### Person 1 (continued)

**21.** LAST WEEK, did this person do ANY work for either pay or profit? Mark [X] the "Yes" box even if the person worked only 1 hour, or helped without pay in a family business or farm for 15 hours or more, or was on active duty in the Armed Forces.
- Yes
- No → Skip to 25a

**22.** At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week.

   **a. Address (Number and street name)**

   *(If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)*

   **b. Name of city, town, or post office**

   **c. Is the work location inside the limits of that city or town?**
   - Yes
   - No, outside the city/town limits

   **d. Name of county**

   **e. Name of U.S. state or foreign country**

   **f. ZIP Code**

**23.** a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the trip, mark [X] the box of the one used for most of the distance.
- Car, truck, or van
- Bus or trolley bus
- Streetcar or trolley car
- Subway or elevated
- Railroad
- Ferryboat
- Taxicab
- Motorcycle
- Bicycle
- Walked
- Worked at home → Skip to 27
- Other method

   If "Car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.

   **b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?**
   - Drove alone
   - 2 people
   - 3 people
   - 4 people
   - 5 or 6 people
   - 7 or more people

**24.** a. What time did this person usually leave home to go to work LAST WEEK?
- [ ] a.m. [ ] p.m.

   **b. How many minutes did it usually take this person to get from home to work LAST WEEK?**
   Minutes

**25.** Answer questions 25–26 for persons who did not work for pay or profit last week. Others skip to 27.

   **a. LAST WEEK, was this person on layoff from a job?**
   - Yes → Skip to 25c
   - No

   **b. LAST WEEK, was this person TEMPORARILY absent from a job or business?**
   - Yes, on vacation, temporary illness, labor dispute, etc. → Skip to 26
   - No → Skip to 25d

   **c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?**
   - Yes → Skip to 25e
   - No

   **d. Has this person been looking for work during the last 4 weeks?**
   - Yes
   - No → Skip to 26

   **e. LAST WEEK, could this person have started a job if offered one, or returned to work if recalled?**
   - Yes, could have gone to work
   - No, because of own temporary illness
   - No, because of all other reasons (in school, etc.)

**26.** When did this person last work, even for a few days?
- [ ] 1995 to 2000
- [ ] 1994 or earlier, or never worked → Skip to 31
### Person 1 (continued)

**Industry or Employer** — Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give the information for his/her last job or business since 1995.

- **For whom did this person work?** If now on active duty in the Armed Forces, mark X this box.
- **Print the branch of the Armed Forces.**

- **Name of company, business, or other employer.**

**b. What kind of business or industry was this?**
Describe the activity at location where employed. (For example: hospital, newspaper publishing, mail order house, auto repair shop, bank)

**c. Is this mainly** — Mark X ONE box.
- Manufacturing?
- Wholesale trade?
- Retail trade?
- Other (agriculture, construction, service, government, etc.)?

---

**Occupation**

- **What kind of work was this person doing?**
  (For example: registered nurse, personnel manager, supervisor of order department, auto mechanic, accountant)

- **What were this person's most important activities or duties?**
  (For example: patient care, directing hiring policies, supervising order clerks, repairing automobiles, reconciling financial records)

---

**Was this person** — Mark X ONE box.
- Employee of a PRIVATE-FOR-PROFIT company or business or of an individual, for wages, salary, or commissions
- Employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization
- Local GOVERNMENT employee (city, county, etc.)
- State GOVERNMENT employee
- Federal GOVERNMENT employee
- SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm
- SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm
- Working WITHOUT PAY in family business or farm

**a. LAST YEAR, 1999, did this person work at a job or business at any time?**
- Yes
- No → Skip to 31

**b. How many weeks did this person work in 1999?**
Count paid vacation, paid sick leave, and military service.

**Weeks**

**c. During the weeks WORKED in 1999, how many hours did this person usually work each WEEK?**
Usual hours worked each WEEK

---

**INCOME IN 1999** — Mark X the "Yes" box for each income source received during 1999 and enter the total amount received during 1999 to a maximum of $999,999. Mark X the "No" box if the income source was not received. If net income was a loss, enter the amount and mark X the "Loss" box next to the dollar amount.

For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person and mark X the "No" box for the other person. If exact amount is not known, please give best estimate.

