

FORM **SA-721**  
(11-22-2000)  
U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU  
**ANNUAL  
ACCOMMODATIONS AND  
FOOD SERVICE REPORT  
2000**

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for assembling data from existing records and completing the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Associate Director for Finance and Administration, Paperwork Reduction Project 0607-0013, U.S. Census Bureau, Room 3104, FB 3, Washington, DC 20233-0001. **PLEASE INCLUDE FORM NAME AND NUMBER IN ALL CORRESPONDENCE.** Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the top right corner of this form.

**NOTICE** – Response to this inquiry is required by law (Title 13, U.S. Code). By the same law, your report to the U.S. Census Bureau is **confidential**. It may be seen only by sworn Census employees and may be used only for statistical purposes. The law also provides that copies retained in your files are **immune from legal process**.

**PLEASE READ ALL  
ACCOMPANYING INSTRUCTIONS**

Return the completed report in the enclosed preaddressed envelope within **30 days** after you receive it. **PROMPT RETURN WILL RESULT IN CONSIDERABLE SAVINGS TO YOUR GOVERNMENT.**

**RETURN TO**  
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**U.S. Census Bureau  
1201 East 10th Street  
Jeffersonville, IN 47132-0001  
FAX 1-800-447-4613**

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

**GENERAL INSTRUCTIONS**

**Please read all instructions** and complete all items in this report. If book figures are not available, carefully prepared estimates, labeled "Est." are acceptable.

Data for locations operated by other firms, such as by franchise, should be excluded entirely from this report.

If the ID in the address label is an Employer Identification Number (EIN), this report should cover ALL accommodations and food service establishments whose payroll was reported on the Employer's Quarterly Federal Tax Return, Treasury Form 941, **under the EIN** shown. If not this report should cover ALL accommodations and food service locations operated by your company and its subsidiaries in the United States (all 50 States and District of Columbia), except for subsidiaries or operating units which have been requested to submit separate Annual Accommodations and Food Service Reports to the U.S. Census Bureau.

For those locations acquired or sold during 2000, only include data for the period they were operated by your firm.

**Include** in all items of this report, leased departments and concessions operated by this firm in establishments of others (e.g., restaurants in hotels, concession operations in sports stadiums).

**Exclude** from all items of this report, departments and concessions operated by other firms in your locations.

<b>Item 1A OWNERSHIP OR CONTROL</b> Is this company owned or controlled by another company? 050 1 <input type="checkbox"/> YES 2 <input checked="" type="checkbox"/> NO	Name of owning or controlling company 051									
	Address — Number and street		EI Number (9 digits)							
	City, State, ZIP code		-							

<b>Item 1B NUMBER OF LOCATIONS</b> Enter the total number of accommodations and food service establishments covered by this report as of December 31, 2000.	Number as of December 31, 2000 110
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<b>Item 2A TOTAL RECEIPTS FOR 2000</b> <b>See instructions for detailed directions.</b> Book figures for the calendar year 2000 should be reported in items 2a through 2c below. If book figures for the calendar year are not available, carefully prepared estimates for the calendar year are preferable to book figures covering another period.	<b>2000</b>			
	Dollars		Cents	
	100			
	a. Operating receipts, excluding sales and other taxes — <b>Include E-commerce sales. Do not include in item 2a receipts collected from customers for carrying charges or other charges for credit or sales taxes which were forwarded directly to taxing authorities.</b>	\$		.00
b. Were sales taxes or other taxes (i.e., amusement, occupancy, use, etc.) collected from customers and forwarded directly to taxing authorities? 120 1 <input type="checkbox"/> YES — Report the amount of such taxes collected. 2 <input type="checkbox"/> NO	102			
	\$		.00	
c. <b>TOTAL receipts including sales taxes collected and forwarded directly to taxing authorities — Sum of items 2a and 2b</b>	103			
	\$		.00	

<b>Item 2B E-COMMERCE RECEIPTS FOR 2000</b> <b>E-commerce sales and other operating receipts are sales of goods and services, where an order is placed by the buyer or price and terms of the sale are negotiated over an Internet, extranet, EDI network, electronic mail, or other online system. Payment may or may not be made online.</b>				
a. Did your firm have e-commerce sales/receipts during 2000? 130 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO — SKIP to item 2C.				
		<b>2000</b>		
		Dollars		Cents
b. E-commerce sales/receipts by your firm for 2000 (Include e-commerce receipts in item 2Aa. Exclude sales taxes.)		113		
		\$		.00

<b>Item 2C REPORT PERIOD</b> a. Do the data reported in items 2A and 2B represent the calendar year (January 1 through December 31) for 2000? 121 1 <input type="checkbox"/> YES — Go to item 3 2 <input type="checkbox"/> NO — Enter the period that the data represent.					
		104	Month	Day	Year
		<b>From</b>			
		105			
		<b>To</b>			

**INSTRUCTIONS**

**OPERATING RECEIPTS**

**INCLUDE** in item 2

- Credit and cash sales/receipts of merchandise

**EXCLUDE** from all parts of item 2

- Carrying or other credit charges
- Commissions from vending machine operators
- Commissions from sale of government lottery tickets

**SPECIAL INSTRUCTIONS**

**Contract feeding**

If terms of contract are —

*Include as sales* —

- Management fee basis . . . . . Management fees plus reimbursement for the cost of food, labor, and other operating expenses
- Profit-loss basis . . . . . All sales to customers
- Cost-plus basis . . . . . Sales to customers plus fees or supplements from clients

**HOTELS, MOTELS, AND ROOMING HOUSES** — Includes commercial and institutional locations engaged in furnishing lodging, or lodging and meals, on a fee basis, such as:

- Hotels, motels, tourist courts
- Rooming and boarding houses

Report receipts from guestroom or unit rentals; rentals of public rooms such as ballrooms, conference rooms, etc.; sales of meals, alcoholic beverages, and other merchandise; your share of gaming operations; and receipts from valet, laundry, parking and other guest services if these services are provided by your firm. Include in your report, hotels owned by others where you provide both management and operating staff.

E-commerce receipts are receipts of goods and services over an Internet, extranet, EDI, or other online system. Payment may or may not be made online.

**Remarks**

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**CENSUS USE**

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**Item 3 CERTIFICATION** — This report is substantially accurate and has been prepared in accordance with instructions.

Name of person to contact regarding this report <i>Print or type</i> 950	Address — <i>Number and street, city, State, ZIP Code</i> 951		954 Telephone			
			Area code	Number	Extension	
			955 Fax number			
Signature of authorized person	Title 952	Date 953	Area code	Number		
			956 Internet address (firm's homepage)			
			http://			