|  |  |                   | 016 -               |                            |                |                                       |              |          | U.       | M.B. No. 41-S720 | 32, Appro | TAGE CYPII | res Decemi | Jet 31, 1     |
|--|--|-------------------|---------------------|----------------------------|----------------|---------------------------------------|--------------|----------|----------|------------------|-----------|------------|------------|---------------|
| FORM CE-106<br>(4-11-72)   |  |                   | 1. Sample<br>week   | 2. Expected                | 3. Con         | irol number                           |              |          | I .      | 5. Consumer      | 6. PR     | OCESSII    | NG USE     | ONLY          |
| Science  | S. DEPARTMENT OF COMMERCE DCIAL AND ECONOMIC STATISTICS ADMINISTRATION   |                   | week                | uii172                     | PSU            | i Sample                              | Serial       | CK. Dig. | . number | Unit No.         | a.        | b.         | c.         | d.            |
|  | UREAU OF THE CENSUS CTING AS COLLECTING AGENT FOR  |                   |                     |                            |                | į                                     | į            | i        |          |                  |           |            |            | 72            |
|  | S. DEPARTMENT OF LABOR   |                   |                     | a. Hous                    | se number :    | and street                            | . 1          | <u> </u> |          |                  |           |            |            |               |
| В  | UREAU OF LABOR STATISTICS  |                   | 7. SAMPLE<br>ADDRES | -                          | se number a    | ing succe                             |              |          |          |                  |           |            |            |               |
| 1  |  |                   |                     | b. Apt.                    | No. or oth     | er unit designati                     | ion          |          |          |                  | ·         |            |            |               |
| SIMENT OF CO.  | HOUSEHOLD  |                   |                     |                            |                |                                       |              |          |          |                  |           |            |            |               |
|  | CHARACTERISTICS  |                   |                     | c. City                    |                |                                       |              |          |          | State            |           | 2          | (IP code   |               |
|  |  | 8. MAILIN         | G                   | a. House number and street |                |                                       |              |          |          |                  |           |            |            |               |
|  | QUESTIONNAIRE  |                   | ADDRE               | ss                         |                |                                       |              |          |          |                  |           |            |            |               |
| l _  | The state of the s |                   | 1                   |                            | ne as<br>nple  | b. Apt. No. or other unit designation |              |          |          |                  |           |            |            |               |
| 1  | 072 1072 DIADY SUDVEY  |                   | }                   |                            | iress<br>em 7) |                                       |              |          |          |                  |           |            |            |               |
|  | 972-1973 DIARY SURVEY  |                   |                     | 1116                       | ; m 7 ;        | c. City                               |              |          |          | State            |           | Z          | ZIP code   |               |
| ~ 11 023 🕴   | Total Control of the  |                   | 9. SPECIA           | a. Nam                     | e              |                                       |              |          |          | b. Code          |           | c          | . Expected | d units       |
| NOTICE - All information which would permit identific persons engaged in and for the purposes of the survey, | ation of the individual will be held in strict confidence, will be and will not be disclosed or released to others for any purpose   | e used only by    | PLACE               | _                          |                |                                       |              |          |          |                  |           |            |            |               |
| 10. Interviewer's name Code  | 13. FINAL INTERVIEW STATUS - Enter th  | e appropriate cou | le (1–17) for b     | oth placemen               | t and pick     | -up for each w                        | eck.         |          |          | <u>'</u>         | NOTES     | <u></u>    |            |               |
