

2017 Commodity Flow Survey

INSTRUCTION GUIDE

This guide provides additional information to help you answer each question of the Commodity Flow Survey (CFS).

To complete the CFS online:

1. Please visit <https://econhelp.census.gov/cfs>
2. Click on the "Survey Log in" button
3. Use the user ID and password provided on your letter or first page of the questionnaire
4. Instructions and other useful tools to complete the CFS online can be found on the website (see 1 above)
5. If you need to contact us by telephone, call us at 1-800-772-7851, option "3", between 8:30am and 5:00pm Eastern Time

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SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE

Item A – Verification of Name and Shipping Address

Verify that the name and shipping address listed in the textbox are correct from where your shipments originate. If the name and shipping address are correct, mark an (X) in the “Yes, the name and shipping address are correct” box and continue to Item B on page 2. If any component of the name and shipping address is incorrect, mark the “No, the name and/or shipping address is incorrect” box and make the corrections in the space provided for each address component in Item A.

Item B – Verification of Name and Mailing Address

Mark an (X) in the box that correctly identifies the name and mailing address.

If you prefer the future CFS correspondence to be sent elsewhere, as to a headquarters or office building that reports for the physical shipping location, mark the appropriate box and use the space provided to enter the preferred mailing address.

Item C – Operating Status

Mark an (X) in the box that best describes this location’s operating status during the designated reporting week. If this location’s operating status is described as either “Temporarily or seasonally inactive” and made no outbound shipments during the designated reporting week, mark an (X) in the appropriate box, proceed to Item G – “Verification of Primary Industry Activity”.

If this location’s operating status is described as “Ceased operation” and made no outbound shipments during the designated reporting week, mark an (X) in the appropriate box, enter the date the location ceased operation and proceed to Item G – “Verification of Primary Industry Activity”.

If the location was sold or acquired, select the “In operation” box and describe these operations changes in Item J – “Remarks”.

Item D – Total Number and Value of Outbound Shipments

Item D1 – Total Number of Outbound Shipments

An **outbound** shipment is a movement of commodities from your location to another single location, in one trip.

A **single shipment** may have multiple pieces, and go by multiple vehicles, such as unit trains or truck convoys, but only one destination. For example, a full truckload should be counted as a single shipment only if all the commodities on the truck are destined for one location. For a less than truckload (LTL), only that part of the load that is transported from the same origin and is delivered to the same destination in one delivery is counted as one shipment.

On the other hand, commodities sent from your location to multiple destinations constitute **multiple shipments**. Each location on the route to which your commodities are delivered is considered one shipment.

SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE – Continued

Item D – Total Number and Value of Outbound Shipments – Continued

Item D1 – Total Number of Outbound Shipments – Continued

"**Commodities**" refer to items that this location produces, sells, or distributes. Waste products of your location's operation (that have no value for your location) are not considered commodities and should not be reported.

In the space provided, enter the total number of outbound shipments *for the one-week reporting period printed* in Item D1.

Shipments to Include:

- Any materials picked up by the customer ("customer pick-up")
- Only those shipments that were sent from the address listed in Item A
- Shipments made from the location listed on Item A on behalf of another establishment (Drop-Shipments)
- Shipments of commodities of all sizes, by any mode of transportation (e.g., parcels, truck, railroad)
- Any shipment of products from this location to another location of the company that are intended for sale (e.g., products moved from this location to a company warehouse)

Shipments to Exclude:

- Drop-shipments, made from another location other than the shipping address in Item A
- Internal administrative items such as inter-office memos, payroll checks, business correspondence
- Promotional items sent to potential customers free of charge
- Refuse and waste items such as scrap paper, waste, and recyclable materials unless this location is in the business of selling these materials
- Items moved from this location to another location of the company if not intended for commercial activity (e.g., the transfer of office furniture to be used at another location of this company)

Item D2 – Total Value of Outbound Shipments

Enter the total value in dollar amount for the outbound shipments you reported in Item D1. The value should not include freight charges or excise taxes (i.e., report the net selling value, freight on board plant). If the value is not readily available from your records, please estimate.

