

**ELENCO DEI RESIDUI DA RIPORTARE AL TERMINE DELL'ANNO**

**2016**

**ENTRATE**

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ESTADO DE FLUJOS DE CAJA DE LA EMPRESA Y DE LA ENTIDAD DEL SECTOR A. 2000-2001, 2002-2003		2004		2005		2006		2007		2008		2009		2010		2011		2012		2013		2014		2015		2016		2017		2018		2019		2020		2021		2022		2023		2024		2025		2026		2027		2028		2029		2030		2031		2032		2033		2034		2035		2036		2037		2038		2039		2040		2041		2042		2043		2044		2045		2046		2047		2048		2049		2050		2051		2052		2053		2054		2055		2056		2057		2058		2059		2060		2061		2062		2063		2064		2065		2066		2067		2068		2069		2070		2071		2072		2073		2074		2075		2076		2077		2078		2079		2080		2081		2082		2083		2084		2085		2086		2087		2088		2089		2090		2091		2092		2093		2094		2095		2096		2097		2098		2099		2100																																																																																																																												
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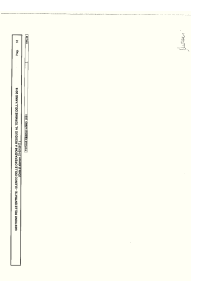
1. Name of the person		2. Date of birth	
3. Place of birth		4. Nationality	
5. Occupation		6. Education	
7. Address		8. Contact details	
9. Signature		10. Stamp	
11. Remarks		12. Date	



UNIT 10		UNIT 11		UNIT 12		UNIT 13		UNIT 14		UNIT 15		UNIT 16		UNIT 17		UNIT 18		UNIT 19		UNIT 20		UNIT 21		UNIT 22		UNIT 23		UNIT 24		UNIT 25		UNIT 26		UNIT 27		UNIT 28		UNIT 29		UNIT 30		UNIT 31		UNIT 32		UNIT 33		UNIT 34		UNIT 35		UNIT 36		UNIT 37		UNIT 38		UNIT 39		UNIT 40		UNIT 41		UNIT 42		UNIT 43		UNIT 44		UNIT 45		UNIT 46		UNIT 47		UNIT 48		UNIT 49		UNIT 50		UNIT 51		UNIT 52		UNIT 53		UNIT 54		UNIT 55		UNIT 56		UNIT 57		UNIT 58		UNIT 59		UNIT 60		UNIT 61		UNIT 62		UNIT 63		UNIT 64		UNIT 65		UNIT 66		UNIT 67		UNIT 68		UNIT 69		UNIT 70		UNIT 71		UNIT 72		UNIT 73		UNIT 74		UNIT 75		UNIT 76		UNIT 77		UNIT 78		UNIT 79		UNIT 80		UNIT 81		UNIT 82		UNIT 83		UNIT 84		UNIT 85		UNIT 86		UNIT 87		UNIT 88		UNIT 89		UNIT 90		UNIT 91		UNIT 92		UNIT 93		UNIT 94		UNIT 95		UNIT 96		UNIT 97		UNIT 98		UNIT 99		UNIT 100	
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Kontingensplan (Kontingenzplan) für die Risikoanalyse	
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2007-2008 Road Work - James Road between S. Highway 100 and S. Highway 100 1000 S. Highway 100									
LINE	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	TOTAL PRICE	DATE	BY	REMARKS	REVISION
1	Gravel	CU YD	100	1.00	100.00				
2	Gravel	CU YD	100	1.00	100.00				
3	Gravel	CU YD	100	1.00	100.00				
4	Gravel	CU YD	100	1.00	100.00				
5	Gravel	CU YD	100	1.00	100.00				
6	Gravel	CU YD	100	1.00	100.00				
7	Gravel	CU YD	100	1.00	100.00				
8	Gravel	CU YD	100	1.00	100.00				
9	Gravel	CU YD	100	1.00	100.00				
10	Gravel	CU YD	100	1.00	100.00				
11	Gravel	CU YD	100	1.00	100.00				
12	Gravel	CU YD	100	1.00	100.00				
13	Gravel	CU YD	100	1.00	100.00				
14	Gravel	CU YD	100	1.00	100.00				
15	Gravel	CU YD	100	1.00	100.00				
16	Gravel	CU YD	100	1.00	100.00				
17	Gravel	CU YD	100	1.00	100.00				
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23	Gravel	CU YD	100	1.00	100.00				
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30	Gravel	CU YD	100	1.00	100.00				
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32	Gravel	CU YD	100	1.00	100.00				
33	Gravel	CU YD	100	1.00	100.00				
34	Gravel	CU YD	100	1.00	100.00				
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40	Gravel	CU YD	100	1.00	100.00				
41	Gravel	CU YD	100	1.00	100.00				
42	Gravel	CU YD	100	1.00	100.00				
43	Gravel	CU YD	100	1.00	100.00				
44	Gravel	CU YD	100	1.00	100.00				
45	Gravel	CU YD	100	1.00	100.00				
46	Gravel	CU YD	100	1.00	100.00				
47	Gravel	CU YD	100	1.00	100.00				
48	Gravel	CU YD	100						

