



Bureau of Labor Statistics
 U.S Department of Labor
 Data Collection Center
 dccaddress2
 dcccity2, dccst2 dcczip
 Phone: dccphone
 Fax: faxphone



January 30, 2021

Attn: Payroll Manager
 Con_Firm2
 Con_Address
 Con_City2, Con_State2 Con_Zipcode2

Dear Payroll Manager:

Thank you for providing your employment, payroll and hours data to the Current Employment Statistics program. Enclosed is your **FAX Report Form**. Please fill out the form **only** for the pay period which includes **the 12th of the month** and fax it to the fax number provided by [duedate2](#).

For each worksite with a pre-printed CES report number and worksite description, report all columns for All Workers and Production Workers separately. *Detailed definitions and instructions are provided on the next page.*

Your company was selected as a part of a scientific sample of businesses throughout the United States. The BLS will use the information you provide for statistical purposes only and will **hold the information in confidence** to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act (Title 5 of Public Law 107-347), the information you provide to the BLS **will not be disclosed in identifiable form without your informed consent**.

If any of the information pre-printed on this form is incorrect, or if you have any questions, please contact us at [dccphone2](#).

Sincerely,
 signature
 dccntct2
 Data Collection Center Manager

This report is authorized by law 29 U.S.C.2. We request your cooperation to make the results of this survey comprehensive, accurate, and timely. The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent.

Please note this report is mandatory in North Carolina, under Section 96-4(g) (l) of the North Carolina Employment Security Law; in Oregon, under the Oregon Revised Statute 657.660; in Washington, under the Revised Code of Washington sections 50.12.010, 50.12.070, and 50.12.180; and in South Carolina, under Section 41-29-120 of the Code of Laws of South Carolina (for firms employing more than twenty individuals).

We estimate that it will take an average of 10 minutes to complete this form each month including time to review instructions, search existing data sources, gather and maintain the necessary data, and complete and review this information. If you have any comments regarding these estimates or any other aspects of this survey, send them to the Bureau of Labor Statistics, Division of Current Employment Statistics (1220-0011), 2 Massachusetts Avenue, NE, Washington, DC 20212. You are not required to respond to the collection of information unless it displays a currently valid OMB control number. Form Approved OMB No. 1220-0111.

► **Our records show the following information for your firm:**

Con_Firm	Contact: Attn: Payroll Manager2
Con_Address	Tel: con_tel Ext: con_ext
Con_City, Con_State Con_Zipcode	Fax: con_fax

Please fax report to: faxphone2

► **Definitions for the Questions on the Next Page**

Column 1 **EMPLOYEE COUNT- ALL WORKERS**

Total number of persons in this pay group who worked or received pay for any part of the pay period that includes the 12th of the month.

Include:

- Executives and their staff
- Full-time and part-time workers
- Salaried officials of corporations
- Trainees
- Workers on active duty, if receiving pay from employer
- Workers on paid sick leave
- Workers on paid vacation
- Workers on other paid leave

Exclude:

- Outside contractors and their employees
- Pensioners
- Proprietors, owners, or partners of unincorporated firms
- Workers on active duty, if **not** receiving pay from employer
- Workers on leave without pay for entire pay period
- Workers on strike for entire pay period
- Unpaid family members

EMPLOYEE COUNT- PRODUCTION WORKERS

Number of "All Workers" defined above who are Production Workers. Production Workers include working supervisors or group leaders who may be "in charge" of some employees, but whose supervisory functions are only incidental to their regular work.

Include individuals working in:

Mining, quarrying, crude petroleum production, and natural gas production

- | | | | | |
|-----------------------|-----------------|--------------|----------------|---------------|
| ▪ Blasting | ▪ Drilling | ▪ Hauling | ▪ Maintenance | ▪ Shipping |
| ▪ Cleaning | ▪ Excavating | ▪ Hoisting | ▪ Storage | |
| ▪ Crushing | ▪ Flow | ▪ Inspection | ▪ Processing | ▪ Trucking |
| ▪ Development Control | | ▪ Pumping | ▪ Ventilation | |
| ▪ Drainage | ▪ Guard Service | ▪ Janitorial | ▪ Repair | ▪ Warehousing |
| | ▪ Handling | ▪ Loading | ▪ Rig Building | |

Logging industries

- Cutting Timber
- Transporting Timber
- Producing wood chips in the field

Exclude individuals working in:

- | | |
|-------------------------|------------------------------|
| ▪ Accounting or finance | ▪ Legal or medical positions |
| ▪ Advertising | ▪ Personnel |
| ▪ Cafeterias | ▪ Purchasing or sales |

Collection and credit

- Executive, professional, and technical positions

Column 3 **PAYROLL, EXCLUDING COMMISSIONS**

Total gross pay earned during the entire pay period. Report separately for All Workers and for Production Workers.

Report pay before employee deductions for:

- | | |
|-----------------------------------|--------------------------|
| ▪ Taxes | ▪ Bonds |
| ▪ FICA (Social Security) | ▪ Pensions |
| ▪ Health insurance | ▪ Unemployment insurance |
| ▪ Pay deferral plans such as 401K | ▪ Union dues |

Include:

- Wages and salaries
- Paid holidays, vacation, sick leave, and other paid leave
- Incentive pay
- Bonuses paid **each** pay period
- Overtime pay
- Severance, if paid over multiple pay periods

Exclude:

- Commissions
- Annual pay for unused leave
- Awards or bonuses not paid each pay period
- **Employer** contributions to pay such as 401K
- Pay advances, such as vacation pay advances
- Payments "in kind"
- Retroactive or back pay
- Severance, if provided as one payment
- Travel or work-related reimbursements

Column 4 **COMMISSIONS**

Report separately for "All Workers" and for "Production Workers".

- Report for the most recent *complete* period for which commissions are available, which might be different from the pay period that includes the 12th. Enter 0 if none paid for the period or pay group.
- **Exclude** base pay, drawing accounts, or basic guarantees.

Column 5 **HOURS, INCLUDING OVERTIME**

Total number of hours for which employees received pay during the entire pay period. Report separately for All Workers and Production Workers.

- **Include** overtime; stand-by or reporting time; and hours not worked, but for which workers received pay (holidays, vacations, sick leave, etc.).
- Report hours for salaried and commission-only employees based on their standard work week.
- **Do not** convert overtime or other premium hours to straight-time equivalent hours.

Column 2 WOMEN EMPLOYEE COUNT

Number of "All Workers" defined above who are women.



Each month report your payroll information for the pay period that includes the 12th of the month. For questions refer to page 2 for the **Column** definitions or call the Help Desk at 1-800-827-2005.

Reference Month/Year: mon1 year1	1 Employee Count	2 Women Employee Count	3 Payroll, Excluding Commissions	4 Commissions	5 Total Hours, including overtime
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Report #: reptnum State: STC Location: REGlocation UI: ReptUI

Pay Type: pay-type1	All Workers				
	Production Workers				

Report #: reptnum State: STC Location: REGlocation UI: ReptUI

Pay Type: pay-type1	All Workers				
	Production Workers				

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	Production Workers				

Report #: reptnum State: STC Location: REGlocation UI: ReptUI

Pay Type: pay-type1	All Workers				
	Production Workers				

We will send you another form for reporting next month.

Please keep this form to use when the Data Collection Specialist calls you to complete the survey. Thank You!