



Republic of Ghana

GHANA STATISTICAL SERVICE
P.O. BOX GP1098
ACCRA

7

INTEGRATED BUSINESS ESTABLISHMENT SURVEY (IBES) 2015

HUMAN HEALTH AND SOCIAL WORK ACTIVITIES
EDUCATION SERVICE
PROFESSIONAL SCIENTIFIC & TECHNICAL ACTIVITIES
BANKING SERVICE ACTIVITIES
INSURANCE SERVICES ACTIVITIES

(CALENDAR YEAR 2013 OR FINANCIAL YEAR INCLUDING AT LEAST SIX MONTHS OF 2013)

GENERAL INFORMATION

This questionnaire is for Human Health and Social Work Activities, Education Service, Professional Scientific and Technical Activities, Banking Service and Insurance Services. A questionnaire must be completed for each establishment. An interviewer will visit each establishment and assist in completing the questionnaire. A copy of the questionnaire may be retained for the establishment's record.

If book figures are not available, carefully prepared estimates will be accepted.

INFORMATION SUPPLIED CONFIDENTIAL

All information supplied is confidential under the Statistical Service Law, P. N. D. C. Law 135. The information shall be used by Statistical Service in the preparation of statistics in accordance with the Statistical Service Law. The information provided shall not be used for the purpose of taxation.

In case of any further enquiries, please contact: 0244865832 / 0243267403 / 0244760080 / 0504833815

INSTRUCTION FOR COMPLETING THIS QUESTIONNAIRE

- a. PLEASE COMPLETE ALL PARTS OF EACH QUESTION INCLUDING TOTALS. DO NOT WRITE IN MARKED **“FOR OFFICE USE”** READ INSTRUCTION ACCOMPANYING EACH QUESTION BEFORE COMPLETING.
- b. Use a dash (-) where the question is applicable but no data is available.
- c. Where the response to a question is zero, print ‘0’
- d. If a question does not apply, write N/A (i.e. Not Applicable) in the space provided.
- e. All monetary values should be recorded in GH CEDIS except where otherwise indicated in a question.
- f. The accounting period covered by this questionnaire should include at least six (6) months of 2013.

SECTION 1: IDENTIFICATION AND CLASSIFICATION INFORMATION

ESTABLISHMENT REFERENCE NUMBER

ENUMERATION ZONE NUMBER

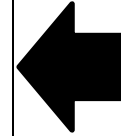
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1.1: NAME AND PHYSICAL LOCATION OF ESTABLISHMENT

1.1.1	NAME OF ESTABLISHMENT:
1.1.2	STREET NAME:
1.1.3	SUBURB/AREA:
1.1.4	EXACT LOCATION:

1.1.5	TOWN NAME:
1.1.6	DISTRICT NAME
1.1.7	REGION NAME:

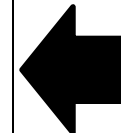


PLEASE
AMEND IF
INCORRECT

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1.2: OTHER INFORMATION

1.2.1:	POSTAL ADDRESS:										
1.2.2:	TELEPHONE NUMBER: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
1.2.3:	E-MAIL ADDRESS:										
1.2.4	FORM OF ORGANIZATION (e.g. Head Office, Subsidiary, Single establishment):										
1.2.5:	TYPE OF OWNERSHIP (Private, Public, PPP):										
1.2.6:	NATIONALITY OF OWNERSHIP:										
1.2.7	TYPE OF LEGAL ORGANIZATION (e.g. Limited Liability Co., Partnership Etc.):										
1.2.8	NAME OF CONTACT PERSON:										
1.2.9	YEAR OF COMMENCEMENT OF BUSINESS										



PLEASE
AMEND IF
INCORRECT

1.3 PERIOD OF OPERATION DURING 2013

1.3.1 PERIOD OF OPERATION DURING 2013

Mark (X) in the box that applies

1 Operated throughout 2013.
(Skip to 1.4.1)

2 Operated for only part of 2013
(enter number of months).....
and mark (X) in the appropriate boxes for the period of operation.

