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MEMORANDUM FOR Distribution List

From: Susan Schechter [*signed 9/15/09*]
                             Chief, American Community Survey Office

Subject: Final Results – Respondent Effects Associated with Questionnaires
                             Designed to Accommodate Survey Processing

Contact Person: Deborah H. Griffin and Sandra L. Clark

Attached are the final results of an evaluation on the effect of changes that were made to the ACS questionnaire in 2007 to accommodate the shift from key-from-paper (KFP) to key-from-image (KFI) data capture methods. This evaluation also includes results from an initial test that was conducted in 2005 that identified higher than expected levels of respondent error. The results from this initial test had a major impact on the changes made to the design of the basic demographic section (matrix portion) of the 2007 ACS mail questionnaire.

The goal of this research was to determine if there were any lingering respondent completion issues associated with any of the changes that were made to the 2007 ACS production questionnaire. The research concluded that respondents completed the redesigned 2007 ACS KFI questionnaire in much the same way as they completed the 2006 ACS KFP questionnaire.

Major findings:

- The initial design changes to the matrix portion of the 2005 test questionnaire resulted in large increases in the levels of item nonresponse for three questions – marital status, Hispanic Origin, and race. Based on these test results, the matrix portion was redesigned for the 2007 questionnaire and these increases were essentially eliminated.
- The increased level of item nonresponse noted in the initial 2005 test for the sex item remained high on the 2007 questionnaire.
- The minor design changes to the check boxes and write-in boxes had minimal effects on respondent behavior in completing the 2007 ACS questionnaire.
- In 2006 and 2007, high levels of item nonresponse (greater than 50%) were detected for the write-in entries of country for the migration question. This question may warrant field-testing to improve its performance.

Attachment

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Respondent Effects Associated with Questionnaires Designed to Accommodate Survey Processing

FINAL REPORT

**Respondent Effects Associated with Questionnaires
Designed to Accommodate Survey Processing**

Deborah H. Griffin and Sandra L. Clark
U.S. Census Bureau
Washington, DC 20233

Abstract

Survey managers acknowledge that paper questionnaires must be designed to accommodate the requirements of data capture systems. It is important, however, to recognize that such design elements can have an effect on respondent behavior. This paper reminds us that even fairly minor changes in the format of a questionnaire can jeopardize successful completion by respondents. In 2005, the paper questionnaire used in the American Community Survey was redesigned to transition from a key-from-paper to an imaging and key-from-image (KFI) data capture methodology. On the surface the proposed changes appeared fairly minor--adding additional white space and removing horizontal lines between questions. The KFI system experts proposed most of the changes and little attention was given to possible respondent implications. The Census Bureau conducted a pretest of this revised questionnaire and analysis of the results identified an increase in nonresponse for selected questions. A closer review of the changes identified the potential for respondent navigation errors. A questionnaire design team was established to redesign this questionnaire to meet technical KFI requirements and address respondent visual miscues apparent in the new questionnaire. This paper reports on the test of the initial and redesigned forms. It provides a valuable lesson in the need to pay attention to both the technical requirements and the visual dynamics of respondent-administered survey instruments.

Introduction

The American Community Survey (ACS) is a mixed mode survey conducted by the U.S. Census Bureau that produces annual demographic, housing, social, and economic characteristics for the nation, states, counties, and areas as small as census tracts and block groups. The ACS began national implementation in 2000 and expanded in 2005 from a demonstration stage annual sample of about 800,000 to an approximate 3 million annual sample. The first mode of data collection in the ACS is mail. The mail questionnaire includes about 105 questions (or parts of questions) that require responses in the form of both check boxes and write-ins.

Of the 230,000 questionnaires mailed each month, about 106,000 are completed and returned by mail. The workload for data capture therefore includes about 1.3 million questionnaires every year. Significant data capture backlogs were experienced in 2005 due to the large sample size increase. To reduce overall costs and improve the efficiency of data capture operations, the Census Bureau decided to shift from a key-from-paper (KFP) data capture system to an integrated Computer-Assisted Data Entry (iCADE) system. The iCADE system combines optical mark recognition and software-directed keying of write-in entries from digital images produced by scanning the paper forms.

While the questionnaire formatting requirements for KFP were limited, the iCADE system required several revisions to the form to facilitate the software's correct orientation and interpretation of responses. These revisions are the focus of this paper. Two attempts were needed to ensure that changes in questionnaire design to accommodate survey processing did not influence respondent behavior in correctly completing the questionnaire.

Background

A well-designed questionnaire will facilitate respondent navigation and make it more likely that respondents complete the questionnaire as intended. A set of design principles for self-administered questionnaires is proposed in Dillman (2000). Several of his principles speak to the need to define a clear navigational path and create respondent visual navigation guides. The choice of data capture method should never interfere with the ability to meet these principles. While survey designers need to consider processing requirements, they should never choose a questionnaire design that fulfils those requirements at the expense of the respondent.

The task of completing a mail questionnaire is a visual exercise. The visual design of the questionnaire is therefore central to successful completion of this task by a survey respondent. Jenkins and Dillman (1997) stress the value of designs that follow natural reading and comprehension processes to make sense of visual information. These processes are founded in the concepts of basic Gestalt psychology. Of the seven design principles proposed in Norman (1988), the principle most relevant to this research is the need to make the task clearly visible through the use of visual layouts that clarify the sequence of tasks and the placement of responses. Research has demonstrated that alternative questionnaire formats influence respondent behavior and ultimately, respondent success. For examples, see Redline, Dillman, Dajani, and Scaggs (2003) and Christian and Dillman (2004).

A survey questionnaire, such as the one used in the mail mode of the ACS, relies on verbal, symbolic, numeric, and graphical languages to explain the respondent's task. See Redline and Dillman (2002) for more information on these visual languages. The graphical language, including the format, spatial presentation, use of color and shapes, were manipulated in this redesign effort.

Self-administered questionnaires use multiple conventions to collect respondent information. This paper looks at the use of a matrix or grid that includes questions requiring a check box response, a write-in entry, or both a check box and write-in response. The paper also analyzes data collected without a grid that have the same three types of questions.

Matrix/Grid Formats

The ACS collects data for all persons in a household. Up until 2008, basic demographic data in the ACS were collected in a matrix where a series of questions were listed across the top of the page and household members were listed down the left side of the page. Respondents were supposed to answer each question for each individual by reading the question once and providing responses for all household members. Based on testing in 2006, the format for collecting basic demographic data was changed to a "sequential" style (Chesnut, 2008). It is this matrix design that was changed the most in the data capture system transition. Similar matrix designs are often used in self-administered questionnaires to save space. Dillman, Smyth, and Christian (2009) acknowledge the inherent complexities of matrix-formatted questionnaires. In particular, they note that, "the structure of the matrix leaves it up to the respondent as to whether to navigate the matrix and fill in answers primarily in columns or in rows or some combination of both." Questionnaire design efforts can improve or complicate respondent horizontal or vertical navigation. Dillman, Gertseva, and Mahon-Haft (2005) summarized the visual design principles used to support redesigned matrices in the United State Department of Agriculture's Agricultural Resource Management Survey. They encouraged respondent navigation with numerous visual cues including the addition of dark horizontal lines and the use of reverse print. Changes were made to these survey forms to facilitate improved respondent navigation across a matrix but no formal testing was undertaken to provide empirical data on the effect of those changes.

Check box and Write-in Box Formats

All other questions on the 2006 and 2007 ACS questionnaire were presented in a sequential format. Housing questions were posed first, followed by detailed population questions that were asked for each person in the household. Attachment 1 provides copies of the full ACS questionnaires used for this analysis. There are three basic styles of questions used in the ACS – questions with check box responses, questions with write-in boxes for responses, and questions with a combination of the two. For our analysis the latter category involves questions where a write-in is only required if a certain check box response is selected. This paper summarizes the questionnaire design changes that were made to each of these types of questions in the shift to an iCADE data capture system and a comparison of the differences that were noted in item nonresponse.

Tests of Redesigned Matrix

Initial Test

Design Changes

Several questionnaire design changes were needed to shift from a KFP data capture system to one based in iCADE. A team of iCADE engineers redesigned the 2005 ACS questionnaire to accommodate iCADE data processing requirements. This initial iCADE questionnaire (iCADE1) reflected significant changes to the 2-page grid (or matrix) designed for the collection of names and basic demographic data (sex, age, relationship, marital status, race, and Hispanic origin/ethnicity.) Borders and grid lines were altered and a white margin was added between the two pages. Figures 1a and 1b display the 2-page grid for the KFP form and the iCADE form.

Note that the thick border running across the top of the page was eliminated in iCADE1. The grid lines that were originally black were replaced with light green lines in the redesigned iCADE1 form. Major changes were made to the centerfold area—iCADE1 added a black line border around each page and a white margin between the two pages.

Figure 1a. KFP questionnaire 2-page grid

Figure 1b. iCADE1 questionnaire 2-page grid

In November 2005, an experimental sample panel of 49,702 addresses was used to test this initial iCADE questionnaire. All addresses in this panel received the initial iCADE questionnaire shown in Figure 1b (iCADE1). The ACS production sample of 227,046 addresses for November 2005 was used as the control with all addresses receiving the 2005 KFP questionnaire shown in Figure 1a (KFP1). Both mailings followed identical schedules and mailing strategies that included an advance letter, initial mailing package (with a questionnaire), reminder postcard, and replacement-mailing package (with a second questionnaire) that was mailed to nonrespondents only. To eliminate potential effects of data capture method, the mail-returned questionnaires from both panels were data captured using identical KFP procedures. The experimental sample panel only used the mail mode for data collection and not telephone and personal visit as in the production ACS. For this reason, we only included mail returns before the start of the telephone phase for production ACS and the first month of returns for the experimental sample panel.

Unedited data from mail returned questionnaires were used to produce item nonresponse rates. The item nonresponse rates for this analysis are defined as the ratio of the number of valid responses to the number of questions requiring a response. All item nonresponse rates are weighted to reflect the ACS sample design. Statistical testing was conducted using a 90 percent confidence level.

Results

A quick tabulation of item nonresponse rates for selected questions revealed increases in item nonresponse for the questions included in the 2-page grid. See Table 1. Item nonresponse rates for all six questions were found to be significantly higher for the iCADE1 questionnaire. The three questions on page 3, the right-hand page (marital status, Hispanic origin/ethnicity, and race) were especially elevated.

Table 1. Item Nonresponse Rates for Questions Included in the Grid

Question	KFP1 (%)	iCADE1 (%)	Difference (iCADE1-KFP1) (%)	Statistical Significance*
Page 2 (left of fold)				
Sex	4.0	6.2	2.2	Yes
Age	2.4	3.4	1.0	Yes
Relationship	2.5	3.0	0.5	Yes
Page 3 (right of fold)				
Marital Status	5.1	9.6	4.5	Yes
Hispanic origin	7.5	13.3	5.8	Yes
Race	6.3	10.8	4.5	Yes

*Statistical significance tested at the 90 percent confidence level

A review of the initial iCADE questionnaire concluded that the changes in format introduced navigation problems. The 2-page matrix design requires respondents to match rows and columns across two pages. The iCADE1 design reduced respondent visual cues linking these two pages. It removed the thick border at the top and bottom of these pages that served to link the pages together. The boxing of the questionnaire area on each page, which was added to assist optical scanning, separated pages 2 and 3. The increased white space at the centerfold reinforced the separateness of the two pages.

In addition, the redesign removed several navigation guides that are critical to successful matrix completion—elements conveying that the pages must be read both vertically and horizontally. Specifically, horizontal and vertical lines connecting the questions at the top of each column with

the persons in each row were visually diminished. Respondents got lost navigating the questionnaire and many skipped over the questions on page 3.

As a consequence, the Census Bureau decided to delay the shift to iCADE data capture and redesign efforts were undertaken that would accommodate iCADE-processing requirements without a negative effect on respondent behavior. Staff acknowledged the complexity of the 2-page matrix design, especially for respondents to accurately navigate to the questions on page 3. In 2006 the ACS continued using a KFP questionnaire, identical in content and format to the one used in 2005.

Second Test

Design Changes

Using the information gleaned from the pre-test, a second team that included iCADE engineers, survey methodologists, and questionnaire design experts redesigned the form, which was put into production in 2007. This redesign was focused on improving horizontal and vertical navigation and reinforcing the connection between page 2 and page 3. Figure 1c displays the 2-page grid for this second iCADE form (iCADE2). Specifically, to more clearly connect the two pages, where iCADE1 eliminated the thick border at the top of the page, a narrower border was added back in iCADE2. With respect to the centerfold area, iCADE2 retained the black line around each page but replaced the white margin with a green column to mimic the other grid columns. Both of these visual changes are based in Gestalt psychology, recognizing that our vision uses borders, edges, and patterns to establish groupings. Here we minimized the strong design elements that created two separate groupings (i.e., boxes) across the two pages. The Law of Proximity also supports these changes—visual elements closets together are seem as belonging together. The two pages are brought closer together by these format changes.

In addition, to improve horizontal and vertical navigation, iCADE2 restored the black grid lines that iCADE1 had replaced as light green and iCADE2 also added alternate shadings of green across rows of the grid to more clearly define horizontal organization.

