APPENDIXES

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CONFIDENTIAL CENSUS REPORT

Your report is required by Act of Congress. This Act also makes it unlawful for the Bureau to disclose any facts, including names or identity, from your census reports. Only sworn census employees will see your statements. Data collected will be used solely for preparing statistical information concerning the Nation's population, resources, and business activities. Your Census Reports Cannot Be Used for Purposes of Taxation, Regulation, or Investigation.

Form 40

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

SERVICE AND AMUSEMENT SCHEDULE

10-211

Supervisor's District No. .....
Enumeration District No. .....
Consecutive number of report .....
Area Code ..... Card No. .....
(CODE—Do not use)

CENSUS OF BUSINESS: 1939

A separate report should be prepared for each service establishment (including personal service, business service, and mechanical repair service) or place of amusement. Combined reports for two or more establishments, even though under the same management or ownership, cannot be accepted.

Report the full year's operation for the calendar year 1939, if possible, even if ownership has changed during the year. A 12-month period ending within a month before or after December 31, 1939, may be reported if books are kept on other than a calendar-year basis.

1. DESCRIPTION OF ESTABLISHMENT:

a. Name of establishment .....

b. Name of owner ..... Race (*not for corporations*) ..... (White, Negro, other)

c. Location of establishment
State ..... County ..... Township ..... (Or other minor civil division)
Name of city, town, or village .....
Street and number .....
Is this street number located within the corporate limits of the city, town or village named above? (Yes or No) .....

d. Home-office or business address of owner ..... (Street address) (City) (State)

e. Legal form of organization (Place check mark in proper square) ☐ Individual proprietorship. ☐ Corporation. ☐ Partnership. ☐ Other (specify) .....

1 ..... 2 ..... 3 ..... 4 ..... 5 ..... 6 ..... 7 ..... 8 .....
CODE—Do not use

f. Date (year) of original establishment of this business in this city .....

g. Date of acquisition or establishment in this city under present ownership: Month ..... Year .....

h. Total number of service or amusement establishments owned by this proprietor or organization in the United States any time during 1939 (including the one for which this report is prepared) ..... Key

i. If this is a theater, what is the seating capacity? ..... (Number of seats) A-1

2. KIND OF BUSINESS:

a. Kind of business ..... (Give usual designation for the kind of business from which the major part of the operating receipts is derived)

EXAMPLES.—Barber shop; beauty parlor; photographic studio; shoe-repair shop; employment agency; radio-repair shop; watch, clock, and jewelry repair shop; automobile rental service; garage; motion-picture theater; motion-picture and vaudeville theater; legitimate theater; billiard parlor; bowling alley; swimming pool; etc.

b. List other business activities (in addition to that specified under 2-*a*) conducted by the owner from this establishment .....

3. TOTAL OPERATING RECEIPTS (include sales and amusement taxes collected by you from customers and paid by you directly to any local, State, or Federal taxing agency):

(Omit cents)

a. Receipts for services ..... (Such as hair cutting, shoe repairs, storage, mechanical repairs, window cleaning, etc.) $..... A-2

b. Receipts from amusements or for the use of recreational facilities (admissions, fees, and other charges) ..... $..... A-3

c. Receipts from sale of merchandise (deduct returned goods and allowances) and receipts from sale of meals and from fountain ..... $..... A-4

d. Receipts from other sources (specify sources):
..... $..... A-5

e. TOTAL operating receipts (sum of *a*, *b*, *c*, and *d*) ..... $..... A-6

f. Report total amount of sales and amusement taxes included in "*e*" above, which were collected by you directly from customers and paid by you directly to any local, State, or Federal taxing agency ..... $..... A-7

16—9874-0

4. PROPRIETORS, FIRM MEMBERS, AND MEMBERS OF FAMILY (does not apply to corporations):

Key

a. Number of proprietors and firm members devoting the major portion of their time to the business, whether or not paid a regular salary or regular drawing account A-8

b. Members of family of proprietors or firm members (wives or husbands, sons, daughters, etc.) who are regularly working in the business, full-time or part-time, but who are paid **no stipulated wage or salary** ..... (Members of family who are paid a daily or weekly wage or regular salary should be included in inquiry 5 below, and not here.)
Full-time (Number) A-9
Part-time (Number) A-10

c. Paid proprietors and firm members, whether included in 5-*a* and whether active in the business or not, who are paid a regular salary or drawing account .....
Number A-11
Salary or amount withdrawn for year 1939 ..... $..... (Omit cents) A-12