- **a. Wages, salary, commissions, bonuses, or tips from all jobs** — Report amount before deductions for taxes, bonds, dues, or other items.
  - Yes → Annual amount → Dollars $

- **b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships** — Report NET income after business expenses.
  - Yes → Annual amount → Dollars $
  - No → Loss
Person 1 (continued)

HOUSING QUESTIONS

23. Interest, dividends, net rental income, royalty income, or income from estates and trusts — Report even small amounts credited to an account.
   - Yes
     - Annual amount — Dollars
       - $_________0.00
     - Loss
   - No

24. Social Security or Railroad Retirement
   - Yes
     - Annual amount — Dollars
       - $_________0.00
   - No

25. Supplemental Security Income (SSI)
   - Yes
     - Annual amount — Dollars
       - $_________0.00
   - No

26. Any public assistance or welfare payments from the state or local welfare office
   - Yes
     - Annual amount — Dollars
       - $_________0.00
   - No

27. Retirement, survivor, or disability pensions — Do NOT include Social Security.
   - Yes
     - Annual amount — Dollars
       - $_________0.00
   - No

28. Any other sources of income received regularly such as Veterans’ (VA) payments, unemployment compensation, child support, or alimony — Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
   - Yes
     - Annual amount — Dollars
       - $_________0.00
   - No

29. What was this person’s total income in 1999? Add entries in questions 31a—31h; subtract any losses; if net income was a loss, enter the amount and mark the “Loss” box next to the dollar amount.
   - Annual amount — Dollars
     - $_________0.00
   - Loss

33. Now, please answer questions 33—53 about your household.

34. Is this house, apartment, or mobile home —
   - Owned by you or someone in this household with a mortgage or loan?
   - Owned by you or someone in this household free and clear (without a mortgage or loan)?
   - Rented for cash rent?
   - Occupied without payment of cash rent?

35. Which best describes this building? Include all apartments, flats, etc., even if vacant.
   - A mobile home
   - A one-family house detached from any other house
   - A one-family house attached to one or more houses
   - A building with 2 apartments
   - A building with 3 or 4 apartments
   - A building with 5 to 9 apartments
   - A building with 10 to 19 apartments
   - A building with 20 to 49 apartments
   - A building with 50 or more apartments
   - Boat, RV, van, etc.

36. About when was this building first built?
   - 1999 or 2000
   - 1995 to 1998
   - 1990 to 1994
   - 1980 to 1989
   - 1970 to 1979
   - 1960 to 1969
   - 1950 to 1959
   - 1940 to 1949
   - 1939 or earlier

37. When did this person move into this house, apartment, or mobile home?
   - 1999 or 2000
   - 1995 to 1998
   - 1990 to 1994
   - 1980 to 1989
   - 1970 to 1979
   - 1969 or earlier

38. How many rooms do you have in this house, apartment, or mobile home? Do NOT count bathrooms, porches, balconies, foyers, halls, or half-rooms.
   - 1 room
   - 2 rooms
   - 3 rooms
   - 4 rooms
   - 5 rooms
   - 6 rooms
   - 7 rooms
   - 8 rooms
   - 9 or more rooms
### Person 1 (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>38. How many bedrooms do you have; that is, how many bedrooms would you list if this house, apartment, or mobile home were on the market for sale or rent?</td>
<td>No bedroom, 1 bedroom, 2 bedrooms, 3 bedrooms, 4 bedrooms, 5 or more bedrooms</td>
</tr>
<tr>
<td>39. Do you have COMPLETE plumbing facilities in this house, apartment, or mobile home; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower?</td>
<td>Yes, have all three facilities, No</td>
</tr>
<tr>
<td>40. Do you have COMPLETE kitchen facilities in this house, apartment, or mobile home; that is, 1) a sink with piped water, 2) a range or stove, and 3) a refrigerator?</td>
<td>Yes, have all three facilities, No</td>
</tr>
<tr>
<td>41. Is there telephone service available in this house, apartment, or mobile home from which you can both make and receive calls?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>42. Which FUEL is used MOST for heating this house, apartment, or mobile home?</td>
<td>Gas: from underground pipes serving the neighborhood, Gas: bottled, tank, or LP, Electricity, Fuel oil, kerosene, etc., Coal or coke, Wood, Solar energy, Other fuel, No fuel used</td>
</tr>
<tr>
<td>43. How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of your household?</td>
<td>None, 1, 2, 3, 4, 5, 6 or more</td>
</tr>
</tbody>
</table>

### Answer ONLY if this is a ONE-FAMILY HOUSE OR MOBILE HOME — All others skip to 45.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Is there a business (such as a store or barber shop) or a medical office on this property?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>b. How many acres is this house or mobile home on?</td>
<td>Less than 1 acre → Skip to 45, 1 to 9.9 acres, 10 or more acres</td>
</tr>
<tr>
<td>c. In 1999, what were the actual sales of all agricultural products from this property?</td>
<td>None, $2,500 to $4,999, $1 to $999, $5,000 to $9,999, $1,000 to $2,499, $10,000 or more</td>
</tr>
</tbody>
</table>