Figure 1c. iCADE2 questionnaire 2-page grid

Table 2. Summary of Grid Formatting Changes

	iCADE1	iCADE2
Top grid borders	Thick border was replaced with a black line border	The thick border was added back, but reduced in width.
Side grid borders	A black line border was added to the right and left sides of each page	Same as iCADE1
Interior grid lines	Lighter, green grid lines were added to replace the black horizontal and vertical grid lines	The black horizontal and vertical grid lines were added back
Center margin	A white margin was added to the centerfold area	The white margin was replaced with a green column to mimic the other grid columns
Bottom grid borders, barcodes, and page identifiers	Thick border was replaced with a black line border, barcodes and page identifiers were added to each page	Same as iCADE1

Methodology

Timing constraints precluded pre-testing the revised questionnaire. The redesigned iCADE questionnaire shown in Figure 1c (iCADE2) was mailed to the full ACS sample beginning in January 2007. The iCADE questionnaire used in 2007 was identical in content to the 2006 KFP questionnaire (KFP2), which was identical in content and format to the November 2005 KFP questionnaire used as the control for the initial experiment (KFP1). Mail returns received from the January through April 2007 sample panels were all captured using the same data capture procedures used in 2006. For this reason, we chose to compare mail returns from January through April of 2007 with mail returns from January through April of 2006. As was true for the first experiment, both mailings followed identical schedules and strategies and all mail-returned questionnaires were captured using the same methods (key from paper). While this design does not control for possible differences in respondent behavior due to the year, we do not expect this to be a major limitation.

Unedited data from mail returned questionnaires were used to produce item nonresponse rates. Item nonresponse rates were calculated using the same definitions and methods used in the initial test. Our hypothesis was that the design changes would facilitate respondent navigation across the two pages and would therefore result in a reduction in the levels of item nonresponse, especially for the items on page 3.

Results

Table 3 shows comparisons of item nonresponse for the KFP questionnaire with the redesigned iCADE questionnaire. The iCADE questionnaire continued to show increases in the item nonresponse rates for sex but for all other questions the increases in nonresponse that were found in the initial iCADE form were reduced or eliminated.

Table 3. Item Nonresponse Rates for Questions Included in the Grid

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Page 2 (left of fold)				
Sex	4.2	6.6	2.5	Yes
Age	2.5	2.7	0.1	
Relationship	2.5	2.5	0.0	
Page 3 (right of fold)				
Marital Status	5.1	5.2	0.2	Yes
Hispanic origin	7.5	7.6	0.1	Yes
Race	6.5	6.5	0.0	

*Statistical significance tested at the 90 percent confidence level

The reduction in the nonresponse rates for the marital status, Hispanic origin, and race items can be attributed to the changes made to the redesigned iCADE questionnaire. The results suggest that the navigational flow of the form was improved. The darker grid lines (as shown on the redesigned iCADE questionnaire in Figure 1c) helped separate the questions, and clarify the person rows. The flow directing the respondent to page three was enhanced by the addition of the green columns in the centerfold, as well as, the re-addition of the border running across the top of both pages. The improved navigation in the redesigned iCADE form lead respondents to the items on page three, rather than losing them, as the initial iCADE questionnaire seemed to do (shown in Figure 1b).

The higher nonresponse rate for the sex item is somewhat puzzling. This rate was 2.5 percentage points higher than the rate from the KFP questionnaire, similar to the difference found in the test of the initial iCADE form. This finding suggests that the changes to the gridlines on both iCADE questionnaires did not have an affect on response patterns for this question.

The sex item is the first question on the form, and it is different than the other check box responses of its size. For example, it is the only item with two response categories where the categories are not a "yes/no" response. In addition, the space between the question and the response categories is the largest on the questionnaire. For these reasons, it is possible that this item could have been affected differently than the other questions requiring check box responses. Response may have been impacted by the "halos" surrounding the check boxes, or the difference in font. The checkboxes themselves are also slightly different – the corners of the boxes are rounded in the KFP version and square in the iCADE version, and the line border is slightly thicker in the KFP version. The sex item may have also been affected by the changes to the write-in boxes located on both sides of the question. On both iCADE questionnaires, the write-in boxes are slightly larger and have black borders, which may draw greater attention to those items. Respondent's vision may be directed to these items and away from the sex item, forcing them to skip the sex item entirely. Overall, the sex item seems to be more delimitated in the KFP version and seems to blend in with the other items in the iCADE versions.

Interestingly, when a slightly different ACS grid design was compared with the ACS sequential design (Chesnut, 2008) the sex question was moved to be the second question asked, not the first. In this location the item nonresponse (even in a grid) was reduced to 2.2 percent.

Test of Redesigned Check Boxes

In the 2006 and 2007 ACS, 18 housing questions and 32 population questions required only a check box response. These questions did not involve a check box as a screener to request a write-in. Many of these questions were simple "Yes/No" responses, while others included a long sequence of response categories. Three of these questions (sex, relationship, and marital status) were on the 2-page grid and have already been discussed.

Design Changes

Minimal changes were made to the check boxes. White "halos" were added around each check box. In some instances this created a combined "halo" for two or more check boxes. Combined halos can result in a "continuous halo" when all response options share a single halo or a "broken halo" when, due to a response category covering more than one line, multiple sets of halos are defined. Figure 2 displays examples of the control treatment (No halo) and two forms of the experimental treatment (Continuous halo and Broken halo).

Figure 2. Halo examples

KFP2   o aloN h

iCADE2 - Continuous halo

iCADE2 - Broken halo

Methodology

While the initial test provided a preferred experimental design to study these effects, the problems that were found in the grid were considerable and could have influenced respondent behavior completing the rest of the form. For this reason, all comparisons of check box responses involve the second redesigned iCADE questionnaire (iCADE2) and the 2006 KFP questionnaire (KFP2). We compared January through April 2007 mail returns that used the iCADE2 questionnaire with January through April 2006 mail returns that used the KFP2 questionnaire. As was true for the first experiment, both mailings followed identical schedules and strategies and all mail-returned

questionnaires were captured using the same data capture methods. The mail response rates for these two time periods, while significantly different, were nominally pretty close to one another at 57.7% (KFP2) and 56.4% (iCADE2).

Unedited data from mail returned questionnaires were used to produce item nonresponse rates. The item nonresponse rates for this analysis are defined as the ratio of the number of valid responses to the number of questions requiring a response. This means that unique skip patterns were taken into account for each question. For example, the fertility question is asked only of females between 15 and 50 years old, therefore the number of required responses would include only females with a reported age of 15 through 50. Because we chose to use unedited data for this analysis, we had to decide what to do if a questionnaire did not include the critical information needed to define a universe. Because our focus was on comparisons across treatments, we chose to include in these rates only the instances that we were certain required a response. As a consequence, this may depress the true missing data rate. All item nonresponse rates are weighted to reflect the ACS sample design. Statistical testing was conducted using a 90 percent confidence level.

Results

Tables 4 and 5 summarize the comparisons of item nonresponse rates for each of the check box "only" questions. The minimal design changes were not expected to have an effect on item nonresponse. While several statistically significant differences were found in the form of both increases and decreases in item nonresponse, most are quite small. No evidence was found of consistent changes in item nonresponse due to the addition of check box halos. This was true for questions with "continuous halos" and with "broken halos."

We are interested in determining if the "broken halo" format suggested to some respondents that they needed to provide more than one response – one for each group of response categories. Additional data are needed to assess if there is any evidence that the creation of these "broken halos" resulted in more multiple entries so it is outside the scope of this analysis.

One interesting finding is the higher nonresponse rates for the business and acre items in the iCADE2 version (Table 4). Both rates are 1 percentage point higher. The skip instruction located above the acres item may explain the difference. The position of the skip instruction and the bottom border are different between the questionnaires (See instruction A on the KFP2 and iCADE2 facsmiles in attachment 1). In the iCADE version the instruction is closer to the acres item, while it is further from the acres item in the KFP version. The bottom border is much lighter in the iCADE version than in the KFP version. For these reasons, the instruction is more connected to the questionnaire items in the iCADE version, which may lead to more respondents reading the instruction. The higher rates in the iCADE version suggest that while respondents may be reading the instruction, they are only focusing on the part, "*SKIP* to question 7." This is possible due to the larger and italicized font used for the word "skip". The agriculture sales item that is sandwiched in between the acres and business items does not possess this large difference in nonresponse rates, because the universe for this question is only those households who report owning more than one acre.

Table 4. Item Nonresponse Rates for Housing Questions Requiring Only a Check Box Response

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Type of Building	2.0	1.9	-0.1	Yes
Year built	6.1	6.0	-0.1	
Acres	4.3	5.3	1.0	Yes
Agricultural sales	2.8	2.7	-0.2	Yes
Business	4.0	5.0	1.0	Yes
Rooms	2.7	3.2	0.5	Yes
Bedrooms	1.4	1.4	0.0	
Plumbing	1.5	1.4	-0.1	Yes
Kitchen	1.5	1.4	-0.0	
Telephone	1.5	1.5	0.0	
Vehicles	1.6	1.6	-0.0	
Fuel	1.6	1.6	-0.0	
Tenure	4.2	4.3	0.1	Yes
Rent & meals	2.1	2.0	-0.2	Yes
Mortgage	4.8	4.7	-0.0	
Mortgage & taxes	1.8	2.1	0.3	Yes
Mortgage & insurance	2.0	2.0	0.0	
Second mortgage	3.9	4.1	0.1	Yes

*Statistical significance tested at the 90 percent confidence level

Table 5. Item Nonresponse Rates for Population Questions Requiring Only a Check Box Response

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Citizenship	4.0	4.2	0.2	Yes
School enrollment	4.4	4.3	-0.0	
Grade	1.6	1.7	0.2	Yes
Educational attainment	4.0	4.0	0.0	
Other language	3.3	3.5	0.1	Yes
English proficiency	4.4	5.0	0.6	Yes
Migration (city/town)	2.2	2.1	-0.1	
Disability (vision/hearing)	6.3	6.5	0.2	Yes
Disability (physical limitation)	7.5	7.5	0.1	
Disability (learning)	6.0	6.2	0.2	Yes
Disability (dressing/bathing)	6.6	6.7	0.1	Yes
Disability (going outside)	6.7	6.6	-0.1	Yes
Disability (working)	9.2	8.9	-0.3	Yes
Fertility	4.1	4.3	0.2	Yes
Grandparents as caregivers (living with)	6.0	6.2	0.2	Yes
Grandparents as caregivers (responsible for)	4.3	3.9	-0.4	Yes
Grandparents as caregivers (how long)	2.5	2.2	-0.3	
Military service (ever served)	6.0	6.0	0.0	
Military service (when)	1.5	1.4	-0.0	
Military service (years)	1.3	1.4	0.1	
Work last week	6.0	6.1	0.1	Yes
Place of work (city/town)	3.4	3.5	0.1	Yes
Journey to work	1.0	1.1	0.0	
Time left home (am/pm)	7.9	8.0	0.1	

Layoff	7.9	7.0	-0.8	Yes
Temporarily absent	8.4	8.4	0.0	
Recalled	8.8	8.7	-0.1	
Looking for work	2.7	2.6	-0.1	Yes
Availability to work	2.4	2.9	0.5	
Last worked	10.9	9.6	-1.3	Yes
Industry	9.7	10.1	0.4	Yes

*Statistical significance tested at the 90 percent confidence level

Test of Redesigned Write-in Boxes

The ACS relies on write-in responses to collect detailed information such as language spoken, monthly rent, place of birth, age, and total income. This section details the results of changes made to the ACS questions that required a write-in response or required either a write-in response or a check box response indicating that a write-in response wasn't appropriate. For the purpose of this analysis we organized these write-ins by type of write-in requested – alphabetic and alphanumeric write-ins such as ancestry and place of work (address); currency write-ins such as cost of water; time write-ins such as time left home for work; and numeric write-ins such as number of weeks worked.

Several types of changes were made to the different types of write-in boxes. As was done for the check box comparisons, all comparisons of write-in box responses involve the second redesigned iCADE questionnaire (iCADE2) and the 2006 KFP questionnaire (KFP2). The same definitions, methods, and comparisons that were used for the check box analyses were used for this analysis of write-in boxes.

Alphabetic and Alphanumeric Write-in Boxes

A total of 13 questions included an alphabetic or alphanumeric write-in box similar to the example shown in Figure 3. For all of these questions the write-in was the sole response option.

Design Changes

Minor changes were made to alphabetic and alphanumeric write-in boxes. These boxes are used to record names, race, ancestry, and Hispanic origin groups, state names, occupations, languages spoken, and more.   Figure 3 shows that black lines were added to the bottom and right sides of these boxes. The minor change that more clearly defined the corner of these boxes was not expected to influence respondent navigation or behavior.

