

FORM **CFS-1000**
(9-2-92)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

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

**1993 COMMODITY FLOW SURVEY
CENSUS OF TRANSPORTATION**

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.

RETURN TO

**BUREAU OF THE CENSUS
1201 East 10th Street
Jeffersonville IN 47132-0001**

INSTRUCTIONS

Please read the accompanying instructions before completing this questionnaire. The sampling instructions beginning on page 2 of the questionnaire describe how to take a **sample** of your outbound shipments **covering the two-week period shown above.** You should use your sales invoices, bills of lading, and any other file of shipping documents which represents your total outbound shipments (or deliveries).
Item F, Shipment Characteristics — Beginning on page 2, provide the information requested for each of your **sampled** shipments. If book figures are not available for weight, value, etc., please provide an estimate.

Item A ESTABLISHMENT NAME

Is the establishment name shown in the mailing address correct?

- 1 Yes 2 No — Enter correct name. ↘

Item B OPERATIONAL STATUS OF ESTABLISHMENT — Mark (X) the **ONE** box which best describes this establishment during the 2-week period shown above.

- 1 In operation 3 Ceased operation — Give date →
2 Temporarily or seasonally inactive

Item C PHYSICAL LOCATION (PO boxes or rural routes are not physical locations.)

Is this establishment's physical location the same as the address shown in the label?

- 1 Yes 2 No — Enter physical location below. ↘

Number and street

City, town, village, etc.

State

ZIP Code

Item D ORIGIN OF SHIPMENTS

During the two-week period, did any of your shipments (or deliveries) originate from locations other than this physical location?

- 1 No — Skip to Item E on page 2. Enter an "A" as the origin code in column (k) of item F for all shipments.
2 Yes — Enter the City, State, and ZIP Code of these other locations in rows B, C, and D.

Origin code	City	State	ZIP Code
A	Location in mailing address or in Item C.	—	—
B			
C			
D			

Does your **Census File Number (CFN)** shown in the address box above, begin with a "0" (zero)?

- 1 Yes — Include shipments from those other locations in your sampling, and use the appropriate origin code (A, B, C, or D) in column (k) of item F for all shipments selected. Now skip to Item E.
2 No — Do any of these other locations keep their own records for these shipments?
1 Yes — Omit shipments from these other locations that maintain their own records from your sampling.
2 No — Include shipments from these other locations in your sample, and place the appropriate origin code (A, B, C, or D) in column (k) of item F for all shipments selected.

Item E SOURCE DOCUMENT

Please mark (X) the **main** document that you will use to obtain the requested information.

- 1 Sales invoices 3 Other — *Specify* ↗
 2 Bills of lading

SAMPLE SELECTION INSTRUCTIONS

1. Enter your total number of shipments for the 2-week period.

NOTE — Remove any voided invoices, credit memoranda, etc. from the files, if possible, before estimating the total number of shipments.

2. Find the range in column (1) at right that includes the number entered in 1 above. Put an (X) in column (2) beside it.
3. If your total number of shipments is 40 or less, provide data for **every** shipment during the 2-week period in Item F. If the number of shipments is 41 or more, continue with steps 4 and 5 to select the shipments to report.

Number of shipments (1)	Mark (X) one (2)	"Take every" number (3)	Expected sample size (4)
0—40		Select every shipment	1—40
41—100		2	20—50
101—200		5	20—40
201—400		10	20—40
401—800		20	20—40
801—1600		40	20—40
1601 or more		Call Census 1-800-528-3049	

CONTINUE ON NEXT PAGE. ↗

Item F SHIPMENT CHARACTERISTICS

Line No. (a)	Shipment		Total				Commodity		
	Number (b)	Date (c)		Value (Dollars) (d)			Weight (Pounds) (e)	Code (f)	Description (Largest weight) (g)
		M	D	Mil.	Thou.	Dol.			
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

Mode of transport codes for columns (i) and (n) ▶

1 — Parcel delivery, courier, or U.S. Postal Service

2 — Private truck
3 — For-hire truck

4 — Railroad
Continued →

SAMPLE SELECTION INSTRUCTIONS — Continued

4. Note the "Take every" number in column (3) next to the "X" you marked in column (2). Beginning with the first shipment in the file for the period, count the shipments until you reach the "Take every" number. Select that shipment as the first one to report on in item F.

6th shipment, count off 5 more, and select the 10th shipment. Resume counting with the 11th and select the 15th, 20th shipment, etc. until you reach the end of the file. You will have selected 35 shipments to report on in Item F.

Continuing with the next shipment, begin counting from 1 until you reach the "Take every" number again. Select that shipment. Continue this process until you reach the end of the file.

NOTE – If your sample of shipments includes any voided invoices, credit memoranda, etc., write "VOID" in column (b) for that shipment. Leave the rest of the line blank.

EXAMPLE:

If 176 is entered in 1, mark (X) the third row of the table. The "Take every" number is 5. Begin counting with the first shipment in the file and select the 5th shipment to report in Item F. Now beginning with the

5. Sample validation — After sample selection is done, compare the number of selected shipments to the expected sample size in column (4). If the number of selected shipments is above or below the range, recheck the sample selection.

Hazardous material? (Y/N) (h)	Domestic mode(s) of transport <i>Enter all that apply using codes shown below.</i> (i)	Containerized? (Y/N) (j)	Origin code (k)	Domestic destination (or port/airport/border crossing of exit for exports) (l)			Export? (Y/N) (m)	Export mode (n)	Foreign destination (for export shipments only) (o)		Line No. (p)
				City	State	ZIP Code			City	Country	
											1
											2
											3
											4
											5
											6
											7
											8
											9
											10
											11
											12
											13
											14
											15

5 — Inland water and/or Great Lakes
6 — Deep sea water

7 — Pipeline
8 — Air

9 — Other mode
0 — Unknown

Item F SHIPMENT CHARACTERISTICS — Continued

Line No. (a)	Shipment			Total			Commodity		
	Number (b)	Date (c)		Value (Dollars) (d)			Weight (Pounds) (e)	Code (f)	Description (Largest weight) (g)
		M	D	Mil.	Thou.	Dol.			
16									
17									
18									
19									
20									
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37									
38									
39									
40									

Mode of transport codes for columns (i) and (n)  **1** — Parcel delivery, courier, or U.S. Postal Service **2** — Private truck **3** — For-hire truck **4** — Railroad *Continued* 

Hazardous material? (Y/N) (h)	Domestic mode(s) of transport <i>Enter all that apply using codes shown below.</i> (i)	Containerized? (Y/N) (j)	Origin code (k)	Domestic destination (or port/airport/border crossing of exit for exports) (l)			Export? (Y/N) (m)	Export mode (n)	Foreign destination (for export shipments only) (o)		Line No. (p)
				City	State	ZIP Code			City	Country	
											16
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											39
											40

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8 — Air

9 — Other mode
0 — Unknown