|  | If code  | ), also enter the |                     |                            | ·              | •                                     |              |          |          |                  |           |            |            |               |
| Date Time Date Time  | Code<br>1 — Diary placed or completed  |                   |                     |                            |                |                                       |              |          |          |                  |           |            |            |               |
| a.m. a.m. p.m. p.m.  | NONINTERVIEW CODES   |                   | WEEK 1              |                            |                | ₩E                                    | EK 2         |          |          |                  |           |            |            |               |
| a.m. a.m. p.m. p.m.  | Туре А   | DIARY             | PLACEMENT           |                            |                | DIARY PLA                             | CEMENT       |          |          |                  |           |            |            |               |
| a.m. a.m. p.m. p.m.  | 2 — Unable to contact  |                   |                     |                            |                |                                       |              |          |          |                  |           |            |            |               |
| a.m. a.m. p.m.   | 3 - Temporarily absent during entire reference week  | <u>A05</u> —      | - Code              |                            | A08            | C oc                                  | de           |          |          |                  |           |            |            | 0 117         |
| a.m.<br>p.m. a.m.<br>p.m.  | 4 - Refused<br>5 - Other - Specify in Notes  |                   |                     |                            |                |                                       |              |          |          |                  |           |            |            | car turks     |
| a.m. a.m. p.m. p.m.  | · ·  |                   |                     | _ Mo./Day                  |                |                                       | Mo           | o./Day   |          |                  |           |            |            | 1712 +        |
| a.m. a.m. p.m. p.m.  | Type B<br>6 — Vacant   |                   |                     |                            |                |                                       |              |          |          |                  |           |            |            |               |
| 11b. DIARY DATES   | 7 — Occupied by persons with URE   | DIARY             | PICK-UP             |                            |                | DIARY PICK                            | (-UP         | İ        |          |                  |           |            |            | 2             |
| WEEK 1 WEEK 2  Mo.   Day   Yr.   Mo.   Day   Yr.   | 8 - Under construction, not ready  |                   | -                   |                            |                |                                       | -            |          |          |                  |           |            |            |               |
| A01) From   A03 From   | 9 - Other - Specify-in Notes   | (A06)             | Code                |                            | (A09)          | Coo                                   | de           |          |          |                  |           |            |            | - Harris      |
| T. T   | Type C   |                   |                     |                            |                |                                       |              |          |          |                  | -         |            |            | 160           |
| A02 10   A04 10  | 10 - Demotished<br>11 - House or trailer moved   |                   |                     | _ Mo./Day                  |                |                                       | Mo           | o./Day   | •        |                  |           |            |            |               |
| 12. SUPERVISOR'S USE   | 12 - Converted to permanent nonresidence   |                   | ,                   | 1, 50,                     |                |                                       |              | ,,       |          |                  |           |            |            |               |
| Initials Date  a. Recheck  | 13 – Merged  | If rada           | 1, mark appra       | oriute hav                 |                | If code 1, ma                         | ark anoronis | te hav   |          |                  |           |            |            |               |
| a. Recheck   | 14 - Condemned   |                   | ompleted by re      |                            | (A10)          | 1     Comple                          |              | ,        |          |                  |           |            |            |               |