J	F	M	A	M	J	J	A	S	O	N	D

3 Establishment did not operate during 2013.

1.4 REASON(S) FOR NOT OPERATING THROUGHOUT THE YEAR

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1.4.1 How many years has the establishment been located at the current address?

1.4.2 What were the reasons for locating at the present address? (Multiple responses are possible)

A	It is close to the place where the founder was born, grew up or has family	
B	Infrastructure (power, roads etc.) is good	
C	It is close to where customers are located	
D	There are many workers that the establishment needs in the vicinity	
E	It is close to important suppliers / raw material	
F	Rents / land prices are cheap	
G	The environment is dynamic / it is close to other successful firms	
H	Other (specify)	

1.4.3 PERIOD OF NORMAL PRODUCTION

For which of these months was the establishment's production average/normal?
Mark (X) in the appropriate boxes.

J	F	M	A	M	J	J	A	S	O	N	D

1.5 TYPE OF RECORDS OF ACCOUNT KEPT BY ESTABLISHMENT

Does the establishment keep some form of record or accounts? Mark (X) in the box that applies

1 YES 2 NO (*Skip to 1.6*)

1.5.1 ACCOUNTING PERIOD

Please state the accounting period covered by this questionnaire.

From / / 20 to / / 20
(DD/MM/YY)

1.6 PRINCIPAL ACTIVITY

1.6.1: Describe establishment's principal activity during the 2013 financial year.

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.....

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1.6.2: Other activities during the 2013 financial year

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1.6.2.1
1.6.2.2
1.6.2.3

1.6.3 Is the principal activity the same for the 2014 financial year?

Mark (X) in the box that applies

1 YES 2 NO

If No, state the principal activity for the 2014 financial year

.....
.....
.....

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SECTION 2: EMPLOYMENT AND EARNINGS

2. PERSONS ENGAGED

State the number of persons engaged in the following categories during the pay period nearest to 30th June, 2013.

2.1 EMPLOYEES (2.1.1 + 2.1.2)

All persons working for and paid by the establishment.

INCLUDE Such person whether working full-time or part-time.

INCLUDE employees on sick leave, paid vacation and study leave with pay

2.1.1 PERMANENT WORKERS

2.1.2 TEMPORARY WORKERS

2.2 UNPAID WORKERS (sum of 2.2.1, 2.2.2 & 2.2.3)

2.2.1 WORKING PROPRIETOR AND ACTIVE BUSINESS PARTNER

Proprietors and partners who are actively engaged in the management of the establishment and are not paid a salary or wage. (Managers and directors of corporations working for pay should be reported with “employees”)

2.2.2 LEARNERS

INCLUDE All persons undergoing on the job training without pay, including unpaid apprentices.

2.2.3 CONTRIBUTING FAMILY WORKERS

Family members of any of the owners who work in the establishment without pay for at least one-third of the normal working period.

2.3 NATIONAL SERVICE PERSONS

2.4 TOTAL (sum of 2.1; 2.2 and 2.3)

PAY PERIOD NEAREST TO 30TH JUNE, 2013		
TOTAL	MALE	FEMALE
////////////////////	////////////////////	////////////////////
////////////////////	////////////////////	////////////////////
////////////////////	////////////////////	////////////////////
////////////////////	////////////////////	////////////////////
////////////////////	////////////////////	////////////////////
////////////////////	////////////////////	////////////////////
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////////////////////	////////////////////	////////////////////

3. WAGES AND SALARIES (CASH AND IN KIND) PAID TO EMPLOYEES DURING THE 2013 FINANCIAL YEAR

State all payments, whether in cash or in kind, to employees for work done during the 2013 financial year. In kind refers to the estimated net cost to the employer of those goods and services furnished to employee free of charge or at markedly reduced cost.

ALL CASH PAYMENTS

- INCLUDE* Wages and salaries, other cash payments, e.g. bonuses and cost of living allowance.
- INCLUDE* Wages paid during vacation, sick leave and study leave with pay
- INCLUDE* Contribution payable by the employees and deducted by the employer such as the Social Security and National Insurance Trust (SSNIT) contributions, taxes, group insurance premium and the like.

GOODS AND SERVICES PAID IN KIND

- INCLUDE* Estimated cost of subsidized housing, transport, medical care, free uniforms, goods and the like.

