

Appendix 4 Form of Questionnaire

Classified

Monthly Survey on Service Industries Questionnaire for the first month

General Statistical Survey
Obtained Approval from the Minister of Internal Affairs
and Communications : 27 July 2010

The Statistics Bureau of Japan

● This questionnaire will not be used for purposes other than statistics.
Please be sure to state the complete truth.

● Please fill numbers in, one per box and aligned to the right.
When you find no relevant personnel or sales amount, please fill in "0" but do not leave them blank.

● Please use a black pencil or a mechanical pencil to fill in. In case you made mistakes, please erase completely with an eraser.

year

 month

Please fill in for the preprinted month and the previous month.

《Address》

Please fill in as it may be necessary to contact you.

Telephone () (EXT.)

Please take care not to smudge, fold or roll it.

1 Legal organization and capital value	1 Individual proprietorship 2 Stock company (including limited company) 3 General partnership company and limited partnership company 4 Limited liability company 5 Mutual company 6 Foreign company (head office/head quarterers in a foreign country) 7 Corporation excluding company (incorporated association incorporated foundation medical juridical person) 8 Organization other than corporation (council being not registered as a legal person, etc.)
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Capital or investment fund , , , thousand-yen

Please round to the nearest zero. Please refrain from writing the Yen mark.

2 Persons working at the location of establishment at the end of month (Please fill in based on the last business day of the month.)

(1) Number of persons engaged in business (excluding dispatched or subcontracted employees to separately operated establishment)	At the end of previous month	At the end of present month
① Salaried directors, Individual proprietors, Non-paid family workers	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)
Regular employees <small>•Those who have been employed indefinitely or more than one month or those who were employed for 18 days or more in this month and the previous month.</small>	② Full-time employees	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)
	③ Persons other than ②	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)
④ Non-regular workers <small>(Those workers other than regular employees)</small>	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)
Total number (total of ①~④)	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)	<input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> person(s)

(2) Other than (1), those who work as dispatched or subcontracted employees from separately operated establishments

, person(s) , person(s)

3 Monthly sales (income) of the establishment
This is sales (income) for supply of services and sales (income) of articles (including indirect tax, consumption tax, etc.).
Please include the amount of sales for the month that the service is provided regardless of the actual payment date.

•Please round to the nearest zero. •Please refrain from writing the Yen mark.	Monthly sales (income) in the previous month <input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> thousand-yen	Monthly sales (income) in the present month <input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> , <input style="width: 20px; height: 20px;"/> thousand-yen
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4 Type of the major business of establishment

1 Yes 2 No Please state the major business.

Remarks

Municipality code	Enumeration district No.	Establishment No.	*	Column for survey taker
<input style="width: 20px; height: 20px;"/>	<input style="width: 20px; height: 20px;"/>	<input style="width: 20px; height: 20px;"/>	<input style="width: 20px; height: 20px;"/>	<input style="width: 20px; height: 20px;"/>