### What are the annual costs of utilities and fuels for this house, apartment, or mobile home? If you have lived here less than 1 year, estimate the annual cost:

<table>
<thead>
<tr>
<th>Utility</th>
<th>Annual cost—Dollars</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. <strong>Electricity</strong></td>
<td>$1,000.00</td>
</tr>
<tr>
<td>OR</td>
<td>Included in rent or in condominium fee, No charge or electricity not used</td>
</tr>
<tr>
<td>b. <strong>Gas</strong></td>
<td>$1,000.00</td>
</tr>
<tr>
<td>OR</td>
<td>Included in rent or in condominium fee, No charge or gas not used</td>
</tr>
<tr>
<td>c. <strong>Water and sewer</strong></td>
<td>$1,000.00</td>
</tr>
<tr>
<td>OR</td>
<td>Included in rent or in condominium fee, No charge</td>
</tr>
<tr>
<td>d. <strong>Oil, coal, kerosene, wood, etc.</strong></td>
<td>$1,000.00</td>
</tr>
<tr>
<td>OR</td>
<td>Included in rent or in condominium fee, No charge or these fuels not used</td>
</tr>
</tbody>
</table>
### Person 1 (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Response Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer ONLY if you PAY RENT for this house, apartment, or mobile home — All others skip to 47.</td>
<td></td>
</tr>
<tr>
<td>a. What is the monthly rent?</td>
<td></td>
</tr>
<tr>
<td>Monthly amount — Dollars</td>
<td>$</td>
</tr>
<tr>
<td>b. Does the monthly rent include any meals?</td>
<td>Yes □, No □</td>
</tr>
<tr>
<td>Answer questions 47a—53 if you or someone in this household owns or is buying this house, apartment, or mobile home; otherwise, skip to questions for Person 2.</td>
<td></td>
</tr>
<tr>
<td>a. Do you have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?</td>
<td>Yes □, mortgage, deed of trust, or similar debt □, No □, Skip to 48a □</td>
</tr>
<tr>
<td>b. How much is your regular monthly mortgage payment on THIS property?</td>
<td>Monthly amount — Dollars</td>
</tr>
<tr>
<td>c. Does your regular monthly mortgage payment include payments for real estate taxes on THIS property?</td>
<td>Yes □, taxes included in mortgage payment □, No □, taxes paid separately or taxes not required □</td>
</tr>
<tr>
<td>d. Does your regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?</td>
<td>Yes □, insurance included in mortgage payment □, No □, insurance paid separately or no insurance □</td>
</tr>
<tr>
<td>Answer ONLY if this is a CONDOMINIUM —</td>
<td></td>
</tr>
<tr>
<td>What is the monthly condominium fee?</td>
<td>Monthly amount — Dollars</td>
</tr>
<tr>
<td>Answer ONLY if this is a MOBILE HOME —</td>
<td></td>
</tr>
<tr>
<td>a. Do you have an installment loan or contract on THIS mobile home?</td>
<td>Yes □, No □</td>
</tr>
<tr>
<td>b. What was the total cost for installment loan payments, personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site last year? Exclude real estate taxes.</td>
<td>Yearly amount — Dollars</td>
</tr>
<tr>
<td>Are there more people living here? If yes, continue with Person 2.</td>
<td></td>
</tr>
</tbody>
</table>
For Person 2, repeat questions 3-32 of Person 1.

What is this person's name? Print the name of Person 2 from page 2:

Last Name

First Name

MI

How is this person related to Person 1?
Mark ONE box:

- Husband/wife
- Natural-born son/daughter
- Adopted son/daughter
- Stepson/stepdaughter
- Brother/sister
- Father/mother
- Grandchild
- Parent-in-law
- Son-in-law/daughter-in-law
- Other relative — Print exact relationship.

If NOT RELATED to Person 1:

- Roomer, boarder
- Housemate, roommate
- Unmarried partner
- Foster child
- Other nonrelative

Question is asked of Persons 2-6 on the short (100-percent) and long (sample) forms.
For Persons 3–6. repeat questions 1-32 of Person 2.

**NOTE** – The content for Question 2 varies between Person 1 and Persons 2–6.

Thank you for completing your official U.S. Census form. If there are more than six people at this address, the Census Bureau may contact you for the same information about these people.