5. EMPLOYMENT AND PAY ROLL (except self-employment):

a. Total pay roll for the year 1939—salaries, wages, bonuses, and commissions ..... $..... A-13
If a corporation, include amount paid to officers and executives; if an unincorporated business, do not include here the amount reported in 4-*c* above. Report as pay roll the full amount of salaries, wages, bonuses, and commissions, before deductions for Social Security, insurance, dues, etc. Do not include payments in kind, such as free meals, lodging, etc.

b. How much of total pay roll shown in 5-*a* above was paid to FULL-TIME employees as defined below (see definition under 5-*d* below) ..... $..... A-14

c. How much of total pay roll shown in 5-*a* above was paid to PART-TIME employees (all who work less than the full workweek) as defined below ..... $..... A-15 (Omit cents)

d. Number of all paid employees on pay roll for period ended nearest 15th of each month:

(Do not include here the proprietors and firm members reported in Inquiry 4)

	Item	Jan. B-1	Feb. B-2	Mar. B-3	Apr. B-4	May B-5	June B-6	July B-7	Aug. B-8	Sept B-9	Oct. B-10	Nov. B-11	Dec. B-12	(Do not use) B-13	
Full-time as defined below	1														A-16
Part-time as defined below	2														A-17

Full-time employees are those who work or are paid for the full number of hours of the workweek. Also report as full-time employees, extras and contingents who worked the full number of hours during the particular week for which employment data are requested. All others should be reported as part-time employees.

e. Of the total number of employees shown above for one pay roll in October (full-time and part-time combined) how many are .....
Males B-14
Females B-15

REMARKS: .....

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from ....., 19....., to ....., 19.....

..... (Signature and official title of person furnishing the information)

..... (Date of signature)

..... (Signature of enumerator)

U. S. GOVERNMENT PRINTING OFFICE 16—9874-0

CONFIDENTIAL CENSUS REPORT

Your report is required by Act of Congress. This Act also makes it unlawful for the Bureau to disclose any facts, including nes or identity, from your census reports. Only sworn census employees will see your statements. Data collected will be used ly for preparing statistical information concerning the Nation's population, resources, and business activities. Your Census eports Cannot Be Used for Purposes of Taxation, Regulation, or Investigation.

orm 47

LAUNDRY, DYEING AND CLEANING, AND RUG CLEANING SCHEDULE

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

16-213

Supervisor's District No. .....
Enumeration District No. .....
Consecutive Number of Report .....
Area Code ..... Card No. .....
CODE—Do not use

CENSUS OF BUSINESS: 1939

A separate report should be prepared for each power laundry, hand laundry, dyeing and cleaning plant, and rug cleaning establishment. Combined reports for two or more establishments even though under the same management or ownership cannot e accepted unless the plants are located in the same city or town. The report should relate to the entire business of the establishment, including not only the laundry or cleaning and dyeing plant itself, but the outlying retail receiving and distributing branches as well.

Report the full year's operations for the calendar year 1939, if possible, even if ownership has changed during the year. 12-month period ending within a month before or after December 31, 1939, may be reported if books are kept on other than a alendar-year basis.

. DESCRIPTION OF ESTABLISHMENT:

a. Name of establishment .....

b. Name of owner ..... Race (not for corporations) ..... (White, Negro, other)

c. Location of establishment:
State ..... County ..... Township ..... (Or other minor civil division)
Name of city, town, or village .....
Street and number .....
Is this street number located within the corporate limits of the city, town, or village named above? (Yes or No) .....

d. Home-office or business address of owner ..... (Street address) ..... (City) ..... (State)

e. Legal form of organization (Place check mark in proper square): ☐ Individual proprietorship. ☐ Corporation. ☐ Partnership. ☐ Other (specify): .....

f. Date (year) of original establishment of this business in this city .....

g. Date of acquisition or establishment in this city under present ownership:
Month ..... Year .....

h. Total number of plants owned by this proprietor or organization in the United States any time during 1939 (including the one for which this report is prepared) .....