TYPE OF PAYMENTS	WAGES AND SALARIES
	ALL PAYMENTS IN CASH AND KIND (GH CEDIS)
3.1 All Cash Payment	
3.2 Goods and Services paid in kind	
3.3 TOTAL	

4. SUPPLEMENTS TO WAGES AND SALARIES DURING THE 2013 FINANCIAL YEAR

- INCLUDE* Employer's contribution on behalf of employees to the Social Security and National Insurance Trust (SSNIT), private pension plans, workmen's accident compensation plan and insurance premiums on hospital and medical schemes and the like.

(GH CEDIS)

4.1 Social Security	
4.2 Others	
4.3 TOTAL	

SECTION 3: STOCKS

5. STOCKS OF THIS ESTABLISHMENT DURING THE 2013 FINANCIAL YEAR

INCLUDE the value of all stocks held at the establishment itself or in ancillary locations such as warehouses

INCLUDE goods owned by this establishment but held by others.

EXCLUDE goods owned by others but held by this establishment.

VALUATION should be at book value.

TYPE OF STOCK	VALUE OF STOCKS (GH CEDIS)	
	AT BEGINNING OF FINANCIAL YEAR 2013 1	AT END OF FINANCIAL YEAR 2013 2
5.1 Consumables and supplies		
5.2 Goods purchased for resale		
5.3 Other (Specify)		
5.4 TOTAL (sum of 5.1 to 5.3)		

SECTION 4: FIXED CAPITAL FORMATION

6. VALUE OF FIXED ASSETS DURING THE 2013 FINANCIAL YEAR

VALUE OF FIXED ASSETS AND DEPRECIATION ALLOWED DURING THE 2013 FINANCIAL YEAR

Enter the book value of fixed assets at the beginning of the financial year and depreciation allowed at current replacement cost of assets used up during the year through normal wear and tear, foreseen obsolescence and the normal rate of accidental damage.

BOOK VALUE OF FIXED ASSETS PURCHASED (Column 1)

INCLUDE the book value of fixed assets acquired by the establishment prior to the 2013 financial year.

FIXED ASSETS PURCHASED (Column 2)

INCLUDE the cost of new fixed assets acquired by the establishment during the 2013 financial year.

SALES OF FIXED ASSETS (Column 3)

INCLUDE the value of sale of fixed assets during the 2013 financial year.

DEPRECIATION OF FIXED ASSETS (Column 4)

INCLUDE depreciation allowed at current replacement cost of assets used up during the year through normal wear and tear, foreseen obsolescence and the normal rate of accidental damage.

BOOK VALUE OF FIXED ASSETS PURCHASED (Column 5)

INCLUDE the book value of fixed assets acquired by the establishment as at the end of 2013 financial year.

VALUATION Value at full cost incurred, that is at delivered cost plus the cost of installation including any fee and taxes but excluding financial costs.

ASSETS	BOOK VALUE AS AT THE BEGINNING OF FINANCIAL YEAR 2013 (GH CEDIS) 1	FIXED ASSETS PURCHASED IN 2013 2	VALUE OF SALES OF FIXED ASSETS (GH CEDIS) 3	DEPRECIATION (GH CEDIS) 4	BOOK VALUE AS AT THE END OF FINANCIAL YEAR 2013 (GH CEDIS) 5
6.1 Land (undeveloped land)				//////////////////// ////////////////////	
6.2 Residential Buildings					
6.3 Non-Residential Building					
6.4 Other construction and land improvements					
6.5 Machinery, plant and other equipment (except for transport & electricity)					
6.6 Generation set & Plant					
6.7 Transport and equipment					
6.8 Furniture, fixtures & office equipment					
6.9 ICT equipment					
6.10 Research & development					
6.11 Computer software					
6.12 Entertainment, Literary and artistic originals					
6.13 Other Intellectual Property product					
6.14 Other (Specify)					
6.15 TOTAL (sum of 6.1 to 6.14)					

SECTION 5: INPUT COSTS

7.1 REPORTING PERIOD IN 2013 (TIME PERIOD)

For the period 2013, what is the easiest **time period** for you to use in reporting the cost of inputs and the value of your establishment's outputs.