Figure 3. Alphabetic (or character) write-in example

KFP2 - No black lines

iCADE2 - With black lines

13
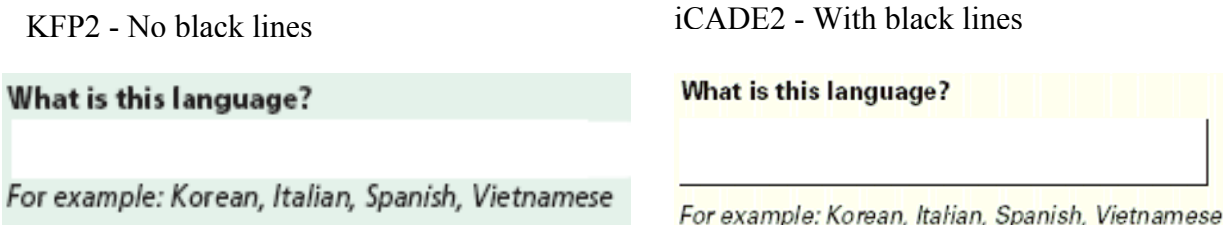
Results

Table 6 summarizes the item nonresponse rates for each of these questions for the KFP and iCADE treatments. While significant differences are observed for all questions, the direction of those differences is not consistent and many of the differences are very small. A percentage point or more reduction in item nonresponse was found for the name of the industry in the industry question and for the name of the county and the state in the migration question. It's possible that these differences are due more to the one-year time period than the design change.

Table 6. Item Nonresponse Rates for Questions Requiring Only an Alphabetic or an Alphanumeric Write-in

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Ancestry	12.5	12.3	-0.2	Yes
Language spoken	10.4	11.1	0.7	Yes
Migration (name of city)	2.6	2.8	0.2	Yes
Migration (name of county)	10.0	8.3	-1.7	Yes
Migration (name of state)	4.2	3.3	-1.0	Yes
Place of work (address)	6.8	7.4	0.6	Yes
Place of work (name of city)	3.4	3.7	0.3	Yes
Place of work (name of county)	8.1	8.7	0.6	Yes
Place of work (name of state)	5.0	5.2	0.3	Yes
Industry (name)	10.8	8.8	-2.0	Yes
Industry (kind of business)	7.6	6.7	-0.9	Yes
Occupation (kind of work)	6.3	5.9	-0.4	Yes
Occupation (activities)	9.7	9.1	-0.6	Yes

*Statistical significance tested at the 90 percent confidence level

Currency Write-in Boxes

The next 12 ACS questions involve responses in dollar amounts. For some questions the only response option was a write-in of an amount. For other questions the respondent had the option to check a box if no estimate was needed (for example, if the cost of electricity was included in the rent.) Item nonresponse rates for this last type of question indicate when neither a write-in entry nor a check box was marked.

Design Changes

The changes that were made to the currency write-in boxes for questions such as income, annual real estate taxes, and monthly rent are shown in Figure 4. Vertical lines and shading were added around the preprinted "$" and ".00". Borders were added around the entire currency box. Tick marks and commas were also added.

Figure 4. Currency write-in example

KFP2 - No tick marks, commas or borders

iCADE2 - With tick marks, commas, and borders

Results

As shown in Table 7, five questions were found to have statistically significant differences. However, the differences reflect both increases and decreases and are fairly modest. Only "Cost of oil" shows a change in nonresponse of more than 1 percentage point. It is possible that this observation is more a function of the comparison of 2006 with 2007 – respondents may have been acutely more aware of the cost of oil in 2007 due to rising fuel costs and therefore more able to provide an answer.

Table 7. Item Nonresponse Rates for Selected Questions Requiring a Currency Write-in

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Cost of electricity	4.1	4.1	0.1	
Cost of gas	10.0	10.1	0.1	
Cost of water	6.3	6.3	-0.0	
Cost of oil	15.0	13.8	-1.2	Yes
Condominium	5.1	4.6	-0.5	Yes
Rent	2.5	2.5	0.1	
Real estate taxes	9.5	9.4	-0.1	Yes
Insurance	12.7	12.8	0.1	
Mobile home tax	30.6	30.3	-0.3	
Mortgage	2.9	3.1	0.3	Yes
Second mortgage	3.7	3.7	0.0	
Total income	16.8	17.4	0.6	Yes

*Statistical significance tested at the 90 percent confidence level

Time Write-in Boxes

A single question on the ACS requests a response of a time of day entry. Both an hour and a minute response are requested as write-ins.

Design Changes

As shown in Figure 5, the write-in box that requests an entry of time replaced lines with tick marks and shaded in the area between the hours and minutes.

Figure 5. Time write-in example

KFP2 - No tick marks or shaded area

iCADE2 - With tick marks and shaded area

Results

Table 8 shows the item nonresponse rates associated with the two treatments for the write-in boxes. Item nonresponse rates were calculated three ways – by part (nonresponse to hours and nonresponse to minutes), overall (nonresponse to either hours or minutes), and at the item level (nonresponse to both hours and minutes). The results for the check box entries for a.m. and p.m.

are shown in Table 5. No meaningful differences were detected for the check boxes or the write-ins. While statistically significant, the differences reported below are quite small.

The Gestalt Law of Psychology suggests that respondents would see the two parts of the KFP2 version as one response (since they are grouped together) while they would see the iCADE2 version as two separate responses. One could argue that this would make it more likely that respondents using the KFP2 version either responded to both or to neither. There isn't much evidence of this.

Table 8. Item Nonresponse Rates for Questions Requiring a Time Write-in

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Time left home – either hours or minutes missing	9.0	8.8	-0.2	
Time left home – both hours and minutes missing	7.7	7.6	-0.1	
Time left home – hour	7.9	7.7	-0.2	Yes
Time left home- minute	8.9	8.7	-0.3	Yes

*Statistical significance tested at the 90 percent confidence level

Numeric Write-in Boxes

The ACS includes 10 questions with numeric write-in boxes for entries of ages, ZIP Codes, numbers of hours worked, and dates. The results for the age and date-of-birth questions were discussed earlier as part of the grid analysis.

Design Changes

Black borders were added and tick marks replaced vertical lines in the numeric write-in boxes for ACS questions that involved dates and ZIP Code. Figure 6a is one such example. Numeric write-ins requesting a number, such as the number of commuting minutes and the number of hours worked, were also changed to include black borders and tick marks. However, unlike the other numeric write-ins, the write-in boxes for these questions originally lacked vertical lines—they were empty boxes. Figure 6b shows an example.

Figure 6a. Numeric write-in example – with vertical lines

KFP2 - No tick marks or black border

iCADE2 - With tick marks and black border

f. ZIP Code

f. ZIP Code

16
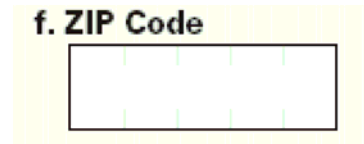
Figure 6b. Numeric write-in example – without vertical lines

KFP2 - Blank box, no tick marks or black border

iCADE2 - With tick marks and black border

During the PAST 12 MONTHS, how many WEEKS did this person work? *Count paid vacation, paid sick leave, and military service.*

Weeks

During the PAST 12 MONTHS, how many WEEKS did this person work? *Count paid vacation, paid sick leave, and military service.*

Weeks

Results

The item nonresponse rates are summarized in Table 9. Three questions had statistically significant differences of greater than 1 percentage point and all were reductions. Note that for the first four questions the KFP write-in box included vertical lines. The change to tick marks does not appear to have had a major effect, except for the migration zip code item where nonreponse improved by 2 percentage points (the migration items will be discussed later in the report). For the last four questions, the KFP write-in box lacked vertical lines. The change to tick marks was a more dramatic change. The results suggest that adding tick marks may have improved respondent completion of these items. It's possible that without the vertical lines or tick marks that respondents were less certain if a number was being requested.

Table 9. Item Nonresponse Rates for Questions Requiring a Numeric Write-in

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
KFP2 included vertical lines				
Date moved in	6.0	5.6	-0.4	Yes
Year of Entry	3.2	3.8	0.6	Yes
ZIP Code – Migration	11.2	9.2	-2.0	Yes
ZIP Code – Place of work	15.5	15.4	-0.0	
KFP2 did not include vertical lines				
Weeks worked	5.8	4.7	-1.6	Yes
Hours worked	5.1	3.6	-1.5	Yes
Journey to work – number of people	0.9	0.8	-0.1	Yes
Journey to work – minutes	6.8	6.8	-0.0	

*Statistical significance tested at the 90 percent confidence level

Test of Questions with Redesigned Check Boxes and Write-in Boxes

Several questions on the ACS include both check box and write-in responses. Depending on how the respondent answers the check box, they may also be asked to complete a write-in response. For example, if a respondent checks the box, "Yes, other Spanish/Hispanic/Latino," for the Hispanic origin question, they are asked to write-in the specific group. The ACS series of income questions ask about a specific source of income with yes/no check boxes. "Yes" responses are directed (by an arrow) to a write-in box to enter an amount. Nearly all of the questions in this section of the paper involved a currency write-in.

Design Changes

Many of the design changes to these write-in boxes were described earlier as the changes made for alphabetic and alphanumeric write-ins and currency write-ins. The check box changes involving halos also applied to these questions. See Figures 7a and 7b for examples.

Figure 7a. Checkbox and Alphabetic Write-in example

KFP2 - No halos or black border   iCADE2 - With halos and black border

Where was this person born?
☐ In the United States – *Print name of state.*

☐ Outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc.*

Where was this person born?
☐ In the United States – *Print name of state.*

☐ Outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc.*

Figure 7b. Checkbox and Currency Write-in example

KFP2 - No halos, tick marks, commas, or black borders

iCADE2 - With halos, tick marks, commas, and black borders

Wages, salary, commissions, bonuses, or tips from all jobs. *Report amount before deductions for taxes, bonds, dues, or other items.*

☐ Yes → $ .00
☐ No   TOTAL AMOUNT for past
              12 MONTHS

Wages, salary, commissions, bonuses, or tips from all jobs. *Report amount before deductions for taxes, bonds, dues, or other items.*

☐ Yes → $ .00
☐ No   TOTAL AMOUNT for past
              12 MONTHS

Methodology

For questions like this, there are two alternative ways to calculate item nonresponse. If you consider both the check box response and the write-in response as a combined item, you can calculate a single nonresponse rate for the entire question. This method does not take into account the navigational design of the question, so respondents who did not complete the check box portion of the questions, but supplied a write-in answer would be considered a response, and therefore would not be included in the nonresponse rate. This method is best for determining how nonresponse would affect the overall quality of the data.

Another way to calculate a nonresponse rate is to calculate separate rates for each part of the question. So, using this method a nonresponse rate is calculated for the check box question, with the universe being everyone asked the question. A second nonresponse rate is calculated for the write-in response, with the universe being only those who checked the box associated with the write-in. This method is better for observing how respondents complete the form, including how they navigate through the questions and skip patterns.

Results

The results using the first method are summarized in Table 10. The differences between the two treatments for all combined item nonresponse rates are very small, except for the rate for the place of birth item. The nonresponse rate for the place of birth item was 2.6 percentage points higher in the iCADE treatment. This suggests a decrease in the quality of data for that item when using the iCADE questionnaire.

Table 10. Item Nonresponse Rates for Questions Including a Check Box Response and a Write-in Response (Overall Item Nonresponse Rates)

Question	KFP2 (%)	iCADE2 (%)	Difference (iCADE2-KFP2) (%)	Statistical Significance*
Alphabetic write-ins				
Place of birth	10.9	13.5	2.6	Yes
Migration (country)	4.9	4.8	-0.1	Yes
Currency write-ins				
Food stamps	2.6	2.4	-0.3	Yes
Condominium	3.7	3.6	-0.2	Yes
Housing value	7.6	7.8	0.2	Yes
Wages	15.1	15.3	0.2	Yes
Self employment income	20.3	20.2	-0.1	
Interest income	20.2	20.5	0.3	Yes
Social Security	18.0	18.6	0.6	Yes
Supplemental Security income	19.8	20.0	0.3	Yes
Public assistance	19.0	19.2	0.3	Yes
Retirement	18.2	18.5	0.3	Yes
Other income	18.9	19.0	0.2	Yes

*Statistical significance tested at the 90 percent confidence level

Table 11 shows the nonresponse rates for the questions using the second method, including separate rates for the check box and write-in responses. The first three questions involved an alphabetic or character write-in. The remaining questions involved a currency write-in.

The results from the second method help explain the large difference for the "place of birth (state)" item. They also provide additional insight regarding the navigational pattern for some of the other items. For the "place of birth" item, the nonresponse rate for the check box portion of the question was 5.3 percentage points lower in the iCADE version compared to the KFP version. For this item it seems that the "halo" surrounding the check box may have helped the check box stand out more, as it appears more delimitated in the iCADE version. While the nonresponse rate was reduced for the check box portion, the rate for the first write-in portion was 2.5 percentage points higher. This indicates that of those who mark the check box, fewer follow the instruction and write-in their birth state in the iCADE version. A cross tabulation of the check box and write-in responses revealed that respondents completing the KFP version were more likely to skip over the check box and write-in the state where they were born, than respondents completing the iCADE version (13 percent compared to 8 percent).

This pattern, however, was not the same for those born outside the United States. These respondents seemed to complete the question correctly, checking the box and completing the write-in response. In the KFP version, the checkbox for the "In the United States" response is roughly a space closer to the write-in box and the font is slightly different. This smaller space tends to group everything closer together, while the halo surrounding the checkbox on the iCADE

version allows for more space between the response text and the write-in box. The extra space in the iCADE version helps differentiate the checkbox and the write-in.