1. .....
2. .....
3. .....
4. .....
5. .....
6. .....
7. .....
8. .....
CODE—Do not use

. KIND OF BUSINESS: (Check principal activity only.)

☐ Power laundry. ☐ Dyeing and cleaning plant. ☐ Other (specify) .....
☐ Hand laundry. ☐ Rug cleaning plant. ☐ .....

. RECEIPTS FOR WORK DONE:

Laundries and cleaning and dyeing plants with sales amounting to $100,000 or over should report sales by service, in detail, as called for below. Others should report separately ONLY TOTAL RECEIPTS for LAUNDRY WORK, for CLEANING and DYEING and for RUG CLEANING, if any, and TOTAL RECEIPTS FOR WORK DONE. CLEANING AND DYEING plants should report separately the amount received for RETAIL and the amount received for WHOLESALE.

(Omit cents)

		Key
a. Laundry work:		
(1) Bundle work (sometimes known as starch work, bachelor bundle, or list-price bundle). (Do not include finished family work)	$	D-1
(2) Family services:		
(a) Finished family (family work completely finished by being machine or hand ironed)	$	D-2
(b) Semifinished family services (all family services except finished family and damp wash)	$	D-3
(c) Damp wash (not including damp-wash flat work ironed, which should be reported under 2-b, above)	$	D-4
(3) Commercial flat work (flat work from hotels, hospitals, restaurants, rooming houses, etc.)	$	D-5
(4) Towel, coat, apron, and linen supply services	$	D-6
(5) Other (specify)	$	D-7
(6) TOTAL RECEIPTS FOR LAUNDRY WORK	$	D-8
b. Cleaning and dyeing:		
(1) Retail	$	D-9
(a) Delivered direct to customer	$	D-10
(b) Delivered through plant office or branch stores	$	D-11
(2) Wholesale	$	D-12
(3) TOTAL RECEIPTS FOR CLEANING AND DYEING	$	D-13
c. Rug cleaning	$	D-14
d. Storage receipts	$	D-15
		A-1
e. TOTAL RECEIPTS (sum of a, b, c, and d)	$	D-16

16—9302

4. PROPRIETORS, FIRM MEMBERS, AND MEMBERS OF FAMILY (does not apply to corporations.)

		Key
a. Number of proprietors and firm members devoting the major portion of their time to the business whether or not paid a regular salary or regular drawing account		A-2
b. Members of family of proprietors or firm members (wives or husbands, sons, daughters, etc.) who are regularly working in the business, full-time or part-time, but who are paid **no stipulated wage or salary** (Members of family who are paid a daily or weekly wage or regular salary should be included in inquiry 1 below, and not here.)	Full-time Number	A-3
	Part-time Number	A-4
c. Paid proprietors and firm members, whether included in 4-a and whether active in the business or not, who are paid a regular salary or drawing account	Number	A-5
	Salary or amount withdrawn for year 1939 $ ..... (Omit cents)	A-6

5. EMPLOYMENT AND PAY ROLL (except self-employment):

a. Total pay roll for the year 1939—salaries, wages, bonuses, and commissions ..... $ A-7
(If a corporation, include amount paid to officers and executives; if an unincorporated business, do not include here the amount reported in 4-c above. Report as pay roll the full amount of salaries, wages, bonuses, and commissions. Deduct deductions for Social Security, insurance, dues, etc.)

b. How much of total pay roll shown in 5-a above was paid to FULL-TIME employees as defined below (see definition under 5-d below) ..... $ A-8

c. How much of total pay roll shown in 5-a above was paid to PART-TIME employees (all who work less than the full workweek) as defined below ..... $ ..... (Omit cents) A-9

d. Number of all paid employees on pay roll for period ended nearest 15th of each month:
(Do not include here the proprietors and firm members reported in inquiry 4.)

