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Bureau of Labor Statistics

Data Collection Center

dccaddress

dcccity, dccst dcczip

Phone: dccphone Fax: faxphone

June 15, 2015

Attn: Payroll Manager

Con\_Firm

Con\_Address

Con\_City, Con\_State Con\_Zipcode

Dear Payroll Manager:

A data collection specialist from the Bureau of Labor Statistics (BLS) will soon telephone to ask your company’s help with determining the nation’s monthly counts of employment. The person whose name appears below will be the one who will be calling you. The focus of this call will be to gather information about your payroll that includes the 12th day of the month.

|  |  |
| --- | --- |
| The Data Collection Specialist assigned to your business: | **username** |
| Telephone number: | **userphone** |

The call is to explain the reasons for including your company in the production of the nation’s employment numbers and answer any questions you might have. We also want to:

* Confirm your business address and locations.
* Confirm whether we have the correct state Unemployment Insurance account number (UI#) for your company.
* Ask how frequently employees of your company are paid and whether you have more than one payroll.

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.**

Thank you in advance for your cooperation. Your assistance in producing this important information about our nation’s economy is greatly appreciated.

Sincerely,

signature

dcccntct

Data Collection Center Manager

**►Some Definitions for the Questions on the Next Page that May Be Helpful.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **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:** | **Exclude:** | | * 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 | * 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: | **Exclude** individuals working in: | | * Assembling * Fabricating * Janitorial activities * Maintenance or repair * Materials handling * Processing * Product development * Recordkeeping related to production * Shipping or receiving * Storage or warehousing * Trucking | * Accounting or finance * Advertising * Cafeterias * Collection and credit * Executive, professional, or technical positions * Force account construction * Legal * Medical * Personnel * Product installation or servicing * Purchasing * Recordkeeping *not* related to production * Sales and delivery |   **Column 2 WOMEN EMPLOYEE COUNT**  Number of “All Workers” defined above who are women. | **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 * FICA (Social Security) * Health insurance * Pay deferral plans such as 401K | * Bonds * Pensions * Unemployment insurance * Union dues | | **Include**: | **Exclude**: | | * 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 | * 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 6 Overtime Hours**  Total number of hours for which employees received overtime premiums because they worked more than their regularly scheduled hours. Report separately for All Workers and Production Workers.   * ***Include*** Saturday, Sunday, 6th day, 7th day, and holiday hours. * ***Exclude*** shift differential, hazard, incentive, or similar premiums. |

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| MP MF INT |

**► Information We Have For Your Firm:**

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| --- | --- |
| **Contact:** Attn: Payroll Manager2 |  |
| Con\_Firm2 | **Tel:**       **Ext:** con\_ext |
| Con\_Address2 | **Fax:** con\_fax |
| Con\_City2**,** Con\_State2Con\_Zipcode2 | **Email:** email\_addr |

►**Report 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 Data Collection Specialist listed on page 1 of this form.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Reference Month/Year:**  **mon1** **year1** | | **1**  **Employee**  **Count** | **2**  **Women**  **Employee**  **Count** | **3**  **Payroll, Excluding Commissions** | **4**  **Commissions** | **5**  **Total Hours, including overtime** |
| **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 |  |  |  |  |  |
| **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 |  |  |  |  |  |
| **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 |  |  |  |  |  |
| **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!**

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**Thank you for your help! The Bureau of Labor Statistics (BLS) will use the information you provide in determining the nation’s job count as part of the Current Employment Statistics (CES) program.**

**The CES is the nation’s monthly indicator of employment trends. This monthly report of the nation’s employment is depended on by the Federal Reserve, government agencies, banks, and others to assess the nation’s economy and to help you make decisions about your operations.**

**On the first Friday of every month major media outlets across the country publish the nation’s job count. BLS is responsible for compiling these statistics from information gathered from thousands of firms like yours. This statistic, along with other leading economic indicators produced by BLS provides businesses with information critical in planning for growth and success.**

**You can find data from the Current Employment Statistics program, along with information from other BLS programs, on our web site,** [**http://www.bls.gov/**](http://www.bls.gov/)**.**

**If you have any questions about reporting or the CES program, please contact the Data Collection Specialist listed on page 1 of this form.**

**Our Frequently Asked Questions page is located at:**

<http://www.bls.gov/respondents/ces/home.htm>.

**Your assistance in maintaining the quality of our nation’s economic data is greatly appreciated.**

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(i) 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 50.12.1#0; in South Carolina, under Section 41-29-120 of the Code of Laws of South Carolina (for firms employing more than twenty individuals); and in Puerto Rico, under State Law 15, Sections 5, 6 and 15, amended and approved on April 14, 1931.

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. 1220-0011.