Item D3 – Obtaining a Sample of Shipments to Report

Mark an (X) in the appropriate box in Item D3 to indicate whether you have reported more than 40 shipments in Item D1.

If "Yes" is marked, continue with Item E on page 3 to determine the sample of shipments that your location should report in Item F.

If "No" is marked, proceed to Item F beginning on page 4 and report the information requested for all shipments made during the assigned week.

SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE – Continued

Item E – Sampling Instructions

If you have more than **40** outbound shipments for the one-week reporting period, report only a sample of them in Item F. Using the table in Item E, locate the row that includes the number of outbound shipments you reported in Item D1 and the corresponding “report every” number. Mark an (X) in the space provided.

We need a representative sample of all outbound shipments that you reported for the week in Item D1. When sampling your shipments, please use all your files that reflect the full range of your location shipping activities, regardless of modes of transportation used, type of commodities or products shipped, customers, or destinations.

If you still have questions about the sampling process (or any part of the questionnaire) call us at 1-800-772-7851, option “3”, from 8:30 a.m. to 5:00 p.m. ET.

Item F – Shipment Characteristics

Most businesses will be asked to report at most 40 shipments in Item F. However, businesses that ship a high volume of commodities might be asked to report on up to 80 shipments - to capture the diversity of goods and destinations to which they ship. Pages 8-11 of the questionnaire are provided just in case more than 40 shipments need to be reported in Item F.

- **Shipment ID Number, Column (B)** – Enter the invoice number, shipment number, or some other unique identification number that your location could use to find this particular shipping document if questions arise regarding your report.
- **Shipment Date, Column (C)** – Enter the month and day of the shipment. If shipment date is not available, use the invoice/shipping document date. Use numbers only.
- **Shipment Value, Column (D)** – Enter the dollar value, in whole dollars, of the entire shipment. The value should not include freight charges or excise taxes, i.e., report the net selling value, Freight On Board plant (FOB plant). If the value is not readily available from your records, please estimate.
- **Net Shipment Weight, Column (E)** – Enter the net weight of the total shipment in whole pounds. If net weight is not readily available from your records, please estimate. Convert all other types of measurements to whole pounds. If you are not able to express the weight in pounds, please state in Item J – “Remarks”, the unit you are reporting in. Estimates are acceptable.
- **SCTG Commodity Code, Column (F)** – Use the list of commodity codes provided in the accompanying *2017 Standard Classification of Transported Goods (SCTG) Commodity Codes* booklet to select the proper 5-digit code. For shipments with more than one commodity, enter only the code for **the commodity with the greatest weight**. Mixed freight categories are also available for some of the commodity groups in the SCTG Manual. For assistance in locating the appropriate commodity code, refer to the alphabetized quick reference at the beginning of the *2017 SCTG Commodity Codes* booklet. An electronic version of this booklet is also available at <https://econhelp.census.gov/cfs>.

SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE – Continued

Item F – Shipment Characteristics – Continued

- **Commodity Description, Column (G)** – Enter a brief description of the commodity shipped. For shipments with more than one commodity, **describe only the commodity with the greatest weight**. Do not use trade names, catalog numbers, or other codes not familiar to persons outside your business.
- **Temperature Controlled, Column (H)** – If the item described in column (G) requires temperature controlled, enter “Y” for Yes otherwise enter “N” for No in column H. In this survey, a **temperature controlled** shipment is defined as a shipment that needs to be, and is transported in a vehicle, container, or special packaging that either actively (by the use of an on board powered system), or passively (either with or without coolants) regulates, or maintains the required temperature range (e.g. warm, cold, frozen) of the shipment during all phases of the transportation.

Example: If the item listed in column (G) is a pharmaceutical product that is required to be shipped in a foam container to regulate the temperature of the item, you would enter “Y” for yes it was temperature-controlled.
- **Hazardous Materials, Column (I)** – If the item described in column (G) is a hazardous material, enter the 4-digit United Nations (UN) or North American (NA) number.

