SYSTEM - Exclude beneficiaries.	Number of Participants
1. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans.	
a. Members who are at least 65 years of age.	Z20HC
b. Members who are under the age of 65.	Z21HC
c. Total active members - Sum of items 1a and 1b	Z01HC
2. INACTIVE MEMBERS - Former employees and employees on military or other extended leave without pay having retained retirement credits, but not currently receiving retirement benefit payments.	
a. Inactive members who are at least 65 years of age.	Z22HC
b. Inactive members who are under the age of 65.	Z23HC
c. Total inactive members - Sum of items 1a and 1b	Z02HC

Part 14**REMARKS**

Thank you for your report. Please return to:

U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47132-0001

This form has been approved by the Office of Management and Budget (OMB) and has been given the number XXXX-XXXX. Please note that we have displayed this number in the upper right hand corner of this form. Display of this number confirms that we have approval from OMB to conduct this survey. If this number were not displayed, we could not request your participation in this survey.

Please note that this is a national form that applies to governments with wide differences in size of their service areas, the amount of population served, and the extent and complexity of their financial accounts. We estimate public reporting burden for this collection of information to vary from 1.5 to 8.0 hours per response, with an average of 4.0 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:
Paperwork Project 0607-0585, U.S. Census Bureau, 4700 Silver Hill Road, Stop 1500, Washington, D.C. 20233-1500.

You may e-mail comments to Paperwork@census.gov; use "Paperwork Project XXXX-XXXX" as the subject.

Census Use Only

BEG	REV	EXP	END
REP	DIFF	V98	