

1992 CENSUS OF RETAIL TRADE
MAIL ORDER, DIRECT SELLING

OMB No. 0607-0719: Approval Expires 06/30/94

DUE DATE: FEBRUARY 15, 1993

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:

BUREAU OF THE CENSUS
1201 East 10th Street
Jeffersonville, IN 47134-0001

Toll-free assistance, 8:00 a.m. to 8:00 p.m.,
eastern time, Monday through Friday:

1-800-233-6136

CB-5911

Please read the accompanying
instructions before answering
the questions.

Census use

(Please correct any errors in name, address, and ZIP Code.)

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

Item 1. EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification (EI) Number shown in the label the same as the one used for this establishment on its latest 1992 Employer's Quarterly Federal Tax Return, Treasury Form 941?

094 1 ☐ Yes 2 ☐ No - Report current EI No. below

(9 digits)

Item 2. PHYSICAL LOCATION

a. Is this establishment's physical location the same as the address shown in the label? (P.O. box and rural route addresses are not physical locations)

093 1 ☐ Yes 2 ☐ No - Report physical location below

Number and street

City, town, village, etc.

State

ZIP Code

b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?

095 1 ☐ Yes 3 ☐ No legal boundaries
2 ☐ No 4 ☐ Do not know

c. In what type of municipality is this establishment physically located?

096 1 ☐ City, village, or borough
2 ☐ Town or township
3 ☐ Other - Specify _____
4 ☐ Do not know

d. In what county is this establishment physically located?

Item 3. OPERATIONAL STATUS

Number of months

a. How many months during 1992 was this establishment actively operated?

002

b. Which of the following best describes this establishment's status at the end of 1992? Mark (X) only ONE box.

001 1 ☐ In operation
2 ☐ Temporarily or seasonally inactive
3 ☐ Ceased operation - Give date at right
4 ☐ Sold or leased to another operator - Give date at right AND enter name, etc., below

Figures only

Month Year

Name of new owner or operator

Number and street

City

State

ZIP Code

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be rounded to thousands of dollars.

Example: If a figure is \$1,125,628.79 • Preferred report

Acceptable

Mil- lions (000)	Thou- sands (000)	Dol- lars (000)
1	126	
1	125	629

Mil.	Thou.	Dol.
010		

Item 4. DOLLAR VOLUME OF BUSINESS

Sales of merchandise and other operating receipts for 1992 (Exclude sales or other taxes collected)

Item 5. PAYROLL

Payroll in 1992, BEFORE DEDUCTIONS

a. Annual**b. First quarter (January-March)****Item 6. EMPLOYMENT**

Number of paid employees for pay period including March 12, 1992 (Include both full- and part-time employees)

Item 7. KIND OF BUSINESS

What was this establishment's PRINCIPAL kind of business in 1992? Mark (X) only ONE box.

Catalog store (including telephone order offices)	<input type="checkbox"/> 596111
Mail order - general merchandise	<input type="checkbox"/> 596121
Mail order - computer hardware and/or software	<input type="checkbox"/> 596133
Mail order - specialty merchandise	<input type="checkbox"/> 596131
Television order (home shopping)	<input type="checkbox"/> 596141

Direct seller of furniture, home furnishings, equipment, etc. (selling house-to-house or by telemarketing)	<input type="checkbox"/> 596311
Mobile food service	<input type="checkbox"/> 596322
Pizza shop (including delivery-only locations)	<input type="checkbox"/> 581244

Direct seller of books and stationery (selling house-to-house or by telemarketing)	<input type="checkbox"/> 596331
Coffee service	<input type="checkbox"/> 596346
Bottled water distributor	<input type="checkbox"/> 596345
Frozen food plan (door-to-door delivery)	<input type="checkbox"/> 596344

Direct seller of merchandise not specified above (selling house-to-house or by telemarketing)	<input type="checkbox"/> 596341
Merchandise vending machine operator	<input type="checkbox"/> 596201
Direct mail advertising service	<input type="checkbox"/> 733120

Home delivery agent for newspapers (delivery service only, not reseller)	<input type="checkbox"/> 421200
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Mail order/direct selling of nonmerchandise items (include selling of insurance, investments, or securities)	<input type="checkbox"/> 699999
Other kind of business - Describe	<input type="checkbox"/> 777777

PENALTY FOR FAILURE TO REPORT

CONTINUE ON PAGE 2

Item 8. METHOD OF SELLING

What was this establishment's **PRINCIPAL** method of selling in 1992? Mark (X) only ONE box.