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FORM 1040-SS (12-15-10)	
U.S. Social Security Tax Return for Self-Employed	
OMB No. 1545-0047	
Use of this form is required for all self-employed individuals who are required to file a return.	
Do not enter an amount in this space unless you are required to do so by the instructions.	
1. Name of self-employed individual (Last, first, middle initial)	
2. Social Security number	
3. Date of birth (MM/DD/YYYY)	
4. Date of death (MM/DD/YYYY)	
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2	JANE SMITH	456 E 1ST AVE	FLYING WING	CHICAGO	IL	60601	312	555	4321
3	BOB BROWN	789 WEST ST	PO BOX 123	LOS ANGELES	CA	90001	213	555	9876
4	ALICE WHITE	321 N 4TH ST	STATION 5	PHOENIX	AZ	85001	602	555	2468
5	CHARLIE GREEN	654 S 2ND AVE	CLAYTON	HOUSTON	TX	77001	713	555	1357
6	DAVID BLACK	987 E 3RD ST	WILSON	PORTLAND	OR	97201	503	555	8765
7	EVELYN ROY	210 W 5TH ST	GREENGLASS	SEATTLE	WA	98101	206	555	3456
8	FRANK HILL	543 N 7TH AVE	SMITH	DENVER	CO	80201	303	555	7890
9	GRACE KING	876 S 9TH ST	JOHNSON	MINNEAPOLIS	MN	55401	612	555	6543
10	HERBERT LEE	109 E 11TH ST	WILLIAMS	KANSAS CITY	MO	64101	816	555	5432
11	IRVING PERKINS	432 W 13TH AVE	DAVIS	ST. LOUIS	MO	63101	314	555	4321
12	JESSIE SCOTT	765 N 15TH ST	WALKER	INDIANAPOLIS	IN	46201	317	555	3210
13	KENNETH TAYLOR	098 S 17TH AVE	PERKINS	COLUMBUS	GA	31901	404	555	2109
14	LILLIAN HARRIS	321 E 19TH ST	SCOTT	ATLANTA	GA	30301	404	555	1098
15	MARTIN CLARK	654 W 21ST AVE	WALKER	MEMPHIS	TN	38101	901	555	0987
16	NANCY FORD	987 N 23RD ST	DAVIS	OKLAHOMA CITY	OK	73101	405	555	9876
17	OSCAR ROY	210 S 25TH AVE	WALKER	TOPEKA	KS	66601	785	555	8765
18	PETER KING	543 E 27TH ST	WALKER	WICHITA	KS	67201	316	555	7654
19	QUINN LEE	876 W 29TH AVE	WALKER	OMAHA	NE	68101	402	555	6543
20	RALPH PERKINS	109 N 31ST ST	WALKER	LINCOLN	NE	68501	402	555	5432
21	SARAH SCOTT	432 S 33RD AVE	WALKER	DES MOINES	IA	50301	319	555	4321
22	TOMMY TAYLOR	765 E 35TH ST	WALKER	SIoux FALLS	SD	57101	605	555	3210
23	URSULA HARRIS	098 W 37TH AVE	WALKER	SPRINGFIELD	IL	62701	217	555	2109
24	VICTOR CLARK	321 N 39TH ST	WALKER	CHICAGO	IL	60601	312	555	1098
25	WILLIAM FORD	654 S 41ST AVE	WALKER	CHICAGO	IL	60601	312	555	0987
26	XENIA ROY	987 E 43RD ST	WALKER	CHICAGO	IL	60601	312	555	9876
27	YOUNG KING	210 W 45TH AVE	WALKER	CHICAGO	IL	60601	312	555	8765
28	ZACHARY LEE	543 N 47TH ST	WALKER	CHICAGO	IL	60601	312	555	7654
29	ADAM PERKINS	876 S 49TH AVE	WALKER	CHICAGO	IL	60601	312	555	6543
30	BELLA SCOTT	109 E 51ST ST	WALKER	CHICAGO	IL	60601	312	555	5432
31	CARL TAYLOR	432 W 53RD AVE	WALKER	CHICAGO	IL	60601	312	555	4321
32	DORA HARRIS	765 N 55TH ST	WALKER	CHICAGO	IL	60601	312	555	3210
33	EDWARD CLARK	098 S 57TH AVE	WALKER	CHICAGO	IL	60601	312	555	2109
34	FLORENCE FORD	321 E 59TH ST	WALKER	CHICAGO	IL	60601	312	555	1098
35	GEOFFREY ROY	654 W 61ST AVE	WALKER	CHICAGO	IL	60601	312	555	0987
36	HENRIETTA KING	987 N 63RD ST	WALKER	CHICAGO	IL	60601	312	555	9876
37	IRVING LEE	210 S 65TH AVE	WALKER	CHICAGO	IL	60601	312	555	8765
38	JESSICA PERKINS	543 E 67TH ST	WALKER	CHICAGO	IL	60601	312	555	7654
39	KENNETH SCOTT	876 W 69TH AVE	WALKER	CHICAGO					