| b. Observation   | 15 - Located on military base (post) 16 - CU no longer at sample address   |                   | artial recall       |                            |                | 2 Partial                             |              |          |          |                  |           | 17.12.40   |            |               |
|  | 17 - Other - Specify in Notes  |                   | otal recall         |                            |                | 3 Total r                             |              |          |          |                  |           | 45 34.5    |            |               |
|  | 1  | 1                 |                     |                            | 1              |                                       |              |          |          |                  |           |            | 1 73 - 114 | COLL Division |

| ~ 12 0  | 13 ->-  |   |  |  | -  |                               |   |  | Par   | rt A —   | но  | USEH                   | HOLD C                 | HARACTE   | RISTICS   |  |  |  |   |   |                         |  |   |  |                          |            |
|---|---|---|--|--|--|-------------------------------|---|--|---|--|---|------------------------|------------------------|---|---|--|--|--|---|---|-------------------------|--|---|--|--------------------------|------------|
| • ASI   | OF  | ALL U   | VITS   |  |  |                               |   |  |   | • [  | ASK   | IF MA                  | RKED                   |   | 3. LIVING QU                                      | ARTERS - ASK   | IF NOT                                   | APPA   | RENT BY   | OBSERVATION   |                         |  |   |  |                          |            |
| la. Are these living quarters —  (BO1)  1 (Owned or being bought by someone in this unit (except cooperative or condominium)?  2 (A cooperative or condominium owned or being bought by someone in this unit?  3 (Rented for cash rent?  4 (Occupied without payment) |   | and quarters —  and or being bought by one in this unit (except erative or condominium)?  b. Do you have a mortgage on this property?  b. Do you have a mortgage on this property?  Bog 1 YES  BO2 1 YES  BO3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |  | used partly for business<br>or rented to others?   |                               | d. What percent of the expenses is counted as a business expense?         | e. When did you move to this address?  BOS  Month              | Bo6   | 2a. Does this place have 10 acres  (B06) 1  YES - Ask 2b(1) 2  NO - Ask 2b(2)  b. During the past 12 months, did crops, livestock, and other far from this place amount to - |   |                        | sales of<br>m products | kitchen facilities?  If NO, mark "None."  If YES - Are they for this household's exclusive use?   |   | Do you have direct access from the outside or through a common hall?  4   Yes, direct access |  | e<br>ugh<br>, direct<br>ess  | c. Housing unit  Bo9  Thouse, apt., flat  Trailer not in Special Place  HU not specified above — Describe |   | Place                   | 6 Tent or trailer  |   | oming or<br>ang house<br>or trailer si<br>, not HU — | ite                      |            |
| <u> </u>  |   | ash ren   |  |  |  | others                        |   | <i>N</i>   | Year  |  | (2)   | \$250 ar ı             | more? 3                | YES 4 NO  | 3 🔲 1   | i i  |  |  | ther unit   |   |                         | <b>-</b>   | ì   |  |                          |            |
|   |   | 5. á  | 6. NAME Lost no What is the name   |  |  |                               | TIONSHIP  |  | 8. HOUSEHO<br>MEMBER  |  | DATE  |                        | 10. AGE                | 11. MARITAL<br>STATUS   | 12. SEX   | 13. RACE   |  | MBER   | ~ 32 (  | If more than<br>the first gu  | estionno<br>T           | J, trans<br>tire for   | cribe Cl<br>this hou                          | J No. fra<br>sehold,                                 |                          | No.        |
| PROCESSING USE ONLY   | CONSUMER UNIT NO.   | PERSON LINE NO.<br>Circle fine No. of res.  | or staying here?<br>List all person<br>persons who ar<br>to include infat  | es of all other persons who usually live temporarily absents under 1 year of the under name of the under when the triew. | here and all<br>nt. Be sure<br>age.<br>last person | the hea<br>Example<br>daughte | s 's rel<br>ad of the ho<br>ble: Head, w<br>ter-in-law, u<br>, lodger's w | rife, son,<br>incle,   | Is this usual place of resident Mark YES no usual residence YES   N   | ce noice? co   |   | nd year<br>birth?      |                        | Isnow – 1-Married? 2-Widowed? 3-Divorced? 4-Separated? 5-Never married?   | 1-Male 2-Female Enter                             | 1-White 2-Black or Negro 3-Other - Specify in Notes Enter code                               | Ask of over 1  Is I in the A Forces  YES | oyears<br>now<br>trmed   | K   | 17. LINE NUMBER  Transcribe line numbers of all persons in this CU from Item 5. | DEI<br>In<br>dat<br>per | 8. FOR ALL ADDITIONS AND DELETIONS TO THIS CU  In the appropriate column entidate the change occurred for person added or deleted in ite  Additions Deletion |   | enter the for each n item 17, etions                 | or each item 17. tions   |            |
