



DUE DATE:

Internet Address:

Username:

Password:

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this form to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR U.S. CENSUS BUREAU REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of U.S. Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

1 VERIFICATION OF SHIPPING ACTIVITY

Does *this establishment*:

- a. Ship or deliver products **from this location** to customers or clients? 1 Yes 2 No
- b. Ship or deliver products **from this location** to other locations of this company? 1 Yes 2 No
- c. Provide for customer pickup of products **from this location**? 1 Yes 2 No

If you answer "Yes" to **any** of the three questions, proceed to Section **2**.
If you answered "No" to **all** of the questions, proceed to Section **5**.

2 VERIFICATION OF SHIPPING ADDRESS

- a. Is the address below the correct address from which this establishment ships?

- 1 Yes, this is the address from which this establishment ships. (Proceed to Section 3.)
- 2 No, this establishment ships from another address. (Enter the correct shipping address in 2b.)

- b. Corrections to Shipping Address.

Company Name		
Address 1		
Address 2		
City	State	Zip Code
		-

3 VERIFICATION OF MAILING ADDRESS

a. Mark one of the following:

- 1 Mail the CFS questionnaires to the establishment's shipping address, as listed in 2a or 2b. (Proceed to Section 3c.)
- 2 Mail the CFS questionnaires to the address for this establishment entered in 3b.

b. Mailing Address.

Company Name			
Address 1			
Address 2			
City	State	Zip Code	

c. Provide the name and title of the individual who could best give information about the shipments made from this establishment.

Name
Title

4 ANNUAL VALUE OF SHIPMENTS

Mark the box that best represents your estimate of the total annual value of all shipments originating from this location (*verified or corrected in Section 2*).

- \$0, establishment had no shipments
- More than zero but less than \$1 million
- \$1 million or more but less than \$5 million
- \$5 million or more but less than \$20 million
- \$20 million or more but less than \$50 million
- \$50 million or more but less than \$200 million
- \$200 million or more but less than \$500 million
- \$500 million or more but less than \$1 billion
- \$1 billion or more but less than \$5 billion
- \$5 billion or more

5 Provide the name and phone number of the individual completing this form.

Contact Name			
Area Code	Contact Number	Extension	

6 REMARKS