1 1 year 2 6 months 3 1 month 4 2 weeks 5 1 week 6 other (specify)

7.2 **QUANTITY AND COST OF PRINCIPAL MATERIALS PURCHASED DURING THE 2013 FINANCIAL YEAR**

Complete a separate line for each material purchased. Enter balance of purchases in line 7.10 columns 5, 6 and 7 add total value in line 7.11 columns 5, 6 and 7.

INCLUDE all raw materials, fabricated parts and components, etc. received during the 2013 financial year.

INCLUDE materials and components used in the account production of fixed assets or used by other establishments in making product for this establishment under contract.

INCLUDE fuel that enter the product directly or are used to generate electricity.

EXCLUDE deductible Value Added Tax (VAT)

VALUATION should be in purchaser' prices (defined in question 5)

Materials of DOMESTIC ORIGIN include all materials produced in Ghana. Materials of FOREIGN ORIGIN include all materials imported into Ghana (i.e. produced in a foreign country) irrespective of whether they were purchased in Ghana or not.

DESCRIPTION OF MATERIAL	FOR OFFICE USE	UNIT OF MEASURE	MATERIALS PURCHASED DURING THE 2013 FINANCIAL YEAR					
			TOTAL QUANTITY	AVERAGE UNIT PRICE		TOTAL DELIVERY COST (GH CEDIS)	ORIGIN OF MATERIALS	
				4	p		DOMESTIC	IMPORTED
							(GH CEDIS)	(GH CEDIS)
1	2	3	GH CEDIS		5	6	7	
7.2.1								
7.2.2								
7.2.3								
7.2.4								
7.2.5								
7.2.6								
7.2.7								
7.2.8								
7.2.9								
7.2.10 All other materials purchased not listed individually above.	////	////	////	////	////			
7.2.11 TOTAL (sum of 7.2.1 to 7.2.10)	////	////	////	////	////			

8. **FUEL PURCHASED DURING THE 2013 FINANCIAL YEAR**

State in delivery cost (purchaser's price).

INCLUDE fuel for transport and machines (as well as fuel used to generate electricity).

EXCLUDE (a) fuel produced and consumed in the same establishment.

(b) fuel purchased as raw materials to enter into the products of the establishment.

TYPE OF FUEL	FOR OFFICE USE	UNIT OF MEASURE	QUANTITY	DELIVERY COST (GH CEDIS)
	1	2	3	4
8.1 Diesel for generating electricity				
8.2 Diesel for transport equipment and other machines				
8.3 Petrol for generating electricity				
8.4 Petrol for transport equipment and other machines				
8.5 Wood				
8.6 Gas (L.P.G) for generating electricity				
8.7 Gas (L.P.G) for transport equipment's and other machines				
8.8 Charcoal				
8.9 Other (specify)				
8.10 Total (sum of 8.1 to 8.9)	////////////////////	////////////////////	////////////////////	

9. **PURCHASES DURING THE 2013 FINANCIAL YEAR.**

VALUATION should be in purchasers' prices (define in question 5).

TYPE OF COST	DELIVERY COST (GH CEDIS)
9.1 Purchase of raw materials, supplies, etc. purchased (same as 7.11 col. 5).	
9.2 Purchase of fuel. (same as 8.10 col. 4)	
9.3 Purchase of electricity	
9.4 Purchase of water	
9.5 Purchase of goods for resale	
9.6 Other (Specify)	
9.7 TOTAL (sum of 9.1 to 9.6)	

10. **OTHER OPERATING COST DURING THE 2013 FINANCIAL YEAR.**

Enter the following types of individual costs. This includes:

Labour costs not included in compensation of employees, purchases of provision and supplies for sale in employee facilities. Amount paid for storage or warehousing.

EXCLUDE Purchase of land and other capital goods, bad debts, depreciation and outright purchase of patent and licenses.

