



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

FORM  
**E-1** (08-12-2011)

**2012 CENSUS OF GOVERNMENTS  
SURVEY OF PUBLIC EMPLOYMENT & PAYROLL  
March 2012 - State Agencies**

OMB No. 0607-0452: Approval Expires 04/30/2013

**DUE DATE:**

[Empty box for due date]

**RETURN TO:**

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

**If you have any questions,  
please call 1-800-642-4901  
Weekdays, 7am to 5pm EST.**

**Questions may also be  
emailed to:  
govs.employ@census.gov**

**In correspondence  
pertaining to this report,  
please refer to the User ID  
below the address box.**

**REPORT ONLINE:** It's fast and secure. Respond to this survey via the Internet at the following web address using the supplied User ID and Password: <https://respond.census.gov/aspep>

**User ID:**

[Empty box for User ID]

**Password:**

[Empty box for Password]

**1 Is your addressee title/department and mailing address the same as shown in the address label?**

Yes - Go to **2**

No - Enter correct information below

Addressee Title or Department

[Empty box for Addressee Title or Department]

Street 1

[Empty box for Street 1]

Street 2

[Empty box for Street 2]

City

[Empty box for City]

State

[Empty box for State]

Zip Code

[Empty box for Zip Code]



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**PART 1 – FULL-TIME EMPLOYEES STANDARD WEEKLY HOURS**

**2 On average, how many hours per week do the majority of your full-time employees work?**

**Include**

- Persons paid to work the number of hours that represents regular, full-time employment.
- Temporary or seasonal employees who are working the number of hours that represents regular, full-time employment.
- Officials paid on salary basis; by fees or commissions; on a per meeting basis; or a flat sum quarterly, semiannually, or annually.

**Exclude**

- Employees on unpaid leave, unpaid officials, pensioners, and contractors and their employees.

Mark "X" only one box.

A  40 hours or more      C  34 to 37.4 hours      E  30 to 31.9 hours  
 B  37.5 to 39.9 hours      D  32 to 33.9 hours      F  No Full-Time Employees

**PART 2 – EMPLOYEES, PAYROLL, AND PART-TIME HOURS**

**3 For each applicable pay interval, what were the TOTAL number of employees and TOTAL gross payroll amounts for the pay periods which include MARCH 12, 2012 for both full-time and part-time employees? Please also report hours paid for each applicable pay interval for part-time employees.**

**Include**

- Salaries, wages, fees, or commissions.
- Amounts withheld for taxes, employee contributions to retirement systems, etc.
- An estimate of hours worked during the pay interval for part-time employees, not compensation on an hourly basis.
- Part-time employees working less than the regular, full-time workweek.
- Current employees whether paid from the general fund or special funds.

**Exclude**

- Lump sum payments and the value of living quarters and subsistence allowances furnished to employees.

**Do not report**

- Cumulative salaries since the beginning of the calendar or fiscal year.
- Payroll amounts from last fiscal year.
- Employer costs of non-wage employee benefits such as workers' compensation, FICA, health insurance, etc.

	Full-Time Employees			Part-Time Employees		
	Number of Full-Time Employees	Gross Payroll		Number of Part-Time Employees	Gross Payroll	Hours Paid
<b>Example</b>						
Monthly . . . . .	27	\$ 9 4 5 0 0 .00		5	\$ 6 0 0 0 .00	600
Weekly . . . . .	15	\$ 8 2 5 0 .00			\$ .00	
Annually . . . . .		\$ .00		2	\$ 2 1 0 0 0 .00	625
Weekly . . . . .		\$ .00			\$ .00	
Bi-Weekly . . . . .		\$ .00			\$ .00	
Twice a Month . . . . .		\$ .00			\$ .00	
Monthly . . . . .		\$ .00			\$ .00	
Quarterly . . . . .		\$ .00			\$ .00	
Semi-Annually . . . . .		\$ .00			\$ .00	
Annually . . . . .		\$ .00			\$ .00	

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**PART 3 – REMARKS**

- 4 Use this space to:**
  - a) Explain any significant changes to employment or payroll occurring within the last year that would aid in understanding this report;
  - b) Describe any difficulties you encountered in completing this form;
  - c) List the groups of employees for which you were unable to supply information;
  - d) Provide contact information for other people who assisted you in completing this report.

**PART 4 – CERTIFICATION**

**5 This report is substantially accurate and has been prepared in accordance with the instructions.**

Name of person to contact about this report - Please print

Title of person to contact about this report - Please print

Area code and phone number

Extension

Area code and fax number

E-mail Address - Please print

Date form was completed

**Thank you for completing this form.**  
**Retain a copy of the completed questionnaire for your records.**

**NOTE:** The U.S. Census Bureau receives its authorization to conduct this survey from Title 13, United States Code, Section 161. This form has been approved by the Office of Management and Budget (OMB) and given the number 0607-0452. Please note the number displayed 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 was not displayed, under the Paperwork Reduction Act, we could not request your participation in this voluntary survey. Information provided on this questionnaire compiled from or customarily provided in public records are exempt from confidential treatment as cited in Title 13, United States Code, Section 9.

Please note that this is a national form that applies to governments with wide differences in the size of their service areas, the amount of population served, and the extent and complexity of their activities. Public reporting burden for this collection of information is estimated to vary from 10 minutes to 1½ hours per response, with an average of 20 minutes 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 0607-0452, U.S. Census Bureau, 4600 Silver Hill Road, AMSD-3K138, Washington, DC 20233. You may e-mail comments to [Paperwork@census.gov](mailto:Paperwork@census.gov); use Paperwork Project 0607-0452 as the subject.