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UNITED STATES DEPARTMENT OF COMMERCE BUREAU OF ECONOMIC ANALYSIS OFFICE OF THE ASSISTANT SECRETARY FOR ECONOMIC AFFAIRS WASHINGTON, D. C. 20540									
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GENERAL INFORMATION		FACILITY INFORMATION		PATIENT INFORMATION		PHYSICIAN INFORMATION		NURSING INFORMATION		LABORATORY INFORMATION		RADIOLOGY INFORMATION		PHARMACY INFORMATION		OTHER INFORMATION	
1	NAME	2	ADDRESS	3	AGE	4	SEX	5	DATE OF BIRTH	6	DATE OF ADMISSION	7	DATE OF DISCHARGE	8	DATE OF DEATH	9	DATE OF REFERENCE
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1324	1325	1326	1327	1328	1329	1330	1331	1332	1333	1334	1335	1336	1337	1338	1339	1340	1341
1342	1343	1344	1345	1346	1347	1348	1349	1350	1351	1352	1353	1354	1355	1356	1357	1358	1359
1360	1361	1362	1363	1364	1365	1366	1367	1368	1369	1370	1371	1372	1373	1374	1375	1376	1377
1378	1379	1380	1381	1382	1383	1384	1385	1386	1387	1388	1389	1390	1391	1392	1393	1394	1395
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OBSERVATIONS	
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UNITED STATES OF AMERICA		CUSTOMER'S NAME		CUSTOMER'S ADDRESS		CUSTOMER'S CITY		CUSTOMER'S STATE		CUSTOMER'S ZIP		CUSTOMER'S PHONE		CUSTOMER'S FAX		CUSTOMER'S E-MAIL		CUSTOMER'S WEBSITE		CUSTOMER'S OTHER	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
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1	2	3	4	5	6	7	8	9	10	11	12	13									