DESCRIPTION OF OTHER COST	COST (GH CEDIS)
10.1 Laundry and cleaning services	
10.2 Music and other entertainment expenses	
10.3 Repairs and maintenance paid for on vehicles, buildings etc. to outside firms	
10.4 Cartage and haulage expenses paid	
10.5 Travel expenses (e.g. management, personal etc.)	
10.6 Value of contract and commission work paid	
10.7 Audit, accounting and legal fee	
10.8 Security services paid to other firms	
10.9 Staff training (when done by another establishment)	
10.10 Services of employment agencies	
10.11 Advertising and promotion etc.	
10.12 Bank charges	
10.13 Telephone, telecommunication, and Internet	
10.14 Postage	
10.15 Tax (e.g. Property Tax)	
10.16 Office stationery and supplies	
10.17 Management and consultation fee	
10.18 Rent paid for hiring of furniture, building, plant and machinery, land etc.	
10.19 Interest paid	
10.20 Dividend paid	
10.21 Royalty paid	
10.22 Business licenses, rates on property paid to central or local government etc.	
10.23 Insurance paid	
10.24 Exchange rate losses (losses due to currency depreciation)	
10.25 Loss on sale of fixed assets	
10.26 Payment for hotel organized activities and tours	
10.27 Other (Specify).....	
10.28 GRAND TOTAL	

SECTION 6 REVENUE

11.1: TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN HEALTH DELIVERY ACTIVITIES

INCOME FROM:	VALUE (GH CEDIS)
11.1.1 Medical services paid in cash (both in and out patients) This includes the following medical services. ✓ <i>Surgical services</i> ✓ <i>General and specialized consultation</i> ✓ <i>Dental services</i> ✓ <i>Physiotherapeutic services</i> ✓ <i>Childbirth and related service</i> ✓ <i>Medical laboratory service</i> ✓ <i>Diagnostic-imaging services (x-ray)</i> ✓ <i>Nursing services</i> ✓ <i>Ambulance services</i> ✓ <i>Room/bed charges, etc.</i>	
11.1.2 Medical services for NHIS patients (both in and out patients) This includes the following medical services. ✓ <i>Surgical services</i> ✓ <i>General and specialized consultation</i> ✓ <i>Dental services</i> ✓ <i>Physiotherapeutic services</i> ✓ <i>Childbirth and related service</i> ✓ <i>Medical laboratory service</i> ✓ <i>Diagnostic-imaging services (x-ray)</i> ✓ <i>Nursing services</i> ✓ <i>Ambulance services</i> ✓ <i>Room/bed charges, etc.</i>	
11.1.3 Sale of pharmaceuticals and other medical supplies	
11.1.4 Donations	
11.1.5 Government grants and subsidies	
11.1.6 Other (Specify)	
11.1.7 TOTAL	

11.2: TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN SOCIAL WORK ACTIVITIES

INCOME FROM:	VALUE (GH CEDIS)
11.2.1 Donations	
11.2.2 User Fees (including boarding, lodging, etc.)	
11.2.3 Fundraising	
11.2.4 Feeding fees	
11.2.5 Government grants and subsidies	
11.2.6 Other (Specify)	
11.2.7 TOTAL	

11.3: TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN EDUCATION ACTIVITIES

INCOME FROM:	VALUE (GH CEDIS)
11.3.1 Tuition fees	
11.3.2 User Fees (including boarding, lodging, etc.)	
11.3.3 Feeding fees	
11.3.4 P.T.A dues	
11.3.5 Sale of books and other educational material including uniforms/sports wears	
11.3.6 Government grants and subsidies	
11.3.7 Donations received	
11.3.8 Other (Specify)	
11.3.9 TOTAL	

11.4: TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN PROFESSIONAL, SCIENTIFIC, AND TECHNICAL ACTIVITIES

INCOME FROM:	VALUE (GH CEDIS)
11.4.1 Legal activities	
11.4.2 Accounting, bookkeeping and auditing activities, tax consultancy :	
11.4.3 Activities of head offices	
11.4.4 Management consultancy activities	
11.4.5 Architectural and engineering activities and related technical consultancy	
11.4.6 Technical testing and analysis	
11.4.7 Research and experimental development in natural sciences and engineering	
11.4.8 Research and experimental development in natural sciences and humanities	
11.4.9 Advertising	
11.4.10 Market research and public opinion polling.	
11.4.11 Specialized design activities	
11.4.12 Photographic activities	
11.4.13 Other professional scientific and technical activities	
11.4.14 Veterinary activities	
11.4.15 Other (Specify)	
11.4.16 TOTAL	