| (01)  |   | ,   |  | `  |  | Cone                          |   |  | 163 1   |  | 1VIO.   | TA.                    |                        | Enter code  | code  | Enter code   |  | 2  | 001   |   | MO.                     | DAY  | YR.   | MO.  | DAY Y                    | <u>R.</u>  |
| <u></u>   |   | 2   |  |  |  |                               |   |  |   | +  | 1   |                        |                        | <del> </del>  |   |  | 1  | 2  | 002   |   |                         | <u> </u>   |   | <u> </u>   |                          |            |
|   |   |   |  |  |  |                               |   |  |   | +  | 1   |                        |                        |   |   | <u> </u>   | <u>,</u>                                 | 2  |   |   |                         | <br>   |   | 1  |                          |            |
| ©3  |   | 3   | <u> </u>   |  |  |                               |   |  |   | +  | 1   |                        |                        |   | Part Transfer                                     |  | 1  | 2  | 003   |   |                         | <br>   |   | 1  |                          |            |
| <b>©</b> 4  |   | 4   | 100000000000000000000000000000000000000  |  |  |                               |   |  |   |  | - I   |                        |                        |   |   |  | 1  | 2  | (004)   |   |                         | 1  |   |  | <u>i</u> _               |            |
| <u></u>   |   | 5   | Age No. 1 Sec.   |  |  |                               | Caradas Forms 1 o   | seessa ussi soomiin  |   | +  | <u> </u>  |                        |                        |   |   | <u> </u>   | 1,                                       | 2  | 005   |   | <u> </u>                |  |   | i  |                          |            |
| <u>©</u>  |   | 6   | The second secon |  |  | 12                            | ishida<br>Buwani  |  |   | -  | 1   |                        | -                      |   |   |  | 1  |  | 006   |   |                         | \  | ,   |  | - 1                      |            |
| (07)  |   | 7   | Total Age Assessment   |  | 11 m 11              | - 94                          |   |  |   | +  | 1   |                        |                        | 1   | <del>                                      </del> |  | 1  | 2  | (007)   | <u> </u>  |                         |  |   | <u> </u>   |                          | <b>.</b> — |
| C08   |   | 8   |  |  |  |                               |   |  | 1   |  |   |                        |                        |   |   |  | 1  | 2  | ©08   |   |                         |  |   |  | <u>i</u>                 |            |
| ©9<br>————————————————————————————————————  |   | 9   |  | State Const  |  |                               |   |  |   | $\bot$   |   |                        |                        |   |   |  |  | 2  | 009   |   |                         |  | <u> </u>                                      | <u> </u>   | <u> </u>                 |            |
| ©10   |   | 10  |  |  |  |                               |   |  |   |  | i   |                        |                        |   |   |  | Ļ  |  | (D10)   |   |                         | l<br>I   | <u>i                                     </u> | i  | 1                        |            |
| .5a. I hav<br>— An<br>— An<br>— An<br>tra<br>— An   | e listed<br>y babie<br>y lodge<br>yone wl<br>veling,<br>yone el | s or smars, board<br>no usual<br>at school<br>se stayi  | PLACEMENT  and names from iter  If children?  lers, or persons in you  ly lives here but is to  ol, or in a hospital?  mg here?  FOR EACH PERSO  M 8, FILL ITEMS 5   | our employ who live is emporarily absent at  | nere?  |                               | NO 15b. 1   | hold, d<br>fill Item<br>f the entire ho<br>When did<br>Prepare | cread names persons still liversons have left the person who raw a line thrown 18, then as a usehold has red the family a new quest | i from<br>lying or<br>It the ho<br>a has le<br>rough it<br>k item i<br>maved,<br>y move?   | staying<br>ousehol<br>eft the<br>tem 6 of<br>15c.<br>osk: | there?<br>d?<br>house- | YES NO                 | For each of items 6-8 items 9-1 from item the origina items 17 or | now, includin                                     | complete<br>em 8, fill<br>CU No.<br>em 4 on<br>re and<br>yestion -                           | 15d.                                     | Were any overnight (during his YES - Did any here over the second part of the second part of the second part of the second part over the second part of the second pa | the dlary one the dlary of Which po Enter lin yone else, pernight fo                                      | P<br>old members away<br>day or more last w<br>reference period)?               | stay<br>last            | E01)   | ~ 12 EEK 1  YES NO YES NO                     |  | WEEK 2  YES NO YES NO NO |            |