- 235
- Selling at this establishment 1 ☐
- Mail order (include catalog selling and home shopping via television or computer) 2 ☐
- Telemarketing 3 ☐
- Direct selling (include selling from house-to-house and nonfixed or temporary locations) 4 ☐
- Operating merchandise vending machines 5 ☐

Item 9. CLASS OF CUSTOMER

Whole percent of sales

Report the percentage of this establishment's total sales in 1992 (item 4) to each class of customer.

a. General public (household consumers and individuals)

239

b. Other, including retailers; wholesalers; institutional, industrial, commercial, professional, and farm users (for use in farm production); and government

Item 10. MERCHANDISE LINES

Report sales for each merchandise line sold by this establishment, either as a dollar figure or as a whole percent of total sales. (See HOW TO REPORT DOLLAR FIGURES on page 1 and HOW TO REPORT PERCENTS below)

HOW TO REPORT PERCENTS

If figure is **38.76%** of total sales:

• Report whole percents

Not acceptable

Mil.	Thou.	Dol.	Per-cent
			39
			38.76

Merchandise lines	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
1. Women's, juniors', and misses' wear (Report girls' and infants' and toddlers' wear on line 3 and footwear on line 4)	230	231			232
2. Men's wear (Report boys' wear on line 3 and footwear on line 4)	220				
3. Children's wear (Include boys' (sizes 2 to 7 and 8 to 20), girls' (sizes 4 to 6x and 7 to 14), and infants' and toddlers' clothing and accessories. Report footwear on line 4.)	200				
4. Footwear (include accessories)	240				
5. Curtains, draperies, blinds, slipcovers, bed and table coverings	260				
6. Sewing, knitting, needlework goods (include fabrics, notions, patterns, yarns, laces, trimmings, needlework kits, etc.)	280				
7. Kitchenware and home furnishings (include cookware and cooking accessories, dinnerware, glassware, giftware, decorative accessories, clocks, mirrors, closet and bathroom accessories, etc.)	270				
8. Major household appliances (include vacuum cleaners, sewing machines, refrigerators, freezers, dehumidifiers, room air-conditioners, dishwashers, ranges, microwave ovens, clothes washers and dryers, trash compactors, etc.)	380				
9. Small electric appliances (include shavers; mixers; blenders; can openers; toasters; coffee makers; frypans; and personal care appliances, such as hair dryers, curling irons, etc.)	300				
	310				

Item 10. MERCHANDISE LINES - Continued

Merchandise lines	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
10. Audio equipment, musical instruments, radios, stereos, compact discs, records, tapes, sheet music, accessories (include audio tape books)					
a. Audio equipment, components, parts, accessories (include radios, record players, tape recorders and players, compact disc players, etc.)	331				
b. Records, tapes, and compact discs	335				
c. Musical instruments, sheet music, and related items	337				
d. Sum of lines 10a through 10c	330				
11. Computer hardware, software, and supplies (Report computer-related furniture on line 15. Report calculators and office equipment, such as adding machines, copiers, fax machines, etc., on line 12. Report office supplies on line 13.)	370				
12. Office equipment (Include fax machines, dictaphones, copying machines, calculating machines, etc. Report office supplies on line 13.)	854				
13. Office supplies	853				
14. Televisions, video recorders, video cameras, video tapes, etc. (Include parts and accessories. Report video games on line 26b.)					
a. Televisions	321				
b. Video recorders, cameras, and tapes (Report receipts from video tape rental on line 41)	324				
c. Sum of lines 14a and 14b	320				
15. Furniture, sleep equipment	340				
16. Floor coverings	360				
17. Groceries and other food items for human consumption off the premises (Include candy, gum, etc. Report vitamins on line 19c and pet food on line 40.)	100				
18. Meals, snacks, sandwiches, nonalcoholic beverages generally served for immediate consumption	120				
19. Drugs, health aids, beauty aids (include prescription and nonprescription drugs, vitamins, prescription accessories, first-aid and foot products, deodorants, suntan oils, etc.)					
a. Prescriptions (Report here only if pharmacist engaged)	161				
b. Nonprescription medicines	162				
c. Vitamins, minerals, and other dietary supplements	163				
d. Health aids (Include first-aid products, foot products, prescription accessories, and convalescent aids. Report first-aid and footcare nonprescription medicines on line 19b.)	164				
e. Cosmetics (include face cream, make-up, perfumes and colognes, etc.)	165				
f. Other hygiene needs (include deodorants; hair and shaving products; oral, feminine, and baby hygiene needs; hand products; etc.)	166				
g. Sum of lines 19a through 19f	160				

ITEM 10 CONTINUED ON PAGE 3

FORM **CB-5911**U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS**1992 CENSUS OF RETAIL TRADE
MAIL ORDER, DIRECT SELLING**Enter the 11-digit
CENSUS FILE NUMBER
as shown on this report
(See label on page 1)**Item 10. MERCHANDISE LINES - Continued**

