



2004 Annual Retail Chain Survey

Reporting Instructions:

- 1) Complete for all business locations operating during the same reporting period as indicated in Part A.
- 2) Enter all locations not listed.
- 3) Verify and update, if necessary, the business location activity with the pre-printed NAICS code (see the enclosed NAICS Reference Guide for a detailed description of the NAICS code business activity).
- 4) The sum of Total Operating Revenue of all locations on Part B must equal the totals reported on Part A.

Collected under the Authority of the *Statistics Act, Revised Statutes of Canada, 1985, Chapter S19*.
 Completion of this supplement is a legal requirement under this Act. This document is confidential when completed.
 Si vous préférez recevoir la Partie B en français, veuillez nous téléphoner au numéro sans frais suivant :
1 888 881-3666



Questionnaire Number for Combined Report	Please report for:	Questionnaire Type	Enterprise Name
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Location Number	If necessary, please correct the pre-printed information for each business location.		Total Operating Revenue (\$ CDN)	0875 Gross leasable area Indicate if area reported in:	Part Year Operation check the appropriate box below if necessary	Please provide date(s) for Part Year Operation		Comments pertaining to individual locations
	NAICS (see reference guide)	Business Location (Co. Id., Business Name and Physical Address)		1 <input type="checkbox"/> Square feet 2 <input type="checkbox"/> Square metres		0871 From Year Month	0872 To	
			2080	0876	0873 1 <input type="checkbox"/> Seasonal operation 2 <input type="checkbox"/> New store 3 <input type="checkbox"/> Change of fiscal year 4 <input type="checkbox"/> Change of ownership 5 <input type="checkbox"/> Ceased operations 6 <input type="checkbox"/> Temporarily closed 7 <input type="checkbox"/> Moved	0871 From Year Month	9921	
			2080	0876	0873 1 <input type="checkbox"/> Seasonal operation 2 <input type="checkbox"/> New store 3 <input type="checkbox"/> Change of fiscal year 4 <input type="checkbox"/> Change of ownership 5 <input type="checkbox"/> Ceased operations 6 <input type="checkbox"/> Temporarily closed 7 <input type="checkbox"/> Moved	0871 From Year Month	9921	
			2080	0876	0873 1 <input type="checkbox"/> Seasonal operation 2 <input type="checkbox"/> New store 3 <input type="checkbox"/> Change of fiscal year 4 <input type="checkbox"/> Change of ownership 5 <input type="checkbox"/> Ceased operations 6 <input type="checkbox"/> Temporarily closed 7 <input type="checkbox"/> Moved	0871 From Year Month	9921	

Comments 9920

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