|   |   |   | em 15a, continue v   |  |  |                               |   | the hou  | t is now occu<br>isehold numbe<br>cover) by 1.  | pied. R<br>er (iten  | laise<br>n 4  |                        |                        |   |   |  |  |  |   | If YES - How many such persons?  Enter the number of persons                    |                         |  |   | _ 604  | <i>,</i> )               | _          |

| 16a. INTERVIE                         | EWER CHECK ITEM FOR  |  |  |  | L OR GROUP O   | F RELATED PERSONS   | ASK AT END OF PART A ON<br>THE FIRST CE-106 PREPARED  | NOTES  |   |
|---------------------------------------|--|--|--|--|--|---|---|--|---|
| • Enter '']<br>of househ<br>and ony o | er "]" in item 4 on the lines for head<br>household, wife, never married children,<br>lany other person listed who is<br>asidered part of their family.              |  | 1  | 16c. What items<br>himself? If<br>listed items | does he pay for<br>two or more<br>s morked, assign<br>U No. Otherwise,           | 16d. Who pays for the remainder?  |   | FOR THE HOUSEHOLD.  If more than one CU in the household, ask:  19a. Does more than one person in this household regularly contribute to |   |
| related at                            | ther individuals or closely raups ask items 16b-d, as  |  | YES - Assign separate CU No. in item 4.      | ☐ Food   | Clothing   | Other CU in HH - Enter C  | y in Notes and  | the expense of items such as food, cleaning supplies, or paper products?   |   |
| opplicabl                             | le. Fill a separate line for each.   |  | NO - Ask item 16c.  YES - Assign separate CU |  |  | assign separate CU No.  | in item 4.  | YES - Ask b  | <u> </u>                                |
| For sepai<br>sequence<br>in the hou   | rate CU's assign numbers in<br>e, e.g., ''2'' for the second CU<br>usehold.  |  | No. in item 4.  NO - Ask item 16c.           | ☐ Food ☐ Shelter                               | ☐ Clothing ☐ None  | Persons not in HH - Special assign separate CU No.                                    | fy in Notes and   | NO - SKIP to Part B  |   |
| ● NOTE: 1:                            | OTE: If 6 or less CU's prepare a separate questionnaire for each CU after completing the questionnaire for CU No. 1, Enter in item 6 of the                          |  | YES - Assign separate CU Food                |  | Clothing None  | Other CU in HH — Enter C Person not in HH — Specify assign separate CU No.            | U No. in item 4.  | b. Does one person usually make the purchases?  YES - Who?  Enter line No.   |   |
| n<br>ti                               | odditional questionnalre(s) the names of all persons in the CU, then fill item 17. If more than 6 CU's STOP the interview and call the area office for instructions. | YES - Assign separate CU No. in item 4,  NO - Ask item 16c.  Shelter |  | Clothing                                       | Other CU in HH - Enter Company Person not in HH - Specify assign separate CU No. | v in Notes and  | NO  NOTE: If YES, ask the person who usually makes the purchases to record the expenses for |  |   |
|                                       |  |  | • After assigning (                          | CU Nos. in item                                | 4 for all listed po  | ersons, go to item 17 above. •  |   | the shared items.  |   |
| ~ 13 029 ♦                            |  |  | Part B - CONSUMER                            | R UNIT C                                       | HARACTE  | RISTICS - Ask at Weel   | k I Placement   |  | 2 1 2 2 2 2 4 4 2 4 4 4 4 4 4 4 4 4 4 4 |
| 1a. About hor                         | n often up you (OQ) shop   | F01)<br>F02)   | Week   | Times per                                      | HEAD OF  3a. What is the regular sch   | AS 3 AND 4 FOR<br>CU ONLY<br>highest grade (year) of<br>001 (head) has                | Élementa  | rer attended   |   |
| the usual<br>the groce                | rocery store?  |  | F03  |  | ever attend  | ed?   | High<br>9 10 C  | ]11 []12 []  |   |
|                                       | w much of this amount was for<br>nonalcoholic beverages? (   | F 0 5  | .00  |  | h Did and  | malata that made (icas)?  |   | 15 16 17 or higher   |   |
| d. About how<br>for tobacc            | w much of this amount was<br>co?   | F06  | \$00   | o 🔲 None                                       | 4a. Has eve  | er completed a vocational agram? (in high school; as an                               | (F14) 1  YES  |  |   |
|                                       | w much of this amount was olic beverages?  | F07  | \$   | o 🗀 None                                       | apprentice;  | in business, nursing, trade,<br>or Armed Forces school.)                              |   | – SKIP 10 5  |   |