	Key	Jan. B-1	Feb. B-2	Mar. B-3	Apr. B-4	May B-5	June B-6	July B-7	Aug. B-8	Sept. B-9	Oct. B-10	Nov. B-11	Dec. B-12	(Do not use) B-13	Key
Full-time, as defined below	1														A-10
Part-time, as defined below	2														A-11

Full-time employees are those who work or are paid for the full number of hours of the workweek. Also report as full-time employees, extras and contingents who worked the full number of hours during the particular week for which employment data are reported. All others should be reported as part-time employees.

e. Of the total number of employees shown above for one pay roll in October (full-time and part-time combined) how many are ..... Males ..... B-14 ..... Females B-15

6. EMPLOYMENT AND PAY ROLL DURING A TYPICAL WEEK:

The purpose of this inquiry is to show the analysis of a normal pay roll by classifications. Give figures for week ending Oct. 21, 1939. For highly seasonal businesses, report instead one week of normal employment during active season. Report pay roll in accordance with definition under 5-a above.

Week covered: From ....., 1939, to ....., 1939.

CLASSIFICATION (Do not include here persons reported in inquiry 4 above)	FULL-TIME: Number of paid full-time employees during week	Key Item 1	FULL-TIME: Pay roll for the week for full-time employees (salaries, wages, bonuses, and commissions earned) (one week only)	Key Item 1	PART-TIME: Number of paid part-time employees during week	Key Item 2	PART-TIME: Pay roll for the week for part-time employees (salaries, wages, bonuses, and commissions earned) (one week only)	Key Item 2
a. Executives and salaried corporation officers (except proprietors reported in 4-c above)		C-1	$	C-2	x x x x x x	X	x x x x x x x	X
b. Managerial, supervisory, and technical employees		C-3	$	C-4		C-3	$	C-4
c. Office, clerical, and branch-store employees		C-5	$	C-6		C-5	$	C-6
d. Productive employees		C-7	$	C-8		C-7	$	C-8
e. Routemen (driver-salesmen)		C-9	$	C-10		C-9	$	C-10
f. All other employees		C-11		C-12		C-11		C-12
g. TOTAL NUMBER, and amount of pay roll for the week (sum of a, b, c, d, e, and f)		C-13	$ (Omit cents)	C-14		C-13	$ (Omit cents)	C-14

CAUTION.—Pay rolls kept on other than weekly basis, as well as bonuses and commissions, should be converted to weekly equivalent. Full-time employees as reported above should be only those who conform to the full-time definition under inquiry 5-d.

REMARKS: .....

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from ....., 19....., to ....., 19.....

(Signature and official title of person furnishing the information)

(Signature of enumerator) ..... (Date of signature) .....

U. S. GOVERNMENT PRINTING OFFICE 16—9302

CONFIDENTIAL CENSUS REPORT

Your report is required by Act of Congress. This Act also makes it unlawful for the Bureau to disclose any facts, including names or identity, from your census reports. Only sworn census employees will see your statements. Data collected will be used solely for preparing statistical information concerning the Nation's population, resources, and business activities. Your Census Reports Cannot Be Used for Purposes of Taxation, Regulation, or Investigation.

Form 41

HOTEL, TOURIST COURT, AND TOURIST CAMP SCHEDULE

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
WASHINGTON

16-212

Supervisor's District No. _____
Enumeration District No. _____
Consecutive number of report _____
Area Code _____ Card No. _____
(CODE—Do not use)

CENSUS OF BUSINESS : 1939

A separate report should be prepared for each establishment. Combined reports for two or more establishments, even though under the same management or ownership, cannot be accepted.

Report the full year's operation for the calendar year 1939, if possible, even if ownership has changed during the year. A 12-month period ending within a month before or after December 31, 1939, may be reported if books are kept on other than a calendar-year basis.