Merchandise lines	Cen- sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per- cent
20. Cigars, cigarettes, tobacco, and smokers' accessories (exclude sales from vending machines operated by others)	150				
21. Packaged liquor, wine, and beer	140				
22. Soaps, detergents, and household cleaners	180				
23. Paper and related products (include paper towels, toilet tissue, wraps, bags, foils, etc.)	190				
24. Jewelry (include watches, watch attachments, novelty jewelry, etc. Report flatware and holloware on line 7.)	400				
25. Photographic equipment and supplies (Report photofinishing on line 41)	440				
26. Toys, hobby goods, and games (include video and electronic games, and wheel goods, except bicycles. Report bicycles on line 37.)					
a. Toys (include wheel goods)	461				
b. Games (include video and electronic games)	462				
c. Hobby goods and craft kits	463				
d. Sum of lines 26a through 26c	460				
27. Optical goods (include eyeglasses, contact lenses, sunglasses, telescopes, microscopes, etc.)	490				
28. Books (Report audio tape books on line 10b)	420				
29. Magazines and newspapers	856				
30. Stationery	851				
31. School supplies	852				
32. Greeting cards	855				
33. Luggage and leather goods (Report men's and women's small leather apparel accessories on line 2 or 1)	559				
34. Lumber, millwork, building materials, and home repair and modernization equipment and supplies (include heating stoves and prefabricated fireplaces. Report room air-conditioners and other major appliances on line 8 and portable electric heaters and other small appliances on line 9.)	640				
35. Hardware, tools, and plumbing and electrical supplies	600				
36. Lawn and garden equipment and supplies, cut flowers, plants, shrubs, fertilizers, etc.	620				
37. Sporting goods	500				

Item 10. MERCHANDISE LINES - Continued

Merchandise lines	Cen- sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per- cent
38. Recreational vehicles	580				
39. Automotive tires, batteries, parts, accessories	740				
40. All other merchandise (Report receipts for services on line 41) <i>Specify principal lines and estimated sales below</i>	890				
a.	891				
b.	892				
c.	893				
41. All nonmerchandise receipts EXCLUDING SALES AND OTHER TAXES (include all receipts from customers for parts installed in repair, direct mail advertising, insurance premiums, investments, securities, delivery charges, and other services provided to customers)	900				
42. TOTAL (Should equal item 4 if reporting in dollars)	990				100%

Item 11. Not applicable to this report**Item 12.** Not applicable to this report**Item 13. LEGAL FORM OF ORGANIZATION**

Which of the following best describes this establishment's legal form of organization during 1992? Mark (X) only ONE box.

- 003 ☐ 1 Individual owner (sole proprietorship)
☐ 2 Partnership
☐ 3 Cooperative association (taxable)
☐ 4 Cooperative association (tax-exempt)
☐ 5 Government - Specify _____
☐ 6 Corporation (Do not mark if any form of cooperative association)
☐ 9 Other - Specify _____

Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION**a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero?**

- 1 ☐ Yes - Complete this item
 2 ☐ No - Skip to item 15

b. Is this company owned or controlled by another company?

- 007 1 ☐ Yes →
 2 ☐ No

Enter name, address, and EI Number of the owning or controlling company

EI No. (9 digits)

c. Does this company own or control any other company or companies?

- 008 1 ☐ Yes →
 2 ☐ No

Enter name, address, and EI Number of the owned or controlled company

EI No. (9 digits)

ITEM 14 CONTINUED ON PAGE 4

CONTINUE ON PAGE 4

Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION – Continued

Number

079

d. How many establishments operated under the Employer Identification Number shown in the label (or as corrected in item 1) AT THE END of 1992?

If more than one, provide the **physical location** address and other information indicated below for each establishment. The headquarters location should be first, followed by all other locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.

Estimates are acceptable if book figures are not available.

1	Name			1992	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	Kind-of-business description			Paid employees for pay period including March 12			
				083			
2	Name			1992	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	Kind-of-business description			Paid employees for pay period including March 12			
				083			
3	Name			1992	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	Kind-of-business description			Paid employees for pay period including March 12			
				083			

REMARKS – Please use this space for any explanations that may be essential in understanding your reported data.

Item 15. CERTIFICATION – This report is substantially accurate and has been prepared in accordance with instructions.

Period covered by this report	FROM: Mo.	Year	TO: Mo.	Year	Name of person to contact regarding this report – Print or type
	Area code	Number	Extension	Title	
Telephone	Signature of authorized person				Date