The difference in the nonresponse rates for two other check box responses stand out in Table 11—the housing value check box and the wages check box. The direction of the change in the nonresponse rates for these two check box items is inconsistent. Both of these items, however, are slightly unique from each other, as well as, from the other check box items shown in the table. The "housing value" item consists of a long list of ranges – the list is the longest check box response list on the questionnaire. One may be able to argue that the long "continuous halo" makes the list stand out more and seem less intimidating to respondents. The "wages" item is unique in that it is the first in the series of income questions, and it is placed in a separate column from the rest in the series. More importantly, the spacing of this question is different between the KFP and iCADE forms. On the iCADE form, there is less space surrounding the question and it is more difficult to distinguish the question from the long list of instructions shown directly above it. A less crowded questionnaire with substantial white space looks easier and generally results in higher cooperation and fewer errors by respondents (Sudman and Bradbury, 1982).

Table 11. Item Nonresponse Rates for Questions Including a Check Box Response and a Write-in Response (Separate rates for the checkbox and write-in responses)

Question	Check Box Portion Only			Write-in Box (universe includes only those with a valid checkbox response)		
	KFP2 (%)	iCADE2 (%)	Difference (iCADE2 – KFP2) (%)	KFP2 (%)	iCADE2 (%)	Difference (iCADE2 – KFP2) (%)
Alphabetic write-ins						
Place of birth (state)	16.6	11.4	-5.3*	9.3	11.8	2.5*
Place of birth (country)	16.6	11.4	-5.3*	2.9	2.9	-0.0
Migration (country)	2.2	2.1	-0.1	54.2	53.1	-1.1
Currency write-ins						
Food stamps	2.8	2.5	-0.3*	8.7	7.9	-0.8*
Condominium	8.9	9.0	0.1	5.1	4.6	-0.5*
Housing values greater than $250,000	15.1	13.3	-1.8*	65.1	64.3	-0.8*
Wages	28.2	29.4	1.2*	1.8	1.9	0.1*
Self employment income	22.1	21.9	-0.2*	4.7	4.9	0.2
Interest income	24.3	24.5	0.2*	2.9	3.2	0.3*
Social security	22.0	22.3	0.3*	4.9	6.2	1.3*
Supplemental security income	21.2	21.3	0.2	7.9	9.6	1.7*
Public assistance	20.0	20.1	0.1	11.4	12.0	0.6
Retirement	21.2	21.5	0.2*	4.0	4.5	0.5*
Other income	20.3	20.3	-0.0	3.7	4.2	0.5*

*Statistically significant at the 90 percent confidence level

Table 11 also includes two questions with write-in boxes having item nonresponse rates that are higher in the iCADE version—the social security and supplemental security income items. For these items it is difficult to propose an explanation for these changes, because these questions are so similar to other questions in the series – questions with very small differences in the item nonresponse rates.

A final observation from Table 11 is the high rate of item nonresponse for two write-in boxes—housing value and migration (country). Both of these questions have item nonresponse rates for the write-in entries in excess of 50 percent. For the housing value question, the write-in is a request to provide a specific value if the value is greater than $250,000. If this detail is critical, adding additional check boxes may be important to consider. However, it is also important to note that the housing value question was changed for the 2008 ACS questionnaire. Results from the 2006 Content Test supported changing the layout of this question to a write-in format (Woodward, Wilson and Chesnut, 2007).

For the migration question, the high level of nonresponse could be a result of the skip instruction that appears before the write-in box. The instruction reads, "Print name of foreign country, or Puerto Rico, Guam, etc. below; then SKIP to F." It may be worth testing moving the skip instruction after the write-in box to see if this reduces item nonresponse. Another interesting finding is that all the migration items requiring a write-in response had lower nonresponse rates in the iCADE version. There are two differences that may help explain this finding. First, the size of the write-in boxes is much larger in the iCADE version. Since there are so many write-in responses required for this question, the larger boxes may have reduced the burden of respondents trying to squeeze in their written response. Also, the skip instruction in part a (directing respondents to instruction F) uses a much darker, and more visible, green circle in the KFP version. Respondents completing the KFP form may be more aware of this instruction and follow the skip regardless of how they respond to part a.

Acknowledgments

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Facsimile of 2005/2006 ACS Questionnaire – KFP1 and KFP2

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

THE **American Community Survey**

This booklet shows the content of the American Community Survey questionnaire.

People are our most important resource. This Census Bureau survey collects information about education, employment, income, and housing— information your community uses to plan and fund programs. Your response is important, and we keep your answers confidential.

If you need help or have questions about completing this form, please call 1-800-354-7271. The telephone call is free.

Telephone Device for the Deaf (TDD): Call 1-800-582-8330. The telephone call is free.

¿NECESITA AYUDA? Si usted habla español y necesita ayuda para completar su cuestionario, llame sin cargo alguno al 1-877-833-5625.

For more information about the American Community Survey, visit our web site at: http://www.census.gov/acs/www/

U S C E N S U S B U R E A U

Start Here

This form asks for three types of information:
- basic information about the people who are living or staying at the address on the mailing label above
- specific information about this house, apartment, or mobile home
- more detailed information about each person living or staying here

➜ **What is your name?** Please PRINT the name of the person who is filling out this form. Include the telephone number so we can contact you if there is a question, and today's date.

Last Name

First Name   MI

Area Code + Number

Date (Month/Day/Year)

➜ **How many people are living or staying at this address?**
Number of people

➜ Please turn to the next page to continue.

FORM ACS-1(INFO)(2005)
(5-20-2004)   OMB No. 0607-0810

ACS-1(INFO)(2005), Page 1, Base (Black)   ACS-1(INFO)(2005), Page 1, GREEN Pantone 354 (20% and 100%)

List of Residents

1 What is this person's sex?

2 What is this person's age and what is this person's date of birth? *Print numbers in boxes.*

3 How is this person related to Person 1?

READ THESE INSTRUCTIONS FIRST

Please fill out this form as soon as possible after receiving it in the mail.

- LIST everyone who is living or staying here for more than 2 months.
- LIST anyone else staying here who does not have another usual place to stay.
- DO NOT LIST anyone who is living somewhere else for more than 2 months, such as a college student living away.

If this place is a vacation home or a temporary residence where no one in this household stays for more than 2 months, do not list any names in the List of Residents. Complete only pages 4, 5, and 6 and return the form.

IF YOU ARE NOT SURE WHOM TO LIST, CALL 1-800-354-7271.

Person 1

Last Name (Please print)

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day   Year of birth

☒ Person 1

(Person 1 is the person living or staying here in whose name this house or apartment is owned, being bought, or rented. If there is no such person, start with the name of any adult living or staying here.)

Person 2

Last Name (Please print)

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day   Year of birth

Relationship of Person 2 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 3

Last Name (Please print)

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day   Year of birth

Relationship of Person 3 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 4

Last Name (Please print)

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day   Year of birth

Relationship of Person 4 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 5

Last Name (Please print)

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day   Year of birth

Relationship of Person 5 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

➡ If there are more than five people, list them here. *We may call you for more information about them.*

➡ After you've created the List of Residents, answer the questions across the top of the page for the first five people on the list.

Person 6

Last Name (Please print)

First Name   MI

Person 7

Last Name (Please print)

First Name   MI

Person 8

Last Name (Please print)

First Name   MI

2

4 What is this person's marital status?

NOTE: Please answer BOTH Questions 5 and 6.

5 Is this person Spanish/Hispanic/Latino?
Mark (X) the "No" box if not Spanish/Hispanic/Latino.

6 What is this person's race? *Mark (X) one or more races to indicate what this person considers himself/herself to be.*

☐ Now married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married

☐ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican Am., Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⤳

☐ White
☐ Black or African American
☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe.* ⤳

☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian – *Print race.* ⟶

☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander – *Print race below.* ⤳
☐ Some other race – *Print race below.* ⤳

☐ Now married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married

☐ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican Am., Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⤳

☐ White
☐ Black or African American
☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe.* ⤳

☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian – *Print race.* ⟶

☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander – *Print race below.* ⤳
☐ Some other race – *Print race below.* ⤳

☐ Now married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married

☐ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican Am., Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⤳

☐ White
☐ Black or African American
☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe.* ⤳

☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian – *Print race.* ⟶

☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander – *Print race below.* ⤳
☐ Some other race – *Print race below.* ⤳

☐ Now married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married

☐ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican Am., Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⤳

☐ White
☐ Black or African American
☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe.* ⤳

☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian – *Print race.* ⟶

☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander – *Print race below.* ⤳
☐ Some other race – *Print race below.* ⤳

☐ Now married
☐ Widowed
☐ Divorced
☐ Separated
☐ Never married

☐ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican Am., Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⤳

☐ White
☐ Black or African American
☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe.* ⤳

☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian – *Print race.* ⟶

☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander – *Print race below.* ⤳
☐ Some other race – *Print race below.* ⤳

Person 9	**Person 10**	**Person 11**	**Person 12**
Last Name *(Please print)*	Last Name *(Please print)*	Last Name *(Please print)*	Last Name *(Please print)*
First Name MI	First Name MI	First Name MI	First Name MI

➡ When you are finished, turn the page and continue with the Housing section.   **3**

Housing

Housing information helps your community plan for police and fire protection.

➡ Please answer the following questions about the house, apartment, or mobile home at the address on the mailing label.

1 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.

2 About when was this building first built?
- ☐ 2005 or later
- ☐ 2000 to 2004
- ☐ 1990 to 1999
- ☐ 1980 to 1989
- ☐ 1970 to 1979
- ☐ 1960 to 1969
- ☐ 1950 to 1959
- ☐ 1940 to 1949
- ☐ 1939 or earlier

3 When did PERSON 1 (listed in the List of Residents on page 2) move into this house, apartment, or mobile home?

Month   Year

A *Answer questions 4–6 ONLY if this is a one-family house or a mobile home; otherwise, SKIP to question 7.*

4 How many acres is this house or mobile home on?
- ☐ Less than 1 acre → SKIP to question 6
- ☐ 1 to 9.9 acres
- ☐ 10 or more acres

5 IN THE PAST 12 MONTHS, what were the actual sales of all agricultural products from this property?
- ☐ None
- ☐ $1 to $999
- ☐ $1,000 to $2,499
- ☐ $2,500 to $4,999
- ☐ $5,000 to $9,999
- ☐ $10,000 or more

6 Is there a business (such as a store or barber shop) or a medical office on this property?
- ☐ Yes
- ☐ No

7 How many rooms are 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

8 How many bedrooms are in this house, apartment, or mobile home; that is, how many bedrooms would you list if this house, apartment, or mobile home were on the market for sale or rent?
- ☐ No bedroom
- ☐ 1 bedroom
- ☐ 2 bedrooms
- ☐ 3 bedrooms
- ☐ 4 bedrooms
- ☐ 5 or more bedrooms

9 Does this house, apartment, or mobile home have COMPLETE plumbing facilities; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower?
- ☐ Yes, has all three facilities
- ☐ No

10 Does this house, apartment, or mobile home have COMPLETE kitchen facilities; that is, 1) a sink with piped water, 2) a stove or range, and 3) a refrigerator?
- ☐ Yes, has all three facilities
- ☐ No

11 Is there telephone service available in this house, apartment, or mobile home from which you can both make and receive calls?
- ☐ Yes
- ☐ No

12 How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?
- ☐ None
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6 or more

4

12 Which FUEL is used MOST for heating this house, apartment, or mobile home?

☐ 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

14 a. LAST MONTH, what was the cost of electricity for this house, apartment, or mobile home?

Last month's cost – Dollars

$ _____ .00

OR
☐ Included in rent or condominium fee
☐ No charge or electricity not used

b. LAST MONTH, what was the cost of gas for this house, apartment, or mobile home?

Last month's cost – Dollars

$ _____ .00

OR
☐ Included in rent or condominium fee
☐ Included in electricity payment entered above
☐ No charge or gas not used

c. IN THE PAST 12 MONTHS, what was the cost of water and sewer for this house, apartment, or mobile home? If you have lived here less than 12 months, estimate the cost.

Past 12 months' cost – Dollars

$ _____ .00

OR
☐ Included in rent or condominium fee
☐ No charge

d. IN THE PAST 12 MONTHS, what was the cost of oil, coal, kerosene, wood, etc., for this house, apartment, or mobile home? If you have lived here less than 12 months, estimate the cost.

Past 12 months' cost – Dollars

$ _____ .00

OR
☐ Included in rent or condominium fee
☐ No charge or these fuels not used

15 At any time DURING THE PAST 12 MONTHS, did anyone in this household receive Food Stamps?

☐ Yes → What was the value of the Food Stamps received during the past 12 months?
Past 12 months' value – Dollars

$ _____ .00

☐ No

16 Is this house, apartment, or mobile home part of a condominium?

☐ Yes → What is the monthly condominium fee? For renters, answer only if you pay the condominium fee in addition to your rent; otherwise, mark the "None" box.

Monthly amount – Dollars

$ _____ .00

OR
☐ None

☐ No

17 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? → SKIP to ⒸC

B *Answer questions 18a and b ONLY IF you PAY RENT for this house, apartment, or mobile home. Otherwise, SKIP to question 19.*

18 a. What is the monthly rent for this house, apartment, or mobile home?

Monthly amount – Dollars

$ _____ .00

b. Does the monthly rent include any meals?
☐ Yes
☐ No

C *Answer questions 19-23 ONLY IF you or someone else in this household OWNS or IS BUYING this house, apartment, or mobile home. Otherwise, SKIP to ⒺE on the next page.*

19 What is the value of this property; that is, how much do you think this house and lot, apartment, or mobile home and lot, would sell for if it were for sale?

