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.

❸)

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

_ !! !	iecessai y, piea	se make address label corrections in the boxes below.						
0001	Legal name		0004	Address (number and street)				
0002	Business name		0005	City				
0021	Title of contact	ГО		Province/ Territory or State				
	First name of contact		0053	Country		0007	Postal code/ Zip code	
	Last name of contact	INFORM	0010	Language preference	1 English	1	<sup>2</sup> ☐ F	rench

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.

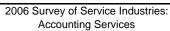
Lost the return envelope or need help? Call us at 1 888 881-3666 or mail to: Statistics Canada, Operations and Integration Division, 150 Tunney's Pasture Driveway, Ottawa, Ontario K1A 0T6

Visit our website at www.statcan.ca



Statistics

2006-08-29 STC/UES-425-75387 Statistique Canada





В	B - Main Business Activity							
1.	Please describe the nature of your business.							
	0055							
2	Places shock the ana main activity which most accurately represents your main source of revenue							
2.	Please check the <u>one main activity</u> which most accurately represents your <b>main</b> source of revenue.  Professional accounting services							
	Professional accounting services  Tax preparation services							
	Dookkeeping, payroll and related services							
	Bookkeeping, payroli and related services							
	None of the above – Please call <b>1 888 881-3666</b> for further instructions.							
C	Reporting Period Information							
1.	Please report information for your <u>fiscal year</u> (normal business year) <b>ending between</b> April 1, 2006 and							
	March 31, 2007. Please indicate below the period covered by this questionnaire.							
	YYYY MM DD YYYY MM DD							
	From							
2.	If you did not operate this business unit for a full year, please check the reason(s) below:							
	O031 1 Seasonal operations 2 New business 3 Change of ownership 5 Ceased operations 6 Temporarily inactive							
Re	porting Instructions:							
-	Report for business unit(s) specified on the label on the front page.							
-	Complete only the questions that apply to your business.							
-	When precise figures 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.							
D.	Revenue CAN\$							
1.	Sales of goods and services (e.g., rental and leasing income, commissions, fees,							
	admissions, services revenue) Report net of returns and allowances. A detailed breakdown will be requested in <b>Section F</b> .							
2.	Grants, subsidies, donations and fundraising							
3.	Royalties, rights, licensing and franchise fees							
4.	Investment income (dividends and interest)							
5.	Other revenue 2001 2077 (please specify):							
6.	Total revenue (sum of questions 1 to 5)							

E-	Expenses		
		3010	CAN\$
1.	Salaries and wages of employees who have been issued a T4 statement	3010	
2.	Employer portion of employee benefits ( <b>include</b> employer contributions to pension, medical/life insurance plans, employment insurance, etc.)	3040	
3.	Commissions paid to non-employees	4466	
4.	Professional and business service fees (e.g., legal, accounting)	4315	
5.	Outsourcing ( <b>include</b> work contracted out such as payments to freelancers, personnel suppliers, artists, etc.)	3060	
6.	Charges for services provided by your head office	4555	
7.	Cost of goods sold – <b>if applicable</b> (purchases <b>plus</b> opening inventory <b>minus</b> closing inventory)	5721	
8.	Office supplies	3301	
9.	Rental and leasing (include rental of premises, equipment, motor vehicles, etc.)	4115	
10.	Repair and maintenance (e.g., property, equipment, vehicles)	4178	
11.	Insurance (include professional liability, motor vehicles, etc.)	4350	
12.	Advertising, marketing and promotions (report charitable donations at question 22)	4365	
13.	Travel, meals and entertainment	4370	
14.	Utilities (include gas, heating, hydro, water)	4066	
15.	Telephone, Internet and other telecommunication expenses	4101	
16.	Property and business taxes, licences and permits	4410	
17.	Royalties, rights, licensing and franchise fees	4440	
18.	Delivery, warehousing, postage and courier	4179	
19.	Financial services fees (e.g., bank and credit card charges)	4325	
20.	Interest expenses	4630	
21.	Amortization and depreciation of tangible and intangible assets	4520	
22.	Charitable donations	4521	
23.	Bad debts	4542	
24.	All other expenses (please specify):	4569	
25.	Total expenses (sum of questions 1 to 24)	4699	
26.	Corporate taxes (if applicable)	4600	
27.	Gains (losses) and other items (see Reporting Guide)	4601	
28.	Net profit/loss after tax and other items (see Reporting Guide)	2304	

