This document is confidential when completed.

Si vous préférez recevoir ce questionnaire en français, veuillez nous téléphoner au numéro sans frais suivant : 1 888 881-3666.

If necessary, please make address label corrections in the boxes below

	icocoodi y, pica	se make address laber corrections in the boxes below.						
0001	Legal name		0004	Address (number and street)				
0002	Business name		0005	City				
0021	Title of contact		0006	Province/ Territory or State				
	First name of contact	FU	0053	Country		0007	Postal code/ Zip code	
0028	Last name of contact	INFORM		Language preference	1 English	า	2	French

This information is collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S19. COMPLETION OF THIS QUESTIONNAIRE IS A LEGAL REQUIREMENT UNDER THIS ACT.

A - Introduction

Survey Purpose

This survey collects the financial and operating data needed to develop national and regional economic policies and programs. For more information on this survey, please access www.statcan.ca/english/survey/index.htm.

Data-sharing Agreements

In an effort to reduce reporting burden, Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. The data are kept confidential and used for statistical purposes only. Please see the enclosed Reporting Guide for details of these agreements.

Confidentiality

The Statistics Act protects the confidentiality of information collected by Statistics Canada. Please see the enclosed Reporting Guide for more information.

Fax or Other Electronic Transmission Disclosure

Statistics Canada advises you that there could be a risk of disclosure during the facsimile or other electronic transmission. However, upon receipt, Statistics Canada will provide the guaranteed level of protection afforded all information collected under the authority of the Statistics Act.

Please return the questionnaire within 30 days.

Please mail the completed questionnaire in the enclosed envelope or fax it to Statistics Canada at 1 888 883-7999.

Lost the return envelope or need help? Call us at 1 888 881-3666 or mail to: Statistics Canada, Operations and Integration Division, 150 Tunney's Pasture Driveway, Ottawa, Ontario K1A 0T6

Visit our website at www.statcan.ca





В-	B - Main Business Activity						
1.	Please describe the nature of your business.						
2.	Please ch	neck the	one	main activity which most accurately represents your main source of revenue.			
	541810	0127		Advertising agencies			
	541820	0128		Public relations services			
	541830	0129		Media buying agencies			
	541840	0138		Media representatives			
	541850	0164		Display advertising			
	541860	0165		Direct mail advertising			
	541870	0166		Advertising material distribution services (e.g., sample/advertising material direct distribution services)			
	541891	0167		Specialty advertising			
	541899	0224		All services related to advertising (e.g., merchandise demonstration services, sign painting and lettering services)			
	561420	0175		Telemarketing			
	339950	0176		Sign and display manufacturing			
		0040		None of the above – Please call 1 888 881-3666 for further instructions.			
C-	C - Reporting Period Information						
1.	Please report information for your <u>fiscal year</u> (normal business year) ending between April 1, 2006 and March 31, 2007. Please indicate below the period covered by this questionnaire.						
			YYYY				
	From	0011		To 0012			
2.	If you did not operate this business unit for a full year, please check the reason(s) below:						
		Seasor operation		² New ³ Change of ⁴ Change of ⁵ Ceased ⁶ Temporarily business fiscal year ownership operations inactive			
Reporting Instructions:							
Report for business unit(s) specified on the label on the front page.							
	- Complete only the questions that apply to your business.						
	Complete only the questions that apply to your business.When precise figures are not available, please provide your best estimate.						
	 When precise rigures are not available, please provide your best estimate. Report in Canadian dollars only. Dollar amounts and percentages should be rounded to whole numbers. 						
	 Consult the enclosed Reporting Guide for further information. 						
ט .	D - E - Not applicable						