☐ Less than $10,000
☐ $10,000 to $14,999
☐ $15,000 to $19,999
☐ $20,000 to $24,999
☐ $25,000 to $29,999
☐ $30,000 to $34,999
☐ $35,000 to $39,999
☐ $40,000 to $49,999
☐ $50,000 to $59,999
☐ $60,000 to $69,999
☐ $70,000 to $79,999
☐ $80,000 to $89,999
☐ $90,000 to $99,999
☐ $100,000 to $124,999
☐ $125,000 to $149,999
☐ $150,000 to $174,999
☐ $175,000 to $199,999
☐ $200,000 to $249,999
☐ $250,000 or more – Specify ⌐

$ _____ .00

5

27

20 What are the annual real estate taxes on THIS property?

Annual amount – *Dollars*

$ _____ .00

OR

☐ None

21 What is the annual payment for fire, hazard, and flood insurance on THIS property?

Annual amount – *Dollars*

$ _____ .00

OR

☐ None

22 a. Do you or any member of this household have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?

☐ Yes, mortgage, deed of trust, or similar debt
☐ Yes, contract to purchase
☐ No → *SKIP to question 23a*

b. How much is the regular monthly mortgage payment on THIS property? *Include payment only on FIRST mortgage or contract to purchase.*

Monthly amount – *Dollars*

$ _____ .00

OR

☐ No regular payment required → *SKIP to question 23a*

c. Does the regular monthly mortgage payment include payments for real estate taxes on THIS property?

☐ Yes, taxes included in mortgage payment
☐ No, taxes paid separately or taxes not required

d. Does the regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?

☐ Yes, insurance included in mortgage payment
☐ No, insurance paid separately or no insurance

23 a. Do you or any member of this household have a second mortgage or a home equity loan on THIS property?

☐ Yes, home equity loan
☐ Yes, second mortgage
☐ Yes, second mortgage and home equity loan
☐ No → *SKIP to* **D**

b. How much is the regular monthly payment on all second or junior mortgages and all home equity loans on THIS property?

Monthly amount – *Dollars*

$ _____ .00

OR

☐ No regular payment required

D *Answer question 24 ONLY IF this is a MOBILE HOME. Otherwise, SKIP to* **E**.

24 What are the total annual costs for personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site? *Exclude real estate taxes.*

Annual costs – *Dollars*

$ _____ .00

E *Answer questions 25a–c ONLY IF you listed at least one person on page 2. Otherwise, SKIP to page 24 for the mailing instructions.*

25 a. Do you or any member of this household live or stay at this address year round?

☐ Yes → *SKIP to the questions for Person 1 on the next page*
☐ No

b. How many months a year do members of this household stay at this address?

_____ Months

c. What is the main reason members of this household are staying at this address?

☐ This is their permanent address
☐ This is their seasonal or vacation address
☐ To be close to work
☐ To attend school or college
☐ Looking for permanent housing
☐ Other reason(s)– *Specify* ⬎

➔ **Continue with the questions about PERSON 1 on the next page.**

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Person 1

Your answers are important! Every person in the American Community Survey counts.

→ Please copy the name of Person 1 from the List of Residents on page 2, then continue answering questions below.

Last Name

First Name   MI

7 Where was this person born?
- ☐ In the United States – *Print name of state.*

- ☐ Outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc.*

8 Is this person a CITIZEN of the United States?
- ☐ Yes, born in the United States → *Skip to 10a*
- ☐ Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
- ☐ Yes, born abroad of American parent or parents
- ☐ Yes, U.S. citizen by naturalization
- ☐ No, not a citizen of the United States

9 When did this person come to live in the United States? *Print numbers in boxes.*
Year ☐☐☐☐

10 a. At any time IN THE LAST 3 MONTHS, has this person attended regular school or college? *Include only nursery or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.*
- ☐ No, has not attended in the last 3 months → *SKIP to question 11*
- ☐ Yes, public school, public college
- ☐ Yes, private school, private college

b. What grade or level was this person attending? *Mark DO ONE box.*
- ☐ Nursery school, preschool
- ☐ Kindergarten
- ☐ Grade 1 to grade 4
- ☐ Grade 5 to grade 8
- ☐ Grade 9 to grade 12
- ☐ College undergraduate years (freshman to senior)
- ☐ Graduate or professional school (for example: medical, dental, or law school)

11 What is the highest degree or level of school this person has COMPLETED? *Mark DO ONE box. If currently enrolled, mark the previous grade or highest degree received.*
- ☐ No schooling completed
- ☐ Nursery school to 4th grade
- ☐ 5th grade or 6th grade
- ☐ 7th grade or 8th grade
- ☐ 9th grade
- ☐ 10th grade
- ☐ 11th grade
- ☐ 12th grade – NO DIPLOMA
- ☐ HIGH SCHOOL GRADUATE – high school DIPLOMA or the equivalent (for example: GED)
- ☐ Some college credit, but less than 1 year
- ☐ 1 or more years of college, no degree
- ☐ Associate degree (for example: AA, AS)
- ☐ Bachelor's degree (for example: BA, AB, BS)
- ☐ Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- ☐ Professional degree (for example: MD, DDS, DVM, LLB, JD)
- ☐ Doctorate degree (for example: PhD, EdD)

12 What is this person's ancestry or ethnic origin?

(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

13 a. Does this person speak a language other than English at home?
- ☐ Yes
- ☐ No → *SKIP to question 14*

b. What is this language?

For example: Korean, Italian, Spanish, Vietnamese

c. How well does this person speak English?
- ☐ Very well
- ☐ Well
- ☐ Not well
- ☐ Not at all

14 a. Did this person live in this house or apartment 1 year ago?
- ☐ Person is under 1 year old → *SKIP to the questions for Person 2 on page 10.*
- ☐ Yes, this house → *SKIP to F*
- ☐ No, outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc., below; then SKIP to F*

- ☐ No, different house in the United States

b. Where did this person live 1 year ago?
Name of city, town, or post office

c. Did this person live inside the limits of the city or town?
- ☐ Yes
- ☐ No, outside the city/town limits

Name of county

Name of state   ZIP Code
☐☐☐☐☐

F *Answer questions 15 and 16 ONLY IF this person is 5 years old or over. Otherwise, SKIP to the questions for PERSON 2 on page 10.*

15 Does this person have any of the following long-lasting conditions:

	Yes	No
a. Blindness, deafness, or a severe vision or hearing impairment?	☐	☐
b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?	☐	☐

16 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

	Yes	No
a. Learning, remembering, or concentrating?	☐	☐
b. Dressing, bathing, or getting around inside the home?	☐	☐

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G *Answer question 17 ONLY IF this person is 15 years old or over. Otherwise, SKIP to the questions for PERSON 2 on page 10.*

17 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

	Yes	No
a. Going outside the home alone to shop or visit a doctor's office?	☐	☐
b. Working at a job or business?	☐	☐

H *Answer question 18 ONLY IF this person is female and 15–50 years old. Otherwise, SKIP to question 19a.*

18 Has this person given birth to any children in the past 12 months?
☐ Yes
☐ No

19 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?
☐ Yes
☐ No → *SKIP to question 20*

b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?
☐ Yes
☐ No → *SKIP to question 20*

c. How long has this grandparent been responsible for the(se) grandchild(ren)? *If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.*
☐ Less than 6 months
☐ 6 to 11 months
☐ 1 or 2 years
☐ 3 or 4 years
☐ 5 or more years

20 Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? *Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.*
☐ Yes, now on active duty
☐ Yes, on active duty during the last 12 months, but not now
☐ Yes, on active duty in the past, but not during the last 12 months
☐ No, training for Reserves or National Guard only → *SKIP to question 23*
☐ No, never served in the military → *SKIP to question 23*

21 When did this person serve on active duty in the U.S. Armed Forces? *Mark (X) a box for EACH period in which this person served, even if just for part of the period.*
☐ September 2001 or later
☐ August 1990 to August 2001 (including Persian Gulf War)
☐ September 1980 to July 1990
☐ May 1975 to August 1980
☐ Vietnam era (August 1964 to April 1975)
☐ March 1961 to July 1964
☐ February 1955 to February 1961
☐ Korean War (July 1950 to January 1955)
☐ January 1947 to June 1950
☐ World War II (December 1941 to December 1946)
☐ November 1941 or earlier

22 In total, how many years of active-duty military service has this person had?
☐ Less than 2 years
☐ 2 years or more

23 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 question 29*

24 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
☐ ☐ ☐ ☐ ☐

25 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 question 33*
☐ Other method

I *Answer question 26 ONLY IF you marked "Car, truck, or van" in question 25. Otherwise, SKIP to question 27.*

26 How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?

_____ Person(s)

27 What time did this person usually leave home to go to work LAST WEEK?

Hour   Minute
__ : __   ☐ a.m.
         ☐ p.m.

28 How many minutes did it usually take this person to get from home to work LAST WEEK?

_____ Minutes

J *Answer questions 29–32 ONLY IF this person did NOT work last week. Otherwise, SKIP to question 33.*

29 a. LAST WEEK, was this person on layoff from a job?
☐ Yes → *SKIP to question 29c*
☐ No

b. LAST WEEK, was this person TEMPORARILY absent from a job or business?
☐ Yes, on vacation, temporary illness, labor dispute, etc. → *SKIP to question 32*
☐ No → *SKIP to question 30*

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 question 31*
☐ No

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30 Has this person been looking for work during the last 4 weeks?
- ☐ Yes
- ☐ No → SKIP to question 32

31 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.)

32 When did this person last work, even for a few days?
- ☐ Within the past 12 months
- ☐ 1 to 5 years ago → SKIP to question 35
- ☐ Over 5 years ago or never worked → SKIP to question 41

33 During the PAST 12 MONTHS, how many WEEKS did this person work? Count paid vacation, paid sick leave, and military service.

Weeks

34 During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK?

Usual hours worked each WEEK

K Answer questions 35–40 ONLY IF this person worked in the past 5 years. Otherwise, SKIP to question 41.

35–40 CURRENT OR MOST RECENT JOB ACTIVITY. 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 information for his/her last job or business.

35 Was this person –
Mark ☒ ONE box
- ☐ an employee of a PRIVATE FOR PROFIT company or business, or of an individual, for wages, salary, or commissions?
- ☐ an employee of a PRIVATE NOT FOR PROFIT, tax-exempt, or charitable organization?
- ☐ a local GOVERNMENT employee (city, county, etc.)?
- ☐ a state GOVERNMENT employee?
- ☐ a 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?

36 For whom did this person work?
If now on active duty in the Armed Forces, mark ☒ this box → ☐ and print the branch of the Armed Forces.

Name of company, business, or other employer

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

38 Is this mainly – Mark ☒ one box.
- ☐ manufacturing?
- ☐ wholesale trade?
- ☐ retail trade?
- ☐ other (agriculture, construction, service, government, etc.)?

39 What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)

40 What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)

41 INCOME IN THE PAST 12 MONTHS.

Mark ☒ the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)

Mark ☒ the "No" box to show types of income NOT received.

If net income was a loss, mark the "Loss" box to the right of the dollar amount.

For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person.

a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items.
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. Report NET income after business expenses.
- ☐ Yes → $ _____ .00   ☐ Loss
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account.
- ☐ Yes → $ _____ .00   ☐ Loss
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

d. Social Security or Railroad Retirement.
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

e. Supplemental Security Income (SSI).
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

f. Any public assistance or welfare payments from the state or local welfare office.
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

g. Retirement, survivor, or disability pensions. Do NOT include Social Security.
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

h. 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 the sale of a home.
- ☐ Yes → $ _____ .00
- ☐ No   TOTAL AMOUNT for past 12 MONTHS

42 What was this person's total income during the PAST 12 MONTHS? Add entries in questions 41a to 41h; subtract any losses. If net income was a loss, enter the amount and mark ☒ the "Loss" box next to the dollar amount.
- ☐ None OR $ _____ .00   ☐ Loss
        TOTAL AMOUNT for past 12 MONTHS

➡ Continue with the questions for Person 2 on the next page. If only 1 person is listed in the List of Residents, SKIP to page 24 for mailing instructions.

9

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U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

THE **American Community Survey**

People are our most important resource.
This Census Bureau survey collects
information about education,
employment, income, and housing—
information your community uses to
plan and fund programs. Your response
is important, and we keep your
answers confidential.

If you need help or have questions
about completing this form, please call
1-800-354-7271. The telephone call is free.

Telephone Device for the Deaf (TDD):
Call 1-800-582-8330. The telephone call is free.

¿NECESITA AYUDA? Si usted habla español
y necesita ayuda para completar su cuestionario,
llame sin cargo alguno al **1-877-833-5625**.

For more information about the American
Community Survey, visit our web site at:
http://www.census.gov/acs/www/

U S C E N S U S B U R E A U

Start Here

This form asks for three types of information:
• basic information about the people who are living or staying at
the address on the mailing label above
• specific information about this house, apartment, or mobile
home
• more detailed information about each person living or staying
here

→ **What is your name?** Please PRINT the name of the person who
is filling out this form. Include the telephone number so we can
contact you if there is a question, and today's date.