1. DESCRIPTION OF ESTABLISHMENT:

a. Name of establishment _____

b. Name of owner _____ Race (*not for corporations*) _____ (White, Negro, other)

c. Location of establishment:
State _____ County _____ Township _____ (Or other minor civil division)
Name of city, town, or village _____
Street and number _____
Is this street number located within the corporate limits of the city, town, or village named above? ___ (Yes or No) _____

d. Home-office or business address of owner _____ (Street address)
_____ (City) _____ (State)

e. Legal form of organization (Place check mark in proper square.) ☐ Individual proprietorship. ☐ Partnership. ☐ Corporation. ☐ Other (specify) _____

f. Date (year) of original establishment of this business in this city _____

g. Date of acquisition or establishment in this city under present ownership:
Month _____ Year _____

h. Total number of establishments owned by this proprietor or organization in the United States any time during 1939 (including the one for which this report is prepared) _____

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____
8 _____
9 _____
10 _____
CODE—Do not use

2. KIND OF BUSINESS:

a. Kind of business (indicate by check mark) ☐ Hotel. ☐ Tourist court, or tourist camp.

b. List other business activities (in addition to that listed under 2–*a*) conducted by the owner from this establishment.
EXAMPLE.—Sale of gasoline; automobile storage (for a separate fee); merchandise sales; swimming pool admissions; laundering, cleaning, and pressing, etc.
_____

c. Indicate nature of business (check one): ☐ Year-round. ☐ Seasonal.

d. If seasonal, indicate period when establishment is open: From _____ To _____

16—9634

3. TOTAL OPERATING RECEIPTS:

(Include sales taxes collected by you directly from customers and paid by you directly to any local, State, or Federal taxing agency.)

(Omit cents)

		KEY
a. Receipts from hotel room rentals or from rentals of tourist cabins	$	D–1
b. Receipts from sale of meals	$	D–2
c. Total for room rentals and sale of meals (sum of *a* and *b*)	$	D–3
d. Receipts from sale of beverages (bar and fountain)	$	D–4
e. Receipts from sale of liquor (packaged)	$	D–5
f. Receipts from sale of wine and beer (packaged)	$	D–6
g. Receipts from sale of merchandise (gasoline and oil, cigars, cigarettes, etc.)	$	D–7
h. Receipts from other sources, including rentals for concessions, and receipts from laundering, storage, repairs, and other services (specify sources and amounts) _____ _____ _____	$	D–8
i. Total operating receipts (sum of *c, d, e, f, g,* and *h*)	$	D–9 / A–1
j. Report total amount of sales taxes included in *i* above, which were collected by you directly from customers and paid by you directly to any local, State, or Federal taxing agency	$	A–2

4. PROPRIETORS, FIRM MEMBERS, AND MEMBERS OF FAMILY (does not apply to corporations):

a. Number of proprietors and firm members devoting the major portion of their time to the business, whether or not paid a regular salary or regular drawing account _____ — A–3

b. Members of family of proprietors or firm members (wives or husbands, sons, daughters, etc.) who are regularly working in the business, full-time or part-time, but who are paid ***no stipulated wage or salary***
(Members of family who are paid a daily or weekly wage or regular salary should be included in inquiry 5 below, and not here.)
Full-time _____ (Number) — A–4
Part-time _____ (Number) — A–5

c. Paid proprietors and firm members, whether included in 4–*a* and whether active in the business or not, who are paid a regular salary or drawing account
Number _____ — A–6
Salary or amount withdrawn for year 1939 $ _____ (Omit cents) — A–7

5. EMPLOYMENT AND PAY ROLL (except self-employment):

a. Total pay roll for the year 1939—Salaries, wages, bonuses, and commissions $ _____ — A–8
If a corporation, include amount paid to officers and executives; if an unincorporated business, do not include here the amount reported in 4–*c* above. Report as pay roll the full amount of salaries, wages, bonuses, and commissions, before deductions for Social Security, insurance, dues, etc. Do not include payments in kind, such as free meals, lodging, etc.

b. How much of total pay roll shown in 5–*a* above was paid to FULL-TIME employees as defined below (see definition under 5–*d* below) $ _____ — A–9

c. How much of total pay roll shown in 5–*a* above was paid to PART-TIME employees (all who work less than the full work week) as defined below $ _____ (Omit cents) — A–10

d. Number of all paid employees on pay roll for period ended nearest 15th of each month:
(Do not include here the proprietors and firm members reported in inquiry 4.)