Tabelle 1: Ergebnisse der Messungen	
Messung	Ergebnis
1. Messung	12,34
2. Messung	13,45
3. Messung	14,56
4. Messung	15,67
5. Messung	16,78
6. Messung	17,89
7. Messung	18,90
8. Messung	19,01
9. Messung	20,12
10. Messung	21,23
11. Messung	22,34
12. Messung	23,45
13. Messung	24,56
14. Messung	25,67
15. Messung	26,78
16. Messung	27,89
17. Messung	28,90
18. Messung	29,01
19. Messung	30,12
20. Messung	31,23
21. Messung	32,34
22. Messung	33,45
23. Messung	34,56
24. Messung	35,67
25. Messung	36,78
26. Messung	37,89
27. Messung	38,90
28. Messung	39,01
29. Messung	40,12
30. Messung	41,23
31. Messung	42,34
32. Messung	43,45
33. Messung	44,56
34. Messung	45,67
35. Messung	46,78
36. Messung	47,89
37. Messung	48,90
38. Messung	49,01
39. Messung	50,12
40. Messung	51,23
41. Messung	52,34
42. Messung	53,45
43. Messung	54,56
44. Messung	55,67
45. Messung	56,78
46. Messung	57,89
47. Messung	58,90
48. Messung	59,01
49. Messung	60,12
50. Messung	61,23
51. Messung	62,34
52. Messung	63,45
53. Messung	64,56
54. Messung	65,67
55. Messung	66,78
56. Messung	67,89
57. Messung	68,90
58. Messung	69,01
59. Messung	70,12
60. Messung	71,23
61. Messung	72,34
62. Messung	73,45
63. Messung	74,56
64. Messung	75,67
65. Messung	76,78
66. Messung	77,89
67. Messung	78,90
68. Messung	79,01
69. Messung	80,12
70. Messung	81,23
71. Messung	82,34
72. Messung	83,45
73. Messung	84,56
74. Messung	85,67
75. Messung	86,78
76. Messung	87,89
77. Messung	88,90
78. Messung	89,01
79. Messung	90,12
80. Messung	91,23
81. Messung	92,34
82. Messung	93,45
83. Messung	94,56
84. Messung	95,67
85. Messung	96,78
86. Messung	97,89
87. Messung	98,90
88. Messung	99,01
89. Messung	100,12
90. Messung	101,23
91. Messung	102,34
92. Messung	103,45
93. Messung	104,56
94. Messung	105,67
95. Messung	106,78
96. Messung	107,89
97. Messung	108,90
98. Messung	109,01
99. Messung	110,12
100. Messung	111,23