Last Name

First Name   MI

Area Code + Number

Date (Month/Day/Year)

→ **How many people are living or staying at this address?**
Number of people

→ **Please turn to the next page to continue.**

FORM **ACS-1(2005)KFI**
(07-21-2005)   OMB No. 0607-0810

ACS-1(2005)KFI, Page 1, Base (Black)   ACS-1(2005)KFI, Page 1, GREEN Pantone 354 (20%, 40%, and 50%)

List of Residents

	① What is this person's sex?	**② What is this person's age and what is this person's date of birth?** *Print numbers in boxes.*	**③ How is this person related to Person 1?**

Person 1

Last Name (Please print)

First Name — MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

☒ Person 1

(Person 1 is the person living or staying here in whose name this house or apartment is owned, being bought, or rented. If there is no such person, start with the name of any adult living or staying here.)

Person 2

Last Name (Please print)

First Name — MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 2 to Person 1.

☐ Husband or wife ☐ Roomer, boarder
☐ Son or daughter ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother ☐ Unmarried partner
☐ Grandchild ☐ Foster child
☐ In-law ☐ Other nonrelative
☐ Other relative

Person 3

Last Name (Please print)

First Name — MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 3 to Person 1.

☐ Husband or wife ☐ Roomer, boarder
☐ Son or daughter ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother ☐ Unmarried partner
☐ Grandchild ☐ Foster child
☐ In-law ☐ Other nonrelative
☐ Other relative

Person 4

Last Name (Please print)

First Name — MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 4 to Person 1.

☐ Husband or wife ☐ Roomer, boarder
☐ Son or daughter ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother ☐ Unmarried partner
☐ Grandchild ☐ Foster child
☐ In-law ☐ Other nonrelative
☐ Other relative

Person 5

Last Name (Please print)

First Name — MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 5 to Person 1.

☐ Husband or wife ☐ Roomer, boarder
☐ Son or daughter ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother ☐ Unmarried partner
☐ Grandchild ☐ Foster child
☐ In-law ☐ Other nonrelative
☐ Other relative

Person 6	**Person 7**	**Person 8**
Last Name (Please print)	Last Name (Please print)	Last Name (Please print)
First Name — MI	First Name — MI	First Name — MI

2

NOTE: Please answer BOTH Questions 5 and 6.

4 What is this person's marital status?	**5 Is this person Spanish/Hispanic/Latino?** Mark (X) the "No" box if not Spanish/Hispanic/Latino.	**6 What is this person's race?** Mark (X) one or more races to indicate what this person considers himself/herself to be.		
☐ Now married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐ No, not Spanish/Hispanic/Latino ☐ Yes, Mexican, Mexican Am., Chicano ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latino — Print group. ⟶	☐ White ☐ Black or African American ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe. ⟶	☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — Print race. ⟶	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — Print race below. ⟶ ☐ Some other race — Print race below. ⟶
☐ Now married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐ No, not Spanish/Hispanic/Latino ☐ Yes, Mexican, Mexican Am., Chicano ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latino — Print group. ⟶	☐ White ☐ Black or African American ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe. ⟶	☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — Print race. ⟶	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — Print race below. ⟶ ☐ Some other race — Print race below. ⟶
☐ Now married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐ No, not Spanish/Hispanic/Latino ☐ Yes, Mexican, Mexican Am., Chicano ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latino — Print group. ⟶	☐ White ☐ Black or African American ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe. ⟶	☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — Print race. ⟶	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — Print race below. ⟶ ☐ Some other race — Print race below. ⟶
☐ Now married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐ No, not Spanish/Hispanic/Latino ☐ Yes, Mexican, Mexican Am., Chicano ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latino — Print group. ⟶	☐ White ☐ Black or African American ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe. ⟶	☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — Print race. ⟶	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — Print race below. ⟶ ☐ Some other race — Print race below. ⟶
☐ Now married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never married	☐ No, not Spanish/Hispanic/Latino ☐ Yes, Mexican, Mexican Am., Chicano ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latino — Print group. ⟶	☐ White ☐ Black or African American ☐ American Indian or Alaska Native — Print name of enrolled or principal tribe. ⟶	☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — Print race. ⟶	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — Print race below. ⟶ ☐ Some other race — Print race below. ⟶

Person 9
Last Name (Please print)

First Name   MI

Person 10
Last Name (Please print)

First Name   MI

Person 11
Last Name (Please print)

First Name   MI

Person 12
Last Name (Please print)

First Name   MI

➡ When you are finished, turn the page and continue with the Housing section.

3

Housing

Housing information helps your community plan for police and fire protection.

➡ Please answer the following questions about the house, apartment, or mobile home at the address on the mailing label.

1 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.

2 About when was this building first built?

- ☐ 2005 or later
- ☐ 2000 to 2004
- ☐ 1990 to 1999
- ☐ 1980 to 1989
- ☐ 1970 to 1979
- ☐ 1960 to 1969
- ☐ 1950 to 1959
- ☐ 1940 to 1949
- ☐ 1939 or earlier

3 When did PERSON 1 (listed in the List of Residents on page 2) move into this house, apartment, or mobile home?

Month Year

☐☐ ☐☐☐☐

A *Answer questions 4–6 ONLY if this is a one-family house or a mobile home; otherwise, SKIP to question 7.*

4 How many acres is this house or mobile home on?

- ☐ Less than 1 acre → *SKIP to question 6*
- ☐ 1 to 9.9 acres
- ☐ 10 or more acres

5 IN THE PAST 12 MONTHS, what were the actual sales of all agricultural products from this property?

- ☐ None
- ☐ $1 to $999
- ☐ $1,000 to $2,499
- ☐ $2,500 to $4,999
- ☐ $5,000 to $9,999
- ☐ $10,000 or more

6 Is there a business (such as a store or barber shop) or a medical office on this property?

- ☐ Yes
- ☐ No

7 How many rooms are 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

8 How many bedrooms are in this house, apartment, or mobile home; that is, how many bedrooms would you list if this house, apartment, or mobile home were on the market for sale or rent?

- ☐ No bedroom
- ☐ 1 bedroom
- ☐ 2 bedrooms
- ☐ 3 bedrooms
- ☐ 4 bedrooms
- ☐ 5 or more bedrooms

9 Does this house, apartment, or mobile home have COMPLETE plumbing facilities; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower?

- ☐ Yes, has all three facilities
- ☐ No

10 Does this house, apartment, or mobile home have COMPLETE kitchen facilities; that is, 1) a sink with piped water, 2) a stove or range, and 3) a refrigerator?

- ☐ Yes, has all three facilities
- ☐ No

11 Is there telephone service available in this house, apartment, or mobile home from which you can both make and receive calls?

- ☐ Yes
- ☐ No

12 How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?

- ☐ None
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6 or more

4

Housing (continued)

13 Which FUEL is used MOST for heating this house, apartment, or mobile home?

- [ ] 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

14 a. LAST MONTH, what was the cost of electricity for this house, apartment, or mobile home?

Last month's cost – *Dollars*

$ [   ] .00

OR

- [ ] Included in rent or condominium fee
- [ ] No charge or electricity not used

b. LAST MONTH, what was the cost of gas for this house, apartment, or mobile home?

Last month's cost – *Dollars*

$ [   ] .00

OR

- [ ] Included in rent or condominium fee
- [ ] Included in electricity payment entered above
- [ ] No charge or gas not used

c. IN THE PAST 12 MONTHS, what was the cost of water and sewer for this house, apartment, or mobile home? *If you have lived here less than 12 months, estimate the cost.*

Past 12 months' cost – *Dollars*

$ [   ] .00

OR

- [ ] Included in rent or condominium fee
- [ ] No charge

d. IN THE PAST 12 MONTHS, what was the cost of oil, coal, kerosene, wood, etc., for this house, apartment, or mobile home? *If you have lived here less than 12 months, estimate the cost.*

Past 12 months' cost – *Dollars*

$ [   ] .00

OR

- [ ] Included in rent or condominium fee
- [ ] No charge or these fuels not used

15 At any time DURING THE PAST 12 MONTHS, did anyone in this household receive Food Stamps?

- [ ] Yes → What was the value of the Food Stamps received during the past 12 months?

  Past 12 months' value – *Dollars*

  $ [   ] .00

- [ ] No

16 Is this house, apartment, or mobile home part of a condominium?

- [ ] Yes → What is the monthly condominium fee? *For renters, answer only if you pay the condominium fee in addition to your rent; otherwise, mark the "None" box.*

  Monthly amount – *Dollars*

  $ [   ] .00

  OR

  - [ ] None

- [ ] No

17 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? → *SKIP to* **C**

B *Answer questions 18a and b ONLY IF you PAY RENT for this house, apartment, or mobile home. Otherwise, SKIP to question 19.*

18 a. What is the monthly rent for this house, apartment, or mobile home?

Monthly amount – *Dollars*

$ [   ] .00

b. Does the monthly rent include any meals?

- [ ] Yes
- [ ] No

C *Answer questions 19–23 ONLY IF you or someone else in this household OWNS or IS BUYING this house, apartment, or mobile home. Otherwise, SKIP to* **E** *on the next page.*

19 What is the value of this property; that is, how much do you think this house and lot, apartment, or mobile home and lot, would sell for if it were for sale?

- [ ] Less than $10,000
- [ ] $10,000 to $14,999
- [ ] $15,000 to $19,999
- [ ] $20,000 to $24,999
- [ ] $25,000 to $29,999
- [ ] $30,000 to $34,999
- [ ] $35,000 to $39,999
- [ ] $40,000 to $49,999
- [ ] $50,000 to $59,999
- [ ] $60,000 to $69,999
- [ ] $70,000 to $79,999
- [ ] $80,000 to $89,999
- [ ] $90,000 to $99,999
- [ ] $100,000 to $124,999
- [ ] $125,000 to $149,999
- [ ] $150,000 to $174,999
- [ ] $175,000 to $199,999
- [ ] $200,000 to $249,999
- [ ] $250,000 or more – *Specify*

$ [   ] .00

5

Housing (continued)

20 What are the annual real estate taxes on THIS property?

Annual amount – Dollars

$ |_____|.00

OR

☐ None

21 What is the annual payment for fire, hazard, and flood insurance on THIS property?

Annual amount – Dollars

$ |_____|.00

OR

☐ None

22 a. Do you or any member of this household have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?

☐ Yes, mortgage, deed of trust, or similar debt

☐ Yes, contract to purchase

☐ No → SKIP to question 23a

b. How much is the regular monthly mortgage payment on THIS property? *Include payment only on FIRST mortgage or contract to purchase.*

Monthly amount – Dollars

$ |_____|.00

OR

☐ No regular payment required → SKIP to question 23a

c. Does the regular monthly mortgage payment include payments for real estate taxes on THIS property?

☐ Yes, taxes included in mortgage payment

☐ No, taxes paid separately or taxes not required

d. Does the regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?

☐ Yes, insurance included in mortgage payment

☐ No, insurance paid separately or no insurance

23 a. Do you or any member of this household have a second mortgage or a home equity loan on THIS property?

☐ Yes, home equity loan
☐ Yes, second mortgage
☐ Yes, second mortgage and home equity loan

☐ No → SKIP to **D**

b. How much is the regular monthly payment on all second or junior mortgages and all home equity loans on THIS property?

Monthly amount – Dollars

$ |_____|.00

OR

☐ No regular payment required

D *Answer question 24 ONLY IF this is a MOBILE HOME. Otherwise, SKIP to* **E** *.*

24 What are the total annual costs for personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site? *Exclude real estate taxes.*

Annual costs – Dollars

$ |_____|.00

E *Answer questions 25a– c ONLY IF you listed at least one person on page 2. Otherwise, SKIP to page 24 for the mailing instructions.*

25 a. Do you or any member of this household live or stay at this address year round?

☐ Yes → *SKIP to the questions for Person 1 on the next page*

☐ No

b. How many months a year do members of this household stay at this address?

Months

|____|

c. What is the main reason members of this household are staying at this address?

☐ This is their permanent address
☐ This is their seasonal or vacation address
☐ To be close to work
☐ To attend school or college
☐ Looking for permanent housing
☐ Other reason(s) — *Specify* ⬈

|_____|

➡ **Continue with the questions about PERSON 1 on the next page.**

6

37

Person 1

Your answers are important! Every person in the American Community Survey counts.

➡ Please copy the name of Person 1 from the List of Residents on page 2, then continue answering questions below.

