

We would like your opinion of business conditions. Please complete this questionnaire by selecting the appropriate buttons, then click SUBMIT.

CONFIDENTIAL: The Federal Reserve Bank of New York will consider your responses to be confidential financial information, which we will not disclose unless required by law. All published results will present aggregate figures only.

Respondent Information

Firm Information

| Firm Name: January 07, | 2003 | | First Name: Last Name: Title: | | | |
|--|----------------------|--------------|---|----------|--------------|----------|
| Manufacturing Sur | vey | | | | | |
| | January vs. December | | Six months from now vs. January | | | |
| Indicator | Decrease | No Change | Increase | Decrease | No Change | Increase |
| General Business Conditi | ons: | | | | | |
| What is your evaluation of the level of general business activity? | O | \circ | O | 0 | O | 0 |
| Company Business Indica | ators relating to | your facilit | ies in New Yor | k State: | | |
| New Orders | O | \circ | \circ | \circ | \odot | \circ |
| Shipments | 0 | \circ | \circ | O | \circ | O |
| Unfilled Orders | \circ | \circ | \circ | \circ | \circ | O |
| Delivery Time | \circ | \circ | \circ | O | \circ | O |
| Inventories | 0 | \circ | \circ | O | \circ | O |
| Prices Paid | 0 | \circ | \circ | O | \circ | O |
| Prices Received | \circ | \circ | \circ | O | \circ | O |
| Number of Employees Including Contract Workers | O | O | O | O | O | 0 |
| Average Employee Workweek | O | 0 | O | \circ | 0 | 0 |
| Technology Spending | | | | \circ | 0 | 0 |
| Capital Expenditures | | | | \circ | \circ | 0 |

Please comment on any special factors that may be affecting your business.