	Item	Jan. B–1	Feb. B–2	Mar. B–3	Apr. B–4	May B–5	June B–6	July B–7	Aug B–8	Sept. B–9	Oct. B–10	Nov. B–11	Dec. B–12	(Do not use) B–13	
Full-time as defined below	1														A–11
Part-time as defined below	2														A–12

Full-time employees are those who work or are paid for the full number of hours of the work week. Also report as full-time employees, extras and contingents who worked the full number of hours during the particular week for which employment data are requested.
All others should be reported as part-time employees.

e. Of the total number of employees shown above for one pay roll in October (full-time and part-time combined) how many are
Males _____ — B–14
Females _____ — B–15

16—9634

EMPLOYMENT AND PAY ROLL DURING A TYPICAL WEEK (for hotels only):

(The purpose of this inquiry is to show the analysis of a normal pay roll by classifications. Give figures for week ending Oct. 21, 1939. For highly seasonal businesses, report instead one week of normal employment during active season. Report pay roll in accordance with definition under 5-e above.

Week covered: From ....., 1939 to ....., 1939.

CLASSIFICATION (Do not include here persons reported in inquiry 4 above)	FULL-TIME: Number of paid full-time employees during week	KEY Item 1	FULL-TIME: Pay roll for the week for full-time employees (salaries, wages, bonuses, and commissions earned) (One week only)	KEY Item 1	PART-TIME: Number of paid part-time employees during week	KEY Item 2	PART-TIME: Pay roll for the week for part-time employees (salaries, wages, bonuses, and commissions earned) (One week only)	KEY Item 2
a. Executives and salaried corporation officers (except proprietors reported in 4-c above)		C-1	$	C-2	x x x x x x	X	$ x x x x x x	X
b. Office and clerical employees		C-3	$	C-4		C-3	$	C-4
c. Waiters and waitresses		C-5	$	C-6		C-5	$	C-6
d. All other dining room, lunchroom, bar, and kitchen employees		C-7	$	C-8		C-7	$	C-8
e. Housekeeping employees (maid, houseman, etc.)		C-9	$	C-10		C-9	$	C-10
f. All other employees		C-11	$	C-12		C-11	$	C-12
g. TOTAL NUMBER and amount of pay roll for the week (sum of a, b, c, d, e, and f)		C-13	$ (Omit cents)	C-14		C-13	$ (Omit cents)	C-14

CAUTION.—Pay rolls kept on other than weekly basis, as well as bonuses and commissions, should be converted to weekly equivalent. Full-time employees as reported above should be only those who conform to the full-time definition under inquiry 5-d.

15—9614

	KEY
7. QUARTERS AND MEALS SUPPLIED EMPLOYEES as part of their compensation and without any charge (for the week ending October 21, 1939, or other pay period used in inquiry 6-g):	
a. Number of employees receiving living quarters free	D-10
b. Number of employees receiving free—	
1. One meal daily	D-11
2. Two meals daily	D-12
3. Three meals daily	D-13
(Each employee receiving meals free should be reported in only one of the above three classifications.)	
8. NUMBER OF GUEST ROOMS (for hotels only):	A-13
a. Total number of guest rooms	D-14
1. Number of rooms usually available for transient use	D-15
2. Number of rooms usually occupied by or available for residential guests	D-16
(All rooms must be classified under either a-1 or a-2, and the total of a-1 and a-2 should equal a.)	
9. TOURIST COURT AND CAMP ACCOMMODATIONS:	
a. Total number of cabins	A-14
b. Total number of units (rooms, apartments, single cabins, or other rental units) available for rental	A-15
10. PERCENTAGE OF OCCUPANCY (for hotels only): Percentage of occupancy for the year 1939	A-16

REMARKS .....

CERTIFICATE

THIS IS TO CERTIFY that the information contained in this schedule is correct and complete to the best of my knowledge and belief, and covers the period from ....., 19....., to ....., 19.....

(Signature and official title of person furnishing the information)

(Date of signature)

(Signature of enumerator)

U. S. GOVERNMENT PRINTING OFFICE 16—9614