F-	Industry Characteristics - Accounting Services			
Plea	ase provide a breakdown of your sales.			
Plea	ase indicate if you are reporting in either Canadian dollars or percentages.			
	997	<sup>1</sup> <b>\$</b>	OR	<sup>2</sup>
1.	Audit and assurance services	38		
2.	Compilation and review services	39		
3.	General bookkeeping and accounting services	40		
4.	Payroll services	23		
5.	Taxation services for corporate clients	41		
6.	Taxation services for individuals and unincorporated businesses	42		
7.	Other taxation services	42		
8.	Insolvency and receivership services	14		
9.	Consulting services	43		
10.	Other sales (please specify):			
11.	Total sales (sum of questions 1 to 10)	)5		
G ·	- Personnel			
				la constante
1.	Number of <b>non-salaried</b> partners and proprietors (if salaried, report only at question 2 below)	63.		Number
2.	a) Number of paid employees (based on year-end T4 payroll summaries)	63	39	
		%		
	b) Percentage of paid employees who worked full time	70		
3.	Number of contract workers (for whom you did not issue a T4, such as freelancers and casual workers)	63		Number
4.	Number of volunteers (including unpaid interns and co-op students) during the reporting period (estimates are acceptable)	60	14	
				Number of hours
5.	Total number of hours worked by volunteers during the reporting period (estimates are acceptable)	60.		n nours

Н-	H - Sales by Type of Client							
Plea	Please provide a percentage breakdown of your sales by type of client.							
1.	. Clients in Canada							
	a)	Businesses 8112						
	b)	Individuals and households						
	c)	Governments and public institutions (e.g., hospitals, schools)						
2.	Clie	ents outside Canada						
	Tot	al	100%					
I -	Sal	es by Client Location						
Plea	ase p	provide a percentage breakdown of your sales by client location (first point of sale).						
			%					
1.	Nev	wfoundland and Labrador	70					
2.	Prin	nce Edward Island						
3.	Nov	va Scotia 8405						
4.	Nev	v Brunswick						
5.	Que	ebec 8420						
6.	Ont	ario 8425						
7.	Mar	nitoba 8430						
8.	Sas	skatchewan 8435						
9.	Albe	erta 8440						
10.	Briti	ish Columbia						
11.	Yuk	8455 CON						
12.	Nor	thwest Territories 8451						
13.	Nur	navut 8452						
14.	Clie	ents outside Canada						
	Tot	al	100%					

# J - International Transactions in Services

Complete this section only if you have **purchased** services, royalties and/or rights outside Canada (imports), or **sold** services, royalties and/or rights outside Canada (exports).

Please report in Canadian dollars.

**Note:** Services cover a variety of industrial, professional, trade and business services, as well as transactions in royalties, rights, licences and franchise fees but **exclude** imports and exports of goods, transportation and travel costs.

	_		CAN\$			_	CAN\$				
			Payments made to su outside Canada (im				Sales to customers outsi Canada (exports)				
			Services		Royalties and rights		Services		Royalties and rights		
1.	United States	0538		0509		0558		0548			
2.	Mexico	0539		0510		0559		0549			
3.	United Kingdom	0540		0511		0560		0550			
4.	France	0541		0512		0561		0551			
5.	Other European Union countries <sup>1</sup>	0542	-	0513	JK	0562		0552			
6.	Africa	0601	FOR	0597	TAN	0609	N	0605			
7.	Middle East countries <sup>2</sup>	0602		0598	II V	0610		0606			
8.	India	0603		0599		0611		0607			
9.	China	0543		0514		0563		0553			
10.	Japan	0544		0515		0564		0554			
11.	Other Asian Pacific countries <sup>3</sup>	0545		0516		0565		0555			
12.	Australia/New Zealand	0604		0600		0612		0608			
13.	All other countries (please specify):	0546		0517		0566		0556			
14.	Total	0547		0524		0567		0557			

Other European Union countries (defined as Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Slovakia, Slovenia, Spain, and Sweden)

<sup>2.</sup> **Middle East countries** (Armenia, Azerbaijan, Bahrain, Georgia, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Palestinian Territory, Qatar, Saudi Arabia, Syrian Arab Republic, United Arab Emirates, Yemen, etc.)

<sup>3.</sup> Other Asian Pacific countries (Brunei Darussalam, Cambodia, Indonesia, Korea, Lao People's Democratic Republic, Malaysia, Myanmar, Papua New Guinea, Philippines, Singapore, Taiwan, Thailand, Vietnam, etc.)

K - Not ap	plicable		
L - Contac	ct Information		
0015	Date completed	Name of person to contact about this questionnaire:	
YYYY	MM DD		
		0026 <sup>1</sup> ☐ Mr. <sup>2</sup> ☐ Mrs. <sup>3</sup> ☐ Miss <sup>4</sup> ☐ Ms	
		First name	
		0013	
		Last name	
		0054	
		Title	
		0014	
E-mail		Website	
address		address	
Telephone	, ,	Extension Fax	
number <sup>0017</sup>	( )	number         number         (         )           0027         0016         (         )	
		Hour(s)	Minutes
How long did	you spend collecting the data	and completing the questionnaire?	
M - Comm	nents	FOR	
	r comments below. Please be	assured that we review all comments with the intent to improve the survey.	
9920		OKINATION	
		ONLV	
		UNLI	
9913			
-			
9914			
9915			
9916			
-			
Thank	you for completing	this questionnaire. Please retain a copy for your record	ds.
	-	Visit our website at www.statcan.ca	