

U.S. DEPARTMENT OF COMMERCE U.S. CENSUS BUREAU

QSS-1A (08-23-2022)

Due Date

FORM

Need help or have questions? Call 1-800-772-7851 (8:30 a.m. - 5:00 p.m. ET, M-F) or Visit

https://www.census.gov/services/qss/ respondent-information.html

Title 13 United States Code (U.S.C.), Sections 131 and 182, authorizes the Census Bureau to conduct this collection. The U.S. Census Bureau is required by Section 9 of the same law to keep your information confidential and can use your responses only to produce statistics. The Census Bureau is not permitted to publicly release your responses in a way that could identify your business, organization, or institution. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data. This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is 0607-0907 and appears at the upper right of this page. Without this approval, we could not conduct this survey

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

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QUARTERLY SERVICES SURVEY

INTERNET REPORTING OPTION AVAILABLE. We encourage you to complete this survey online at: https://portal.census.gov

Authentication Code:

To view Survey Results: https://www.census.gov/services

GENERAL INSTRUCTIONS

- Any significant change in this firm's operations should be noted in 3
- For establishments sold or acquired during the quarter(s), report data only for the period the establishments were operated by this firm
- Estimates are acceptable if book figures are not available
- Enter "0" where applicable
- Report data on an accrual basis
- Dollars should be rounded to the nearest dollar

· Dollars should be rounded to the hearest dollar		
If a figure is \$1,030,280,456 it should be reported as ——		
a ligure is \$1,030,280,450 it should be reported as		

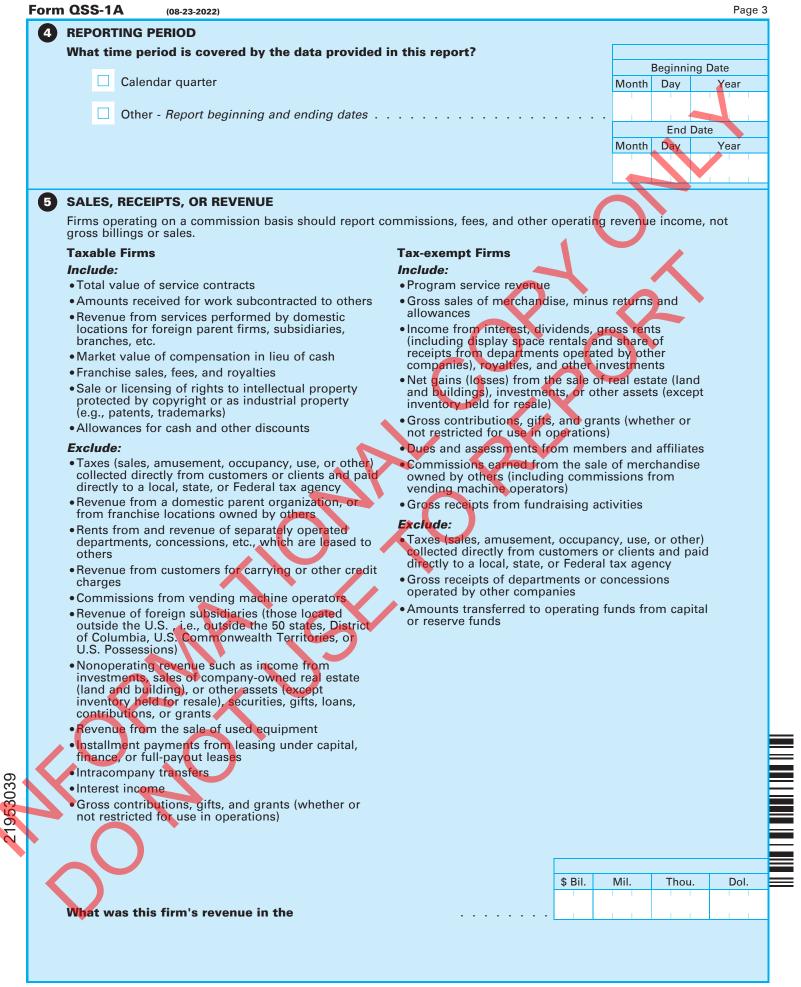
Include:

• Data for all Services establishments (excluding data for Retail, Wholesale, Manufacturing, Mining, and Construction operations) as defined by the survey coverage in ①

• Data for auxiliary facilities primarily engaged in supporting services to this firm's establishment(s) such as warehouses, garages, central administrative offices, and repair services

We estimate this survey will take an average of 15 minutes to complete. More information about this estimate and an address where you may write with comments is on the back of this form.

Form QSS-1A	(08-23-2022)				Page
Did this firr	n provide the business activities described below?				
				$\mathbf{\Lambda}$	
		· · · · (
Yes					
🗌 No	- Specify this firm's business activity 7		•	\land	
2 Not Applicab	le.				
3 ORGANIZA	FIONAL CHANGE				
	firm experience any acquisitions, sales, mergers, divestitures,	, and/or cea	se opera	ations	in the
			-		
	Yes				
	No - Go to 🖸				
	the following organizational changes occurred in the				
Check all	that apply. If more than one organizational change occurred during	the reporting			
	Acquisition		Month	Day	Year
	Date of organizational change				
	AND				
	Merger Enter detailed information below				
	Divestiture		Month	Day	Year
	Ceased Operation - Date of ceased operation/closure		I	1	
Name of a	ompany	EIN (S) digits)		
			-		
Address (Number and street, P.O. Box, etc.)				
City, town	, village, etc.	State ZIP C	ode		
				_	



CONTINUE ON PAGE 4

6	CLASS OF CUSTOMER
	What percentage of revenue reported in 9 was received from the following classes of customer
	0%
	1. Household consumers and individual users
	2. Business firms and not-for-profit organizations
	3. Government (Federal, state, and local)
7	Not Applicable.
8	REMARKS - Please use this space to explain any significant quarter-to-quarter changes, to clarify responses, or indicate where data were estimated.
9	CONTACT INFORMATION
9	CONTACT INFORMATION Name of gerson to contact regarding this report (Please print) Title
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9	
9	Name of person to contact regarding this report (Please print) Title Area code Number Extension E-mail address Telephone - - - -
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