| other veh                             | Do you (CU) own an automobile, truck, or other vehicle? Do not include any vehicle which is used entirely for business purposes.                                     |  | F08 1  YES 2  NO - SKIP to 3                 |  |  | ne main field of training?<br>ss or office work<br>g, other health fields<br>or craft |   |  |   |
| b. How many                           | -  | (F09) Number   |  |  | 4 - Engine<br>5 - Agricu   | ering or science<br>Rure or home economics<br>- Specify 7                             | F16   | _ Code   |   |
| c. Is this (a<br>used part            | are any of these) vehicle(s) tially for business?  | F10 1 TYES   |  |  | <u>'</u>   |   |   |  |   |
| • If more i                           | than one vehicle in 2b   |  | z NO – SKIP 10 3                             |  | PROCESSI   | NG USE ONLY   | F17   | e Number   |   |
| d. How man                            |  | FII  | Number                                       |  | 5. What is you   | ır telephone пить ber?  | Area cod  | e Milline  |   |
| e. What perc                          | cent of your total vehicle expense ed as a business expense?   | F12)   | Percent                                      |  | 6. What is the   | best time of day to   |   | a.m.<br>p.m.   |   |

|  | _                                     | Part C - IN                                | COME - Ask ot W  | eek 2 Pick-up  |  |  |   |                                      |  |
|--|---------------------------------------|--|--|--|--|--|---|--------------------------------------|--|
|  | ~ 14 019 \                            | ~ 14                                       | 1 027 🕴  | ~ 14 035 🕴   | ~ 14 0   | 43 🕴   | ~ 14 (                                    | 050 🛊                                |  |
| ● Ask items 1—4 for each person 14 years old or over in this CU  |                                       | GO) Line No.                               | GOI Line No.   |  | G01) Line No.  | G01) Line No.  |   | GOI Line No.                         |  |
| 1. How many weeks during the past 12 months did work, either full-time or part-tim not counting work around the house?   | e,                                    | G02) Weeks OR  O Did not work -  SKIP to 3 | o Did  | eeks OR<br>not work –<br>7 to 3  | Weeks OR  o ☐ Did not work ~  SKIP to 3  | G02 Weeks OR  O Did not work -  SKIP to 3  |   | 602)Wee<br>o [ ] Did no<br>SKIP ∧    | ot work -  |
| 2a. In the job in which received the most earnings during the past 12 months, for wh   | nom did he wark?                      |  |  |  |  |  |   |                                      |  |
| b. What kind of business or industry was it?   |                                       | 603  | 603  |  | 63 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | 603  |   | 603                                  |  |
| c. What kind of work did he do?  |                                       | (i)  | 604  |  | (i)  | G04)   |   | (604)                                |  |
| d. Was  1 — An employee of a PRIVATE company, business, or individual working to 2 — A Government employee? (Federal, State, local)  3 — Self-employed in OWN business, professional practice, or farm?  4 — Working Without PAY in family business or farm? | for wages or salary?                  | (COS) Code                                 | ask - If code 3  | and not a form, ask  | G05 Code  If code 3 and not a form, ask Is the business incurporated?  G06 1 YES 2 NO                                    | GOS Code  If code 3 and not a farm, ask  Is the business incorporated?  GOS 1   YES 2 NO |   | GOS Code 3 and                       | de<br>nd not a fonn, ask –<br>less Incorporated?<br>2 NO |
| • If "Did not work" during the past 12 months and over 50 years old, ask — 3. ls retired?  |                                       | (G07) 1 □ YES 2 □ NO 3(                    | NA (QO) 1 TYES   | 2 NO 3 NA  | 607 1 YES 2 NO 3 NA  | 607 1 ☐ YES :  | z   | 607 1 □ YES                          | 2 NO 3 NA  |
| 4. During the past 12 months, how much did earn in -   | · · · · · · · · · · · · · · · · · · · |  |  |  |  |  |   |                                      |  |
| a. Wages or salary before deductions? (Include commissions, tips, Armed Forces po  | ay and allowances.                    | .) G08 \$00 OR o                           | None 608 \$  | 00 OR o 🗀 None   | . 608 \$00 OR o_, None   | @08 \$   | 00 OR o 🗀 None                            | ©08 2                                | .00 ОЯ о 🔲 Моле  |
| b. NET income from own business or professional practice?  |                                       | . G09 \$00 OR o                            | None 609 \$  | 00 OR o None   | (G09) \$,00 OR o ☐ None  | 609 \$   | 00 OR o None                              | ©09 2                                | .00 OR o  None   |
| c. NET income from own farm?   |                                       | . (10) \$00 OR o                           | None 610 \$  | 00 OR o 🗌 None   | 610 \$00 OR o None   | ©10) 2———  | 00 OR o None                              | @10 \$                               | .00 OR о None  |