For a mixed shipment, in which the heaviest item is required to be reported is not a hazmat, but other commodities in the shipment are hazmat, the shipment should not be marked as hazmat, and column (I) should be left blank.

If you prefer to complete the questionnaire online, please go to <https://econhelp.census.gov/cfs>

Item F SHIPMENT CHARACTERISTICS

NOTE: Each line runs across pages 4 and 5. After entering column (I) data on page 4 for any line, continue with column (J) on page 5 for the same line.

Line No. (A)	Your Shipment ID Number (B)	Shipment Date (C)		Shipment value (excluding freight charges and excise taxes) in whole dollars . Estimates acceptable. (D)	Net Shipment Weight in pounds . Estimates acceptable. (E)	For shipments consisting of more than one commodity, report the code and description of the commodity that contributed the greatest weight of the shipment in columns (F) through (I)				Continue with column (J) on page 5
		Month	Day			SCTG commodity code from accompanying booklet ¹ (F)	Commodity Description ¹ (G)	Is item in col. (G) Temperature controlled? ^{1,2} (Y/N) (H)	Is item in col (G) a hazardous material? Enter "UN" or "NA", number (I)	
Ex.1	123-5	4	26	224,235	4,840	34520	Mechanical machinery	Y		→
Ex.2	402H	4	26	1,375	50,125	20222	Sulfuric acid	N	1830	→
1										→
2										→

SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE – Continued

Item F – Shipment Characteristics – Continued

- **U.S. Destination or U.S. Exit Port, Column (J)** – For domestic shipments, enter the city, state, and 5-digit ZIP Code of the buyer/receiver's "**ship to**" address as it appears on the shipping document. Do not spell out the state name, rather use the two-letter state postal abbreviation shown in the State Postal Abbreviation List in Section 3 of this guide.

For Customer Pick-ups only, enter the customer's address. If unknown, enter this location's shipping address.

Important – For export shipments, report the **U.S. port of exit** as the destination city. The port of exit is the port, airport, or the border crossing from which the shipment left the country.

- **Mode(s) of Transport to U.S. Destination, Column (K)** – Enter the code(s) for **all** modes of transport used for the shipment to its U.S. destination. For your reference, mode of transport codes are listed below Item F on the bottom of pages 5, 7, 9, and 11 of the questionnaire. Please refer to Section 2 for further information about the modes of transport. Enter all modes used in the sequence in which the modes are used.

Do not use commas (,), dashes (-), or spaces to separate each mode.

Do not include the export mode of transport in this column – the export mode should be reported in **Column (N)**.

For Customer Pick-ups – Report the mode(s) of transportation used, if known. Otherwise, report mode as "0" (unknown).

- **Export, Column (L)** – Indicate whether the shipment is intended for export outside of the United States, by entering a "Y" for yes and "N" for no. For the purposes of this survey, shipments to Puerto Rico and U.S. territories and possessions are considered exports.
- **Foreign Destination, Column (M)** – Only respond if answer in Column (L) is "Y". Enter the foreign city and country of destination. Make sure Column (J) and Column (K) only contain the domestic portion of the shipment.

SECTION 1 — INSTRUCTIONS FOR COMPLETING YOUR QUESTIONNAIRE – Continued

Item F – Shipment Characteristics – Continued

- **Export Mode, Column (N)** – Only respond if the shipment is an export and answer in Column (L) is "Y". Enter the code for the mode of transport by which the shipment left the country. For your reference, mode codes are listed below Item F on pages 5, 7, 9, and 11 of the questionnaire. Refer to Section 2 for more information about modes of transport.