Last Name

First Name — **MI**

7 Where was this person born?
☐ In the United States – *Print name of state.*

☐ Outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc.*

8 Is this person a CITIZEN of the United States?
☐ Yes, born in the United States → *SKIP to 10a*
☐ Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
☐ Yes, born abroad of American parent or parents
☐ Yes, U.S. citizen by naturalization
☐ No, not a citizen of the United States

9 When did this person come to live in the United States? *Print numbers in boxes.*
Year

10 a. At any time IN THE LAST 3 MONTHS, has this person attended regular school or college? *Include only nursery or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.*

☐ No, has not attended in the last 3 months → *SKIP to question 11*
☐ Yes, public school, public college
☐ Yes, private school, private college

b. What grade or level was this person attending? *Mark (X) ONE box.*

☐ Nursery school, preschool
☐ Kindergarten
☐ Grade 1 to grade 4
☐ Grade 5 to grade 8
☐ Grade 9 to grade 12
☐ College undergraduate years (freshman to senior)
☐ Graduate or professional school *(for example: medical, dental, or law school)*

11 What is the highest degree or level of school this person has COMPLETED? *Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received.*

☐ No schooling completed
☐ Nursery school to 4th grade
☐ 5th grade or 6th grade
☐ 7th grade or 8th grade
☐ 9th grade
☐ 10th grade
☐ 11th grade
☐ 12th grade – NO DIPLOMA
☐ HIGH SCHOOL GRADUATE – high school DIPLOMA or the equivalent *(for example: GED)*
☐ Some college credit, but less than 1 year
☐ 1 or more years of college, no degree
☐ Associate degree *(for example: AA, AS)*
☐ Bachelor's degree *(for example: BA, AB, BS)*
☐ Master's degree *(for example: MA, MS, MEng, MEd, MSW, MBA)*
☐ Professional degree *(for example: MD, DDS, DVM, LLB, JD)*
☐ Doctorate degree *(for example: PhD, EdD)*

12 What is this person's ancestry or ethnic origin?

(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

13 a. Does this person speak a language other than English at home?

☐ Yes
☐ No → *SKIP to question 14*

b. What is this language?

For example: Korean, Italian, Spanish, Vietnamese

c. How well does this person speak English?

☐ Very well
☐ Well
☐ Not well
☐ Not at all

14 a. Did this person live in this house or apartment 1 year ago?

☐ Person is under 1 year old → *SKIP to the questions for Person 2 on page 10.*
☐ Yes, this house → *SKIP to* **F**
☐ No, outside the United States – *Print name of foreign country, or Puerto Rico, Guam, etc., below; then SKIP to* **F**

☐ No, different house in the United States

b. Where did this person live 1 year ago?
Name of city, town, or post office

c. Did this person live inside the limits of the city or town?

☐ Yes
☐ No, outside the city/town limits

Name of county

Name of state — ZIP Code

F Answer questions 15 and 16 ONLY IF this person is 5 years old or over. Otherwise, SKIP to the questions for PERSON 2 on page 10.

15 Does this person have any of the following long-lasting conditions:

	Yes	No
a. Blindness, deafness, or a severe vision or hearing impairment?	☐	☐
b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?	☐	☐

16 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

	Yes	No
a. Learning, remembering, or concentrating?	☐	☐
b. Dressing, bathing, or getting around inside the home?	☐	☐

7

Person 1 (continued)

G *Answer question 17 ONLY IF this person is 15 years old or over. Otherwise, SKIP to the questions for PERSON 2 on page 10.*

17 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

	Yes	No
a. Going outside the home alone to shop or visit a doctor's office?	☐	☐
b. Working at a job or business?	☐	☐

H *Answer question 18 ONLY IF this person is female and 15–50 years old. Otherwise, SKIP to question 19a.*

18 Has this person given birth to any children in the past 12 months?

☐ Yes
☐ No

19 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?

☐ Yes
☐ No → *SKIP to question 20*

b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

☐ Yes
☐ No → *SKIP to question 20*

c. How long has this grandparent been responsible for the(se) grandchild(ren)? *If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.*

☐ Less than 6 months
☐ 6 to 11 months
☐ 1 or 2 years
☐ 3 or 4 years
☐ 5 or more years

20 Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? *Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.*

☐ Yes, now on active duty
☐ Yes, on active duty during the last 12 months, but not now
☐ Yes, on active duty in the past, but not during the last 12 months
☐ No, training for Reserves or National Guard only → *SKIP to question 23*
☐ No, never served in the military → *SKIP to question 23*

21 When did this person serve on active duty in the U.S. Armed Forces? *Mark (X) a box for EACH period in which this person served, even if just for part of the period.*

☐ September 2001 or later
☐ August 1990 to August 2001 (including Persian Gulf War)
☐ September 1980 to July 1990
☐ May 1975 to August 1980
☐ Vietnam era (August 1964 to April 1975)
☐ March 1961 to July 1964
☐ February 1955 to February 1961
☐ Korean War (July 1950 to January 1955)
☐ January 1947 to June 1950
☐ World War II (December 1941 to December 1946)
☐ November 1941 or earlier

22 In total, how many years of active-duty military service has this person had?

☐ Less than 2 years
☐ 2 years or more

23 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 question 29*

24 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

[   ]

25 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   ☐ Motorcycle
☐ Bus or trolley bus   ☐ Bicycle
☐ Streetcar or trolley car ☐ Walked
☐ Subway or elevated   ☐ Worked at home →
☐ Railroad   *SKIP to question 33*
☐ Ferryboat   ☐ Other method
☐ Taxicab

I *Answer question 26 ONLY IF you marked "Car, truck, or van" in question 25. Otherwise, SKIP to question 27.*

26 How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?

Person(s)

[   ]

27 What time did this person usually leave home to go to work LAST WEEK?

Hour   Minute

[ ] : [ ]   ☐ a.m.
              ☐ p.m.

28 How many minutes did it usually take this person to get from home to work LAST WEEK?

Minutes

[   ]

J *Answer questions 29–32 ONLY IF this person did NOT work last week. Otherwise, SKIP to question 33.*

29 a. LAST WEEK, was this person on layoff from a job?

☐ Yes → *SKIP to question 29c*
☐ No

b. LAST WEEK, was this person TEMPORARILY absent from a job or business?

☐ Yes, on vacation, temporary illness, labor dispute, etc. → *SKIP to question 32*
☐ No → *SKIP to question 30*

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 question 31*
☐ No

8

Person 1 (continued)

30 Has this person been looking for work during the last 4 weeks?

☐ Yes
☐ No → *SKIP to question 32*

31 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.)

32 When did this person last work, even for a few days?

☐ Within the past 12 months
☐ 1 to 5 years ago → *SKIP to question 35*
☐ Over 5 years ago or never worked → *SKIP to question 41*

33 During the PAST 12 MONTHS, how many WEEKS did this person work? *Count paid vacation, paid sick leave, and military service.*

Weeks
☐☐

34 During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK?

Usual hours worked each WEEK
☐☐

K *Answer questions 35–40 ONLY IF this person worked in the past 5 years. Otherwise, SKIP to question 41.*

35–40 CURRENT OR MOST RECENT JOB ACTIVITY. *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 information for his/her last job or business.*

35 Was this person – *Mark (X) ONE box.*

☐ an employee of a PRIVATE FOR PROFIT company or business, or of an individual, for wages, salary, or commissions?
☐ an employee of a PRIVATE NOT FOR PROFIT, tax-exempt, or charitable organization?
☐ a local GOVERNMENT employee (city, county, etc.)?
☐ a state GOVERNMENT employee?
☐ a 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?

36 For whom did this person work?

If now on active duty in the Armed Forces, mark (X) this box → ☐ *and print the branch of the Armed Forces.*

Name of company, business, or other employer

_____

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

_____

38 Is this mainly – *Mark (X) one box.*

☐ manufacturing?
☐ wholesale trade?
☐ retail trade?
☐ other (agriculture, construction, service, government, etc.)?

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

_____

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

_____

41 INCOME IN THE PAST 12 MONTHS.

Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)

Mark (X) the "No" box to show types of income NOT received.

If net income was a loss, mark the "Loss" box to the right of the dollar amount.

For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person.

a. Wages, salary, commissions, bonuses, or tips from all jobs. *Report amount before deductions for taxes, bonds, dues, or other items.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. *Report NET income after business expenses.*

☐ Yes → $ _____ .00   ☐ Loss
☐ No   TOTAL AMOUNT for past 12 MONTHS

c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. *Report even small amounts credited to an account.*

☐ Yes → $ _____ .00   ☐ Loss
☐ No   TOTAL AMOUNT for past 12 MONTHS

d. Social Security or Railroad Retirement.

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

e. Supplemental Security Income (SSI).

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

f. Any public assistance or welfare payments from the state or local welfare office.

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

g. Retirement, survivor, or disability pensions. *Do NOT include Social Security.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

h. 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 the sale of a home.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

42 What was this person's total income during the PAST 12 MONTHS? *Add entries in questions 41a to 41h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.*

☐ None OR $ _____ .00
☐ Loss   TOTAL AMOUNT for past 12 MONTHS

→ Continue with the questions for Person 2 on the next page. If only 1 person is listed in the List of Residents, SKIP to page 24 for mailing instructions.

9

40

13197017

THE **American Community Survey**

People are our most important resource. This Census Bureau survey collects information about education, employment, income, and housing — information your community uses to plan and fund programs. Your response is important, and we keep your answers confidential.

If you need help or have questions about completing this form, please call 1-800-354-7271. The telephone call is free.

Telephone Device for the Deaf (TDD): Call 1-800-582-8330. The telephone call is free.

¿NECESITA AYUDA? Si usted habla español y necesita ayuda para completar su cuestionario, llame sin cargo alguno al **1-877-833-5625**. Usted también puede pedir un cuestionario en español o completar su entrevista por teléfono con un entrevistador que habla español.

For more information about the American Community Survey, visit our web site at: http://www.census.gov/acs/www/

U S C E N S U S B U R E A U

Start Here

Please fill out this form as soon as possible after receiving it in the mail.

This form asks for three types of information:
- basic information about the people who are living or staying at the address on the mailing label above
- specific information about this house, apartment, or mobile home
- more detailed information about each person living or staying here

➔ **What is your name?** Please PRINT the name of the person who is filling out this form. Include the telephone number so we can contact you if there is a question, and today's date.

Last Name

First Name   MI

Area Code + Number

Today's date
(Month/Day/Year)

➔ **How many people are living or staying at this address?**
Number of people

➔ **Please turn to the next page to continue.**

41

List of Residents

This survey collects information about the people who are living or staying here for more than 2 months.

➤ On the List of Residents –

- Include everyone living or staying here for more than 2 months. In the Person 1 space, list one of the people living here who owns or rents this house or apartment. Remember to include yourself on the list if you are staying here for more than 2 months.

- Include anyone staying here who does not have another place to stay, even if they are here for 2 months or less.

- Do not include anyone who is living somewhere else for more than 2 months, such as a college student living away.

If no one is staying here for more than 2 months, do not list any names in the List of Residents. Complete only pages 4, 5, and 6 and return the form.

If you are not sure whom to list, call 1-800-354-7271.

➤ If there are more than five people living or staying here, print their names in the spaces for Person 6 through Person 12. We may call you for more information about them.

➤ After you complete the List of Residents, answer the questions asked at the top of pages 2 and 3 for the first five people on the list.

1 What is this person's sex?

2 What is this person's age and what is this person's date of birth? *Print numbers in boxes.*

3 How is this person related to Person 1?

Person 1

Last Name *(Please print)*

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

☒ Person 1

(Person 1 is the person living or staying here in whose name this house or apartment is owned, being bought, or rented. If there is no such person, start with the name of any adult living or staying here.)

Person 2

Last Name *(Please print)*

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 2 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 3

Last Name *(Please print)*

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 3 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 4

Last Name *(Please print)*

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 4 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 5

Last Name *(Please print)*

First Name   MI

☐ Male
☐ Female

Age (in years)

Month Day Year of birth

Relationship of Person 5 to Person 1.

☐ Husband or wife   ☐ Roomer, boarder
☐ Son or daughter   ☐ Housemate, roommate
☐ Brother or sister
☐ Father or mother   ☐ Unmarried partner
☐ Grandchild   ☐ Foster child
☐ In-law   ☐ Other nonrelative
☐ Other relative

Person 6

Last Name *(Please print)*

First Name   MI

Person 7

Last Name *(Please print)*

First Name   MI

Person 8

Last Name *(Please print)*

First Name   MI

④ What is this person's marital status?

NOTE: Please answer BOTH Questions 5 and 6.

⑤ Is this person Spanish/Hispanic/Latino? *Mark (X) the "No" box if not Spanish/Hispanic/Latino.*

⑥ What is this person's race? *Mark (X) one or more races to indicate what this person considers himself/herself to be.*

Person (row 1)

- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⟿

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ⟿

- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian — *Print race.* ⟶

- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — *Print race below.* ⟿
- ☐ Some other race — *Print race below.* ⟿

Person (row 2)

- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⟿

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ⟿

- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian — *Print race.* ⟶

- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — *Print race below.* ⟿
- ☐ Some other race — *Print race below.* ⟿

Person (row 3)

- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⟿

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ⟿

- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian — *Print race.* ⟶

- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — *Print race below.* ⟿
- ☐ Some other race — *Print race below.* ⟿

Person (row 4)

- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⟿

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ⟿

- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian — *Print race.* ⟶

- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — *Print race below.* ⟿
- ☐ Some other race — *Print race below.* ⟿

Person (row 5)

- ☐ Now married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated
- ☐ Never married

- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican Am., Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino — *Print group.* ⟿

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native — *Print name of enrolled or principal tribe.* ⟿

- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian — *Print race.* ⟶

- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander — *Print race below.* ⟿
- ☐ Some other race — *Print race below.* ⟿

Person 9
Last Name *(Please print)*
First Name   MI

Person 10
Last Name *(Please print)*
First Name   MI

Person 11
Last Name *(Please print)*
First Name   MI

Person 12
Last Name *(Please print)*
First Name   MI

➡ When you are finished, turn the page and continue with the Housing section.

3

Housing

Housing information helps your community plan for police and fire protection.