|  | ~ 15                                  | 016 → ♦                                    |  |  | Part D - DIARY CHECK   | — Ask at Week  | 2 Pick-up                                 |                                      | ~15 024 ₩  |
| <ul> <li>Ask item 5 for the entire CU</li> <li>During the past 12 months did any members of this CU receive any money from -</li> </ul>  |                                       |  |  |  | ed diary for the items listed in col. o.<br>entire diory, ask the questions in co<br>ked, complete Part A, items 15d and | d. b for each box t  | hat is NOT marked                         | e reported, mark the<br>d in col. a. | c box in col, a.   |
| a. Social Security or Railroad Retirement checks from the U.S. Government?   |                                       | <u></u>                                    | Mark the box if expenditures of \$1.00 or more are reported. (a) | We have foun   | • Ask questions o, b, d that certain types of expenses are often (b)   | and c if box in co<br>en forgotten. I would  | l. a is NOT marke<br>like to ask a few qu | d.<br>uestions concerning            | these Items.   |
| b. Estates, trusts, or dividends?  | YES A                                 | 10<br>10                                   | 1.   | a. Does anyone in the family eat out — lunches, dinners, snacks, etc. even occasionally? |  |  | ☐ YES                                     | NO - SKIP to r                       | next Item  |
| Interest on savings accounts or bonds?   | *                                     | .∪∪ \$∪∪                                   | ☐ Meals eaten out  | b. Did anyone in the family eat out at all during the past week?                         |  |  | T YES                                     | . NO - SKIP to r                     | next item  |
| Net rental income?   | 5 🗍 6                                 | · 🗆 J                                      |  | c. How much was spe  | ent for meals eaten out during this past v   | veek?  | 10) 1                                     | .00                                  |  |
| c. Welfare payments or other public assistance (aid to families with   | YES N                                 |  | 2.   | a. Does anyone in the<br>pipes — even occa   | e family smoke — cigarettes, cigars,<br>usionally?   |  | ☐ YES                                     | NO - SKIP to r                       | next item  |
| dependent children, old age assistance, or aid to the blind or totally disabled)?  | (HOS) 1 🔲 2                           | .00.                                       | ☐ Tobacco  | b. Did anyone in the during this past we   | family buy any cigarettes, cigars, or tob  | âcco   | □ YES                                     | □ NO - SKIP 10 r                     | next item  |
| d Upomplasa a succession 2   | YES N                                 | `  |  |  | ent during this past week?   |  | (102) \$                                  | ,00                                  |  |
| d. Unemployment compensation?  | <b>&gt;</b> +c                        |  | .3.  | a. Does anyone in the  | o family buy alcoholic beverages — beer,<br>— for HOME USE, even occasionally?   |  | YES                                       | NO - SKIP to r                       | next Item  |
| Government employee pensions?  |                                       | .00 S00                                    | ☐ Alcoholic  |  | y alcoholic beverages for HOME USE dur   | ne this past week?   |   | NO - SKIP to n                       |  |
| Veteran's payments?  |                                       |  | beverages for<br>HOME USE  |  | <u> </u>   | mg into poor week!   | (103) \$                                  | 00                                   |  |
|  | YES N                                 | 10   | 4.   | ,  | ent during this past week?<br>e family buy alcoholic drinks at a bar, c  | afé, etc.,   | -   |                                      |  |
| e. Private pensions or annuities?  | <b>*</b>                              |  | Alashalia driaka   | even occasionally  | <u> </u>   |  |   | NO - Go to Pa                        |  |
| Alimony?   |                                       | 00   | ☐ Alcoholic drinks<br>purchased at a                             | b. Did anyone buy an   | y alcoholic drinks during this past week   | ?  | YES                                       | NO - Go 10 Par                       | rt A, item 15d   |
| Regular contributions from persons not living in this household?   |                                       |  | bar, café, etc.  | c. How much was spe  | ent during this past week?   |  | 304) \$                                   | 00                                   |  |
| Anything else?   | 7 🔲 8                                 |  |  |  | Continue with Part A, items  | 15d and 15e AND  | Port C.                                   |                                      |  |

.