If you prefer to complete the questionnaire online, please go to https://leconhelp.census.gov/cfs							
U.S. Destination or U.S. Exit Port (Complete for all shipments.) *For customer pick-ups, see below (J)			Mode(s) of transport to U.S. destination. Enter all that apply in order used. Use codes at bottom. (K)	Export? (Y/N) (L)	Foreign Destination (for export shipments only) Note: In column (J) enter the U.S. port, airport, or border crossing of exit. (M)		Export mode (N)
City	State	ZIP Code			City	Country	
Los Angeles	CA	90040	24	Y	Beijing	China	6
Newark	NJ	07105	4	N			

Item G – Verification of Primary Industry Activity

Your location's primary industry activity is listed in Item G. If you agree with the primary activity listed, please mark the "Yes" box. If you disagree with the primary activity listed, please mark the "No" box and write a description of your industry in the box provided.

Item H – Time to Complete Survey

Enter the total time that was needed to complete this survey up to this question. Include the time it took to read the instructions, to gather the information needed, and to enter and verify the data. Also, include time by all staff who contributed to completing the survey. If completing this survey took one hour and thirty minutes, enter "1" in the box before "Hours" and "30" in the box before "Minutes".

Item I – Contact Information Regarding This Survey

Enter your name, title, phone, and fax number in the event that we have any questions about your survey.

Item J – Remarks

Use this space for your remarks, for clarifying your responses, or for stating any critical business changes that have recently occurred or are forthcoming (e.g., closures, plant renovations, merges, etc.).

SECTION 2 — MODE OF TRANSPORTATION

CODE

MODE

- | | |
|---|--|
| 1 | Parcel delivery/Courier/U.S. Parcel Post – Includes shipments of packages that each weigh 150 pounds or less, and are transported by a for-hire carrier. |
| 2 | Company-owned truck – Trucks operated by employees of this location or the buyer/receiver of the shipment. This includes trucks providing dedicated services to this location. |
| 3 | For-hire truck – Shipments by common or contract carriers made under a negotiated rate. |
| 4 | Railroad – Any common carrier or private railroad. |
| 5 | Inland water – Barges, ships, or ferries operating primarily in navigable waters, both within and along the borders of the United States, such as:
Rivers – <i>Examples: the Mississippi River and Saint Lawrence Seaway</i>
Lakes – <i>Examples: the Great Lakes</i>
Along the shoreline but actually in the ocean –
<i>Examples: Intracoastal Waterway along the Atlantic and Gulf coasts and the Inside Passage of Alaska</i>
Canals, harbors, major bays, and inlets |
| 6 | Deep sea – Barges, ships, or ferries operating primarily in the open waters of the ocean, outside the borders of the United States. |
| 7 | Pipeline – Movements of petroleum, gas, slurry, etc. through pipelines that extend to other locations or locations beyond the shipper's location. (Aqueducts for the movement of water are not included.) |
| 8 | Air – Any shipment sent via air mode. |
| 9 | Other mode – Any mode not listed above. |
| 0 | Unknown – Unable to determine the mode of transportation. |

Note: Transportation equipment that is "shipped" under its own power, such as boats, barges, ferries, ships, aircraft, trucks, and trains **should be classified with the appropriate mode above**. Transportation equipment shipped under its own power for which an appropriate mode is not listed (e.g., buses, recreational vehicles) should be listed as "**other mode**".

SECTION 3 – STATE POSTAL ABBREVIATION LIST

Alabama	AL	Montana	MT
Alaska	AK	Nebraska	NE
Arizona	AZ	Nevada	NV
Arkansas	AR	New Hampshire	NH
California	CA	New Jersey	NJ
Colorado	CO	New Mexico	NM
Connecticut	CT	New York	NY
Delaware	DE	North Carolina	NC
District of Columbia	DC	North Dakota	ND
Florida	FL	Ohio	OH
Georgia	GA	Oklahoma	OK
Hawaii	HI	Oregon	OR
Idaho	ID	Pennsylvania	PA
Illinois	IL	Rhode Island	RI
Indiana	IN	South Carolina	SC
Iowa	IA	South Dakota	SD
Kansas	KS	Tennessee	TN
Kentucky	KY	Texas	TX
Louisiana	LA	Utah	UT
Maine	ME	Vermont	VT
Maryland	MD	Virginia	VA
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY
Missouri	MO		