→ **Please answer the following questions about the house, apartment, or mobile home at the address on the mailing label.**

1. 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.

2. About when was this building first built?

- ☐ 2005 or later
- ☐ 2000 to 2004
- ☐ 1990 to 1999
- ☐ 1980 to 1989
- ☐ 1970 to 1979
- ☐ 1960 to 1969
- ☐ 1950 to 1959
- ☐ 1940 to 1949
- ☐ 1939 or earlier

3. When did PERSON 1 (listed in the List of Residents on page 2) move into this house, apartment, or mobile home?

Month Year

A *Answer questions 4–6 ONLY if this is a one-family house or a mobile home; otherwise, SKIP to question 7.*

4. How many acres is this house or mobile home on?

- ☐ Less than 1 acre → *SKIP to question 6*
- ☐ 1 to 9.9 acres
- ☐ 10 or more acres

5. IN THE PAST 12 MONTHS, what were the actual sales of all agricultural products from this property?

- ☐ None
- ☐ $1 to $999
- ☐ $1,000 to $2,499
- ☐ $2,500 to $4,999
- ☐ $5,000 to $9,999
- ☐ $10,000 or more

6. Is there a business (such as a store or barber shop) or a medical office on this property?

- ☐ Yes
- ☐ No

7. How many rooms are 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

8. How many bedrooms are in this house, apartment, or mobile home; that is, how many bedrooms would you list if this house, apartment, or mobile home were on the market for sale or rent?

- ☐ No bedroom
- ☐ 1 bedroom
- ☐ 2 bedrooms
- ☐ 3 bedrooms
- ☐ 4 bedrooms
- ☐ 5 or more bedrooms

9. Does this house, apartment, or mobile home have COMPLETE plumbing facilities; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower?

- ☐ Yes, has all three facilities
- ☐ No

10. Does this house, apartment, or mobile home have COMPLETE kitchen facilities; that is, 1) a sink with piped water, 2) a stove or range, and 3) a refrigerator?

- ☐ Yes, has all three facilities
- ☐ No

11. Is there telephone service available in this house, apartment, or mobile home from which you can both make and receive calls?

- ☐ Yes
- ☐ No

12. How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?

- ☐ None
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6 or more

4

44

Housing (continued)

13 Which FUEL is used MOST for heating this house, apartment, or mobile home?

- ☐ 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

14 a. LAST MONTH, what was the cost of electricity for this house, apartment, or mobile home?

Last month's cost – *Dollars*

[$ | | | 00]

OR

- ☐ Included in rent or condominium fee
- ☐ No charge or electricity not used

b. LAST MONTH, what was the cost of gas for this house, apartment, or mobile home?

Last month's cost – *Dollars*

[$ | | | 00]

OR

- ☐ Included in rent or condominium fee
- ☐ Included in electricity payment entered above
- ☐ No charge or gas not used

c. IN THE PAST 12 MONTHS, what was the cost of water and sewer for this house, apartment, or mobile home? *If you have lived here less than 12 months, estimate the cost.*

Past 12 months' cost – *Dollars*

[$ | | | 00]

OR

- ☐ Included in rent or condominium fee
- ☐ No charge

d. IN THE PAST 12 MONTHS, what was the cost of oil, coal, kerosene, wood, etc., for this house, apartment, or mobile home? *If you have lived here less than 12 months, estimate the cost.*

Past 12 months' cost – *Dollars*

[$ | | | 00]

OR

- ☐ Included in rent or condominium fee
- ☐ No charge or these fuels not used

15 At any time DURING THE PAST 12 MONTHS, did anyone in this household receive Food Stamps?

- ☐ Yes → What was the value of the Food Stamps received during the past 12 months?

  Past 12 months' value – *Dollars*

  [$ | | | 00]

- ☐ No

16 Is this house, apartment, or mobile home part of a condominium?

- ☐ Yes → What is the monthly condominium fee? *For renters, answer only if you pay the condominium fee in addition to your rent; otherwise, mark the "None" box.*

  Monthly amount – *Dollars*

  [$ | | | 00]

  OR

  - ☐ None

- ☐ No

17 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? → *SKIP to* **C**

B *Answer questions 18a and b ONLY IF you PAY RENT for this house, apartment, or mobile home. Otherwise, SKIP to question 19.*

18 a. What is the monthly rent for this house, apartment, or mobile home?

Monthly amount – *Dollars*

[$ | | | 00]

b. Does the monthly rent include any meals?

- ☐ Yes
- ☐ No

C *Answer questions 19–23 ONLY IF you or someone else in this household OWNS or IS BUYING this house, apartment, or mobile home. Otherwise, SKIP to* **E** *on the next page.*

19 What is the value of this property; that is, how much do you think this house and lot, apartment, or mobile home and lot, would sell for if it were for sale?

- ☐ Less than $10,000
- ☐ $10,000 to $14,999
- ☐ $15,000 to $19,999
- ☐ $20,000 to $24,999
- ☐ $25,000 to $29,999
- ☐ $30,000 to $34,999
- ☐ $35,000 to $39,999
- ☐ $40,000 to $49,999
- ☐ $50,000 to $59,999
- ☐ $60,000 to $69,999
- ☐ $70,000 to $79,999
- ☐ $80,000 to $89,999
- ☐ $90,000 to $99,999
- ☐ $100,000 to $124,999
- ☐ $125,000 to $149,999
- ☐ $150,000 to $174,999
- ☐ $175,000 to $199,999
- ☐ $200,000 to $249,999
- ☐ $250,000 or more – *Specify* ⟶

[$ | | | 00]

45

Housing (continued)

20 What are the annual real estate taxes on THIS property?

Annual amount – *Dollars*

$ [ ] .00

OR

☐ None

21 What is the annual payment for fire, hazard, and flood insurance on THIS property?

Annual amount – *Dollars*

$ [ ] .00

OR

☐ None

22 a. Do you or any member of this household have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?

☐ Yes, mortgage, deed of trust, or similar debt
☐ Yes, contract to purchase
☐ No → *SKIP to question 23a*

b. How much is the regular monthly mortgage payment on THIS property? *Include payment only on FIRST mortgage or contract to purchase.*

Monthly amount – *Dollars*

$ [ ] .00

OR

☐ No regular payment required → *SKIP to question 23a*

c. Does the regular monthly mortgage payment include payments for real estate taxes on THIS property?

☐ Yes, taxes included in mortgage payment
☐ No, taxes paid separately or taxes not required

d. Does the regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?

☐ Yes, insurance included in mortgage payment
☐ No, insurance paid separately or no insurance

23 a. Do you or any member of this household have a second mortgage or a home equity loan on THIS property?

☐ Yes, home equity loan
☐ Yes, second mortgage
☐ Yes, second mortgage and home equity loan
☐ No → *SKIP to* **D**

b. How much is the regular monthly payment on all second or junior mortgages and all home equity loans on THIS property?

Monthly amount – *Dollars*

$ [ ] .00

OR

☐ No regular payment required

D *Answer question 24 ONLY IF this is a MOBILE HOME. Otherwise, SKIP to* **E**.

24 What are the total annual costs for personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site? *Exclude real estate taxes.*

Annual costs – *Dollars*

$ [ ] .00

E *Answer questions 25a –c ONLY IF you listed at least one person on page 2. Otherwise, SKIP to page 24 for the mailing instructions.*

25 a. Do you or any member of this household live or stay at this address year round?

☐ Yes → *SKIP to the questions for Person 1 on the next page*
☐ No

b. How many months a year do members of this household stay at this address?

Months [ ]

c. What is the main reason members of this household are staying at this address?

☐ This is their permanent address
☐ This is their seasonal or vacation address
☐ To be close to work
☐ To attend school or college
☐ Looking for permanent housing
☐ Other reason(s) — *Specify* ↗

[ ]

→ Continue with the questions about PERSON 1 on the next page.

6

Person 1 (continued)

G Answer question 17 ONLY IF this person is 15 years old or over. Otherwise, SKIP to the questions for PERSON 2 on page 10.

17 Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of the following activities:

	Yes	No
a. Going outside the home alone to shop or visit a doctor's office?	☐	☐
b. Working at a job or business?	☐	☐

H Answer question 18 ONLY IF this person is female and 15–50 years old. Otherwise, SKIP to question 19a.

18 Has this person given birth to any children in the past 12 months?

☐ Yes
☐ No

19 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?

☐ Yes
☐ No → SKIP to question 20

b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

☐ Yes
☐ No → SKIP to question 20

c. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.

☐ Less than 6 months
☐ 6 to 11 months
☐ 1 or 2 years
☐ 3 or 4 years
☐ 5 or more years

20 Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

☐ Yes, now on active duty
☐ Yes, on active duty during the last 12 months, but not now
☐ Yes, on active duty in the past, but not during the last 12 months
☐ No, training for Reserves or National Guard only → SKIP to question 23
☐ No, never served in the military → SKIP to question 23

21 When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for EACH period in which this person served, even if just for part of the period.

☐ September 2001 or later
☐ August 1990 to August 2001 (including Persian Gulf War)
☐ September 1980 to July 1990
☐ May 1975 to August 1980
☐ Vietnam era (August 1964 to April 1975)
☐ March 1961 to July 1964
☐ February 1955 to February 1961
☐ Korean War (July 1950 to January 1955)
☐ January 1947 to June 1950
☐ World War II (December 1941 to December 1946)
☐ November 1941 or earlier

22 In total, how many years of active-duty military service has this person had?

☐ Less than 2 years
☐ 2 years or more

23 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 question 29

24 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

_____

25 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 question 33
☐ Other method

I Answer question 26 ONLY IF you marked "Car, truck, or van" in question 25. Otherwise, SKIP to question 27.

26 How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?

Person(s)

[____]

27 What time did this person usually leave home to go to work LAST WEEK?

Hour   Minute

[__] : [__]   ☐ a.m.   ☐ p.m.

28 How many minutes did it usually take this person to get from home to work LAST WEEK?

Minutes

[____]

J Answer questions 29–32 ONLY IF this person did NOT work last week. Otherwise, SKIP to question 33.

29 a. LAST WEEK, was this person on layoff from a job?

☐ Yes → SKIP to question 29c
☐ No

b. LAST WEEK, was this person TEMPORARILY absent from a job or business?

☐ Yes, on vacation, temporary illness, labor dispute, etc. → SKIP to question 32
☐ No → SKIP to question 30

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 question 31
☐ No

8

Person 1 (continued)

30 Has this person been looking for work during the last 4 weeks?

☐ Yes
☐ No → *SKIP to question 32*

31 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.)

32 When did this person last work, even for a few days?

☐ Within the past 12 months
☐ 1 to 5 years ago → *SKIP to question 35*
☐ Over 5 years ago or never worked → *SKIP to question 41*

33 During the PAST 12 MONTHS, how many WEEKS did this person work? *Count paid vacation, paid sick leave, and military service.*

Weeks

☐

34 During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK?

Usual hours worked each WEEK

☐

K *Answer questions 35-40 ONLY IF this person worked in the past 5 years. Otherwise, SKIP to question 41.*

35-40 CURRENT OR MOST RECENT JOB ACTIVITY. *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 information for his/her last job or business.*

35 Was this person –
Mark (X) ONE box.

☐ an employee of a PRIVATE FOR PROFIT company or business, or of an individual, for wages, salary, or commissions?
☐ an employee of a PRIVATE NOT FOR PROFIT, tax-exempt, or charitable organization?
☐ a local GOVERNMENT employee (city, county, etc.)?
☐ a state GOVERNMENT employee?
☐ a 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?

36 For whom did this person work?
If now on active duty in the Armed Forces, mark (X) this box → ☐ and print the branch of the Armed Forces.

Name of company, business, or other employer

☐

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

☐

38 Is this mainly – *Mark (X) one box.*

☐ manufacturing?
☐ wholesale trade?
☐ retail trade?
☐ other (agriculture, construction, service, government, etc.)?

39 What kind of work was this person doing?
(For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)

☐

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

☐

41 INCOME IN THE PAST 12 MONTHS.

Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)

Mark (X) the "No" box to show types of income NOT received.

If net income was a loss, mark the "Loss" box to the right of the dollar amount.

For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person.

a. Wages, salary, commissions, bonuses, or tips from all jobs. *Report amount before deductions for taxes, bonds, dues, or other items.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. *Report NET income after business expenses.*

☐ Yes $ _____ .00   ☐ Loss
☐ No   TOTAL AMOUNT for past 12 MONTHS

c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. *Report even small amounts credited to an account.*

☐ Yes $ _____ .00   ☐ Loss
☐ No   TOTAL AMOUNT for past 12 MONTHS

d. Social Security or Railroad Retirement.

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

e. Supplemental Security Income (SSI).

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

f. Any public assistance or welfare payments from the state or local welfare office.

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

g. Retirement, survivor, or disability pensions. *Do NOT include Social Security.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

h. 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 the sale of a home.*

☐ Yes → $ _____ .00
☐ No   TOTAL AMOUNT for past 12 MONTHS

42 What was this person's total income during the PAST 12 MONTHS? *Add entries in questions 41a to 41h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box.*

☐ None OR $ _____ .00
                TOTAL AMOUNT for past 12 MONTHS
☐ Loss

➡ Continue with the questions for Person 2 on the next page. If only 1 person is listed in the List of Residents, SKIP to page 24 for mailing instructions.

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