Seite 1

Formulario de Registro de Datos de la Empresa									
Nombre de la Empresa		Código de Registro		Fecha de Registro		Tipo de Registro		Estado de Registro	
1. Nombre de la Empresa		2. Código de Registro		3. Fecha de Registro		4. Tipo de Registro		5. Estado de Registro	
6. Descripción de la Empresa		7. Dirección de la Empresa		8. Teléfono de la Empresa		9. Correo Electrónico de la Empresa		10. Página Web de la Empresa	
11. Nombre del Representante Legal		12. Cargo del Representante Legal		13. Fecha de Emisión		14. Tipo de Emisión		15. Estado de Emisión	
16. Descripción del Emisor		17. Dirección del Emisor		18. Teléfono del Emisor		19. Correo Electrónico del Emisor		20. Página Web del Emisor	
21. Nombre del Emisor		22. Código de Emisor		23. Fecha de Emisión		24. Tipo de Emisión		25. Estado de Emisión	
26. Descripción del Emisor		27. Dirección del Emisor		28. Teléfono del Emisor		29. Correo Electrónico del Emisor		30. Página Web del Emisor	
31. Nombre del Emisor		32. Código de Emisor		33. Fecha de Emisión		34. Tipo de Emisión		35. Estado de Emisión	
36. Descripción del Emisor		37. Dirección del Emisor		38. Teléfono del Emisor		39. Correo Electrónico del Emisor		40. Página Web del Emisor	
41. Nombre del Emisor		42. Código de Emisor		43. Fecha de Emisión		44. Tipo de Emisión		45. Estado de Emisión	
46. Descripción del Emisor		47. Dirección del Emisor		48. Teléfono del Emisor		49. Correo Electrónico del Emisor		50. Página Web del Emisor	
51. Nombre del Emisor		52. Código de Emisor		53. Fecha de Emisión		54. Tipo de Emisión		55. Estado de Emisión	
56. Descripción del Emisor		57. Dirección del Emisor		58. Teléfono del Emisor		59. Correo Electrónico del Emisor		60. Página Web del Emisor	
61. Nombre del Emisor		62. Código de Emisor		63. Fecha de Emisión		64. Tipo de Emisión		65. Estado de Emisión	
66. Descripción del Emisor		67. Dirección del Emisor		68. Teléfono del Emisor		69. Correo Electrónico del Emisor		70. Página Web del Emisor	
71. Nombre del Emisor		72. Código de Emisor		73. Fecha de Emisión		74. Tipo de Emisión		75. Estado de Emisión	
76. Descripción del Emisor		77. Dirección del Emisor		78. Teléfono del Emisor		79. Correo Electrónico del Emisor		80. Página Web del Emisor	
81. Nombre del Emisor		82. Código de Emisor		83. Fecha de Emisión		84. Tipo de Emisión		85. Estado de Emisión	
86. Descripción del Emisor		87. Dirección del Emisor		88. Teléfono del Emisor		89. Correo Electrónico del Emisor		90. Página Web del Emisor	
91. Nombre del Emisor		92. Código de Emisor		93. Fecha de Emisión		94. Tipo de Emisión		95. Estado de Emisión	
96. Descripción del Emisor		97. Dirección del Emisor		98. Teléfono del Emisor		99. Correo Electrónico del Emisor		100. Página Web del Emisor	



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FORM 1040-SS (12-15-10)	
U.S. Social Security Tax Return for Self-Employed	
OMB No. 1545-0047	
Use additional sheets if necessary.	
1. Name of self-employed individual (Last, first, middle initial)	
2. Social Security number	
3. State of residence	
4. Date of birth (MM/DD/YYYY)	
5. Date of death (MM/DD/YYYY)	
6. Date of filing (MM/DD/YYYY)	
7. Date of preparation (MM/DD/YYYY)	
8. Date of completion (MM/DD/YYYY)	
9. Date of payment (MM/DD/YYYY)	
10. Date of receipt (MM/DD/YYYY)	
11. Date of return (MM/DD/YYYY)	
12. Date of filing (MM/DD/YYYY)	
13. Date of payment (MM/DD/YYYY)	
14. Date of receipt (MM/DD/YYYY)	
15. Date of return (MM/DD/YYYY)	
16. Date of filing (MM/DD/YYYY)	
17. Date of payment (MM/DD/YYYY)	
18. Date of receipt (MM/DD/YYYY)	
19. Date of return (MM/DD/YYYY)	
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29. Date of payment (MM/DD/YYYY)	
30. Date of receipt (MM/DD/YYYY)	
31. Date of return (MM/DD/YYYY)	
32. Date of filing (MM/DD/YYYY)	
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93. Date of payment (MM/DD/YYYY)	
94. Date of receipt (MM/DD/YYYY)	
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96. Date of filing (MM/DD/YYYY)	
97. Date of payment (MM/DD/YYYY)	
98. Date of receipt (MM/DD/YYYY)	
99. Date of return (MM/DD/YYYY)	
100. Date of filing (MM/DD/YYYY)	