11.5: TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN BANKING ACTIVITIES

INCOME	VALUE (GH CEDIS)
BANKING SERVICES	
11.5.1 Interest income	
11.5.2 Financial service charges received	
11.5.3 Other service charges	
11.5.4 Sale of banking products	
11.5.5 Operating subsidies	
11.5.6 Commission and fees received	
11.5.7 Dividend received	
11.5.8 Gains on dealing assets (bonds, etc.)	
11.5.9 Revenue from rental or lease of office space or other real estate	
11.5.10 Other (Specify)	
11.5.11 TOTAL	

11.6 TO BE COMPLETED BY ESTABLISHMENT ENGAGED IN FINANCIAL AND INSURANCE ACTIVITIES

INSURANCE AND PENSION SERVICES	VALUE (GH CEDIS)
11.6.1 Sale of insurance products (premium)	
11.6.2 Revenue from rental or lease of office space or other real estate	
11.6.3 Investment Income	
11.6.4 Underwriting Income	
11.6.5 Operating subsidies	
11.6.6 Commission and fees received	
11.6.7 Re-insurance	
11.6.8 Actual pension contribution received (Fund management firms)	
11.6.9 Charge in actuarial services	
11.6.10 Other (Specify)	
11.6.11 TOTAL	

12.1 OTHER INCOME

INCOME FROM:	VALUE (GH CEDIS)
12.1.1 Capital transfer received	
12.1.2 Value of goods sold in the same condition as purchased	
12.1.3 Rent received for the hire/lease of building, plant and machinery and furniture, land, etc.	
12.1.4 Insurance claims received:	
12.1.5 Subsidies and grants received from	////////////////////////////////////
(a) Within Ghana	
(b) Overseas	
12.1.6 Income from:	////////////////////////////////////
(a) Interest received	
(b) Dividend received	
(c) Royalties, copyrights etc.,	
12.1.7 Profit or loss received from any other business in which you have an investment interest	
12.1.8 Bad and doubtful debts recovered	
12.1.9 Exchange gain (due to appreciation of currency)	
12.1.10 Gain on sale of fixed assets	
12.1.11 Other (specify).....	
12.1.12 TOTAL	

SECTION 7: INTERVIEWER'S REVIEW

The interviewer will review the form for the completeness and accuracy in the following section before you complete the certification.

a. **COMPLETENESS CHECKS**

Mark (X) in the box that applies

Have the following questions been completed?

Question	Yes	No
1.3		
1.6		
2.4		
3.3		
4.3		
5.4		
6.15		
7.2.11 col 6		
8.10 col 4		

Question	Yes	No
9.7		
10.28		
11.1.7		
11.2.7		
11.3.9		
11.4.16		
11.5.11		
11.6.11		
2.1.12		

**If NO explain in "Remarks"*

REMARKS

.....

.....

SECTION 8: CERTIFICATION OF THIS QUESTIONNAIRE

A. Thank you for completing this questionnaire. Please enter any comments which would assist in the interpretation of the information given.

COMMENTS:
.....
.....
.....
.....

B. NAME OF PERSON SUPPLYING THE INFORMATION TELEPHONE NO.
.....

SIGNATURE:.....

STAMP

DESIGNATION: DATE:

C. INTERVIEWER'S NAME:

INTERVIEWER'S ID NO.

DATE OF INTERVIEW

SUPERVISOR'S NAME:

SUPERVISOR'S PHONE NO.

SUPERVISOR'S SIGNATURE:

ZONAL CO-ORDINATOR'S NAME:

ZONAL CO-ORDINATOR'S SIGNATURE.

D. CLERICAL PROCESSING **(FOR OFFICE USE)**

EDITOR'S NUMBER SIGNATURE:

DATE:

CODER'S NUMBER: SIGNATURE:

DATE:

VERIFIER'S NUMBER SIGNATURE:

DATE:

DATE PASSED FOR DATA ENTRY: SIGNATURE: