This document is confidential when completed. Si vous préférez recevoir ce questionnaire en français, veuillez nous appeler au numéro sans frais suivant : 1-888-881-3666.

If nacessary please make address label corrections in the hoves below

	in neocooding, piedoe make address label contestions 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				
0000	First name of contact	F(	0053	Country		0007	Postal code/ zip code	
00-0	Last name of contact	INFORI	0010	Language preference	1 English		2	French

This information is collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S-19. 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 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



5-3600-180.1C

Statistics

2007-08-15 STC/UES-425-75387 Statistique

2007 Survey of Service Industries: **Accounting Services** 



B - Main business activity					
1.	Please describe the nature of your business.  0055				
2.	Please check the <u>one main activity</u> which most accurately represents your <b>main</b> source of revenue.  O290 Professional accounting services				
	Tax preparation services  Description:  Desc				
C-	None of the above — Please call 1-888-881-3666 for further instructions.  Reporting period information				
1.	Please report information for your <u>fiscal year</u> (normal business year) <b>ending between</b> April 1, 2007 and March 31, 2008. Please indicate below the period covered by this questionnaire.  yyyyy mm dd yyyyy mm dd from 0011 to 0012				
2.	If the reporting period does not cover a <b>full year</b> , please check the reason(s) below:  Output  Output  Description:  Output  Descr				
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. Dollar amounts and percentages should be rounded to whole numbers.  Consult the enclosed reporting guide for further information.				
D a	and E - Not applicable				

F - Industry characteristics							
Please provide a breakdown of your sales.							
1.	Auditing and other assurance services	2638	CA	AN\$			
2.	General accounting services (include financial statement compilation services)	2729					
3.	Bookkeeping services	2537					
4.	Payroll services	2423					
5.	Tax preparation and representation services for corporate and other clients	2540					
6.	Tax preparation and representation services for individuals and unincorporated businesses	2541					
7.	Tax planning and consulting services	2763					
8.	Insolvency and receivership services	2544					
9.	Management consulting services	2643					
10.	Other sales (please specify):	2558					
11.	Total sales (sum of questions 1 to 10)						
G ·	- Personnel						
1.	Number of partners and proprietors, <b>non-salaried</b> (if salaried, report at question 2 below)		6321	number			
2.	Paid employees						
	a) average number of paid employees during the reporting period (see reporting guide)		6339				
			%				
	b) percentage of paid employees (from question 2a) who worked full time	328					
3.	Number of contract workers for whom you did not issue a T4, such as freelancers and casual		6320	number			
<b>J.</b>	workers (estimates are acceptable)		6014				
4.	Number of volunteers during the reporting period (estimates are acceptable)						
5.	Number of hours worked by all volunteers during the reporting period (estimates are acceptable)		6026	number of hours			

н-	H - Sales by type of client					
Please provide a percentage breakdown of your sales by type of client.						
1.	Clients in Canada					
	a) businesses	112				
	b) individuals and households	100				
	governments, not-for-profit organizations and public institutions (e.g., hospitals, schools)	233				
2.	Clients outside Canada	140				
		100%				
-	Sales by client location					
Plea	ase provide a percentage breakdown of your sales by client location (first point of sale).					
	8	<b>%</b>				
1.	Newfoundland and Labrador					
2.	Prince Edward Island	415				
3.	Nova Scotia	405				
4.	New Brunswick FORMATION 8	410				
5.	Quebec	420				
6.	Ontario	425				
7.	Manitoba	430				
8.	Saskatchewan	435				
9.	Alberta	440				
10.	British Columbia	445				
11.	Yukon	455				
12.	Northwest Territories 8	451				
13.	Nunavut	452				
14.	Clients outside Canada (must equal question 2 in section H)	401				
		100%				
Ja	and K - Not applicable					

L - Contact information								
Name of person to contact about this questionnaire:								
O026 1 Mr. 2 Mrs. 3 Miss 4 Ms								
0054 Last name			elephone umber					
<sup>0013</sup> First name		002.	xtension umber					
<sup>0014</sup> Title		0010	ax umber					
0018 E-mail address			Vebsite ddress					
Date completed:	yyyy mm	dd		hour(s)	minutes			
How long did you sp	end collecting the data and completing the	questionna	aire?	9910	9909			
M - Comments  We invite your comments below. Please be assured that we review all comments with the intent to improve the survey.  9920								
	ONLY							
9913								
9914								
9915								
9916								
Thank you for completing this questionnaire. Please retain a copy for your records.								
Visit our website at www.statcan.ca								