Form 1041		Form 1041-ES	
Individual Income Tax Return		Individual Income Tax Return - Estimated Tax	
1	NAME (Last, first, middle initial)	2	NAME (Last, first, middle initial)
3	SSN	4	SSN
5	DATE OF BIRTH	6	DATE OF BIRTH
7	DATE OF DEATH	8	DATE OF DEATH
9	DATE OF FILING	10	DATE OF FILING
11	DATE OF PREPARATION	12	DATE OF PREPARATION
13	DATE OF REVIEW	14	DATE OF REVIEW
15	DATE OF SIGNATURE	16	DATE OF SIGNATURE
17	DATE OF PREPARER'S SIGNATURE	18	DATE OF PREPARER'S SIGNATURE
19	DATE OF REVIEWER'S SIGNATURE	20	DATE OF REVIEWER'S SIGNATURE
21	DATE OF PREPARED BY	22	DATE OF PREPARED BY
23	DATE OF REVIEWED BY	24	DATE OF REVIEWED BY
25	DATE OF SIGNED BY	26	DATE OF SIGNED BY
27	DATE OF SIGNED BY	28	DATE OF SIGNED BY
29	DATE OF SIGNED BY	30	DATE OF SIGNED BY
31	DATE OF SIGNED BY	32	DATE OF SIGNED BY
33	DATE OF SIGNED BY	34	DATE OF SIGNED BY
35	DATE OF SIGNED BY	36	DATE OF SIGNED BY
37	DATE OF SIGNED BY	38	DATE OF SIGNED BY
39	DATE OF SIGNED BY	40	DATE OF SIGNED BY
41	DATE OF SIGNED BY	42	DATE OF SIGNED BY
43	DATE OF SIGNED BY	44	DATE OF SIGNED BY
45	DATE OF SIGNED BY	46	DATE OF SIGNED BY
47	DATE OF SIGNED BY	48	DATE OF SIGNED BY
49	DATE OF SIGNED BY	50	DATE OF SIGNED BY
51	DATE OF SIGNED BY	52	DATE OF SIGNED BY
53	DATE OF SIGNED BY	54	DATE OF SIGNED BY
55	DATE OF SIGNED BY	56	DATE OF SIGNED BY
57	DATE OF SIGNED BY	58	DATE OF SIGNED BY
59	DATE OF SIGNED BY	60	DATE OF SIGNED BY
61	DATE OF SIGNED BY	62	DATE OF SIGNED BY
63	DATE OF SIGNED BY	64	DATE OF SIGNED BY
65	DATE OF SIGNED BY	66	DATE OF SIGNED BY
67	DATE OF SIGNED BY	68	DATE OF SIGNED BY
69	DATE OF SIGNED BY	70	DATE OF SIGNED BY
71	DATE OF SIGNED BY	72	DATE OF SIGNED BY
73	DATE OF SIGNED BY	74	DATE OF SIGNED BY
75	DATE OF SIGNED BY	76	DATE OF SIGNED BY
77	DATE OF SIGNED BY	78	DATE OF SIGNED BY
79	DATE OF SIGNED BY	80	DATE OF SIGNED BY
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83	DATE OF SIGNED BY	84	DATE OF SIGNED BY
85	DATE OF SIGNED BY	86	DATE OF SIGNED BY
87	DATE OF SIGNED BY	88	DATE OF SIGNED BY
89	DATE OF SIGNED BY	90	DATE OF SIGNED BY
91	DATE OF SIGNED BY	92	DATE OF SIGNED BY
93	DATE OF SIGNED BY	94	DATE OF SIGNED BY
95	DATE OF SIGNED BY	96	DATE OF SIGNED BY
97	DATE OF SIGNED BY	98	DATE OF SIGNED BY
99	DATE OF SIGNED BY	100	DATE OF SIGNED BY

Examen