F-	F - Industry Characteristics - Advertising and Related Services					
Advertising agencies, media buyers and media representatives						
	Total gross billings		CAN\$			
1.	Total gross billings to clients	2013	·			
	Media costs					
2.	Value of media purchases made on behalf of your clients	4051				
Plea	ase provide a breakdown of your sales in Canadian dollars.		CAN\$			
3.	Commissions and fees from sales of media time and/or space	2706				
4.	Production work performed by your own staff	2402				
5.	Public relations services	2468				
6.	Distribution of advertising content	2707				
7.	Rental and/or leasing of billboards, signs and displays	2408				
8.	Commissions and fees from sales of other services	2708				
	(please specify type of service):	2407				
9.	Sales of specialty advertising products	2000				
	Sales of other merchandise All other sales 2559	2558				
	(please specify):	2305				
12.	Total sales (sum of questions 1 to 11)					
Plea	ase provide a percentage breakdown of your sales by media type.					
13.	Television 9151	%				
	Radio 9153					
	9154 5. Print					
	9155 6. Internet					
	. Direct mail					
	9156 Other					
Please provide a percentage sales breakdown of your business clients. %						
19.	Retail trade					
20.	O. All other businesses					

2006 Survey of Service Industries:
Advertising and Related Services

5-3600-12.1C

G - Personnel							
1.	Number of non-salaried partners and proprietors (if salaried, report only at question 2 below)						
2.	a)	Number of paid employees (based on year-end T4 payroll summaries)					
	b)	Percentage of paid employees who worked full time					
				Number			
3.	Number of contract workers (for whom you did not issue a T4, such as freelancers and casual workers)						
4.		nber of volunteers (including unpaid interns and co-op students) during the reporting period imates are acceptable)	6014				
				Number of hours			
5.		al number of hours worked by volunteers during the reporting period (estimates are eptable)	6026				
Н.	H - Sales by Type of Client FOR						
Ple:		ents in Canada		0/			
	a)	Businesses	8112	%			
	b)	Individuals and households	8100				
	c)	Governments and public institutions (e.g., hospitals, schools)	8233				
2.	Clie	ents outside Canada	8140				
	Tota	al		100%			

I - ,	I - J - Not applicable						
K -	Provincial/Te	erritorial Distrib	ution				
1.	Please report the number of permanent business units/locations operating in Canada during the reporting period. Business unit is defined as the lowest level of the firm for which separate records are kept for such details as revenue, expenses and employment.						
2.	Do you have permanent business units/locations in more than one province or territory? 9966 1 Yes - Please complete question 3						
	³ No	- Please go to Secti	ion L				
3.	Please report the f	ollowing data for the p	provinces or territories	in which you have bu	ısiness units.		
	Please indicate if you are reporting in either Canadian dollars or percentages.						
		Number of business units (locations)	Total revenue	Salaries, wages and employee benefits	Amortization and depreciation of tangible and intangible assets	Total expenses	
1.	Newfoundland and Labrador	5002	4824	4826	4827	4927	
2.	Prince Edward Island	5003	4829	4831	4832	4932	
3.	Nova Scotia	5004	4834	4836	4837	4937	
4.	New Brunswick	5005	4839	4841	4842	4942	
5.	Quebec	5006	4844	4846	4847	4947	
6.	Ontario	5007	4849	4851	4852	4952	
7.	Manitoba	5008	4854	4856	4857	4957	
8.	Saskatchewan	5009	4859	4861	4862	4962	
9.	Alberta	5010	4864	4866	4867	4967	
10.	British Columbia	5011	4869	4871	4872	4972	
11.	Yukon	5014	4874	4876	4877	4977	
12.	Northwest Territories	5013	4879	4881	4882	4982	
13.	Nunavut	5012	4884	4886	4887	4987	
14.	Total	5015	4889	4891	4892	4992	

L - Contact	t Information	
0015	Date completed	Name of person to contact about this questionnaire:
YYYY	MM DD	
		0026 ¹ ☐ Mr. ² ☐ Mrs. ³ ☐ Miss ⁴ ☐ Ms
		0013 First name
		Last name
		0054
		Title
		0014
E-mail address		Website address
Telephone number	()	Extension Fax number number ()
	ou spend collecting the data	Hour(s) Minutes and completing the questionnaire?
Tiow long did yo	ou spend collecting the data	and completing the questionnaire:
M - Commo		FOR
	comments below. Please be	e assured that we review all comments with the intent to improve the survey.
9920	— IN	FORMATION ———
9913		ONLY
9914		
9915		
9916		
Thank	you for completing	this questionnaire. Please retain a copy for your records.
	, ,	Visit our website at www.statcan.ca