

The American Community Survey from the U.S. Department of Commerce  
Economics and Statistics Administration  
U.S. Census Bureau

OMB No. 0607-0810

“YOUR RESPONSE IS REQUIRED BY LAW”

1. Today's Date
2. Last Name
3. First Name + Middle Initial
4. Area Code + Number
5. Number of people living at this address

For each person 1 through 5 living at this address:

1. Last Name, First Name, Middle Initial
2. Relationship to Person 1
3. Sex
4. Age
5. Birth Date
6. Is the person of Hispanic, Latino or Spanish origin?
7. Race

For each person 6 through 12

1. Last Name, First Name, Middle Initial
2. Sex
3. Age

Housing

1. What type of building is it?
2. When was the building built?
3. When did person 1 move into the house?
4. How many acres is the house on?
5. What is the dollar value of actual sales of agricultural products in the last 12 months from this property?
6. Is there a business on this property?
7. How many separate rooms are in the house?
8. How many of the rooms are bedrooms?
9. Does the house have hot and cold running water?
10. Does the house have a flush toilet?
11. Does the house have a bathtub or shower?
12. Does the house have a sink with a faucet?
13. Does the house have a stove or range?
14. Does the house have a refrigerator?
15. Does the house have telephone service?
16. Does anyone in the house have a cell phone?
17. How many motor vehicles are kept at the house by those living there?
18. What type of fuel is used to heat the house?
19. What was the cost of electricity for the house last month?
20. What was the cost of gas for the house last month?
21. What was the cost of water and sewer for the house for the last 12 months?
22. What was the cost of heating oil, coal and wood used to heat the house for the last 12 months?
23. Did anyone in the house receive food stamps or a food stamp benefit card in the last 12 months?
24. Is the house part of a condominium?
25. What is the monthly condominium fee for the house?
26. Does anyone living in the house have a mortgage or home equity loan on the house?
27. Is the house owned free and clear by anyone living in the house?
28. Is the house rented?

29. Is the house occupied without payment of rent?
30. What is the monthly rent for this house?
31. Does the monthly rent include meals?
32. How much is the house and lot worth if it were for sale?
33. How much property tax is due on this house each year?
34. What is the annual cost of insurance for this property?
35. Does any member of this household have a mortgage, deed of trust, contract to purchase or similar debt on this property?
36. How much is the regular monthly mortgage payment on this property?
37. Does the regular monthly mortgage payment include payments for real estate taxes?
38. Does the regular monthly mortgage payment include fire, hazard or flood insurance?
39. Does any member of this household have a second mortgage or home equity loan on this property?
40. How much is the regular monthly payment on all second and junior mortgages and all home equity loans on this property?
41. What are the total annual costs for personal property taxes, site rent, registration fees, and license fees this mobile home and its site?

For each person 1 through 5 living at this house:

1. Last Name, First Name, Middle Initial
2. State of birth
3. Country of birth
4. Is the person a citizen of the United States?
5. Born in the United States?
6. Born in Puerto Rico, Guam, the U.S. Virgin Islands or Northern Marianas
7. Citizen by naturalization?
8. Year of naturalization
9. Is the person not a U.S. citizen?
10. When did the person come to live in the United States?
11. Has the person attended school or college in the last 3 months?
12. Public school or public college?
13. Private school or private college or home school?
14. What grade was the person attending?
15. What is the highest degree or level of school this person completed?
  - a) No schooling completed
  - b) Nursery school
  - c) Kindergarten
  - d) Grade 1 through 11 (specify)
  - e) 12<sup>th</sup> grade no diploma
  - f) Regular High School diploma
  - g) GED or alternative credential
  - h) Some college credit but less than 1 year of college credit
  - i) 1 or more years of college with no degree
  - j) Associates degree
  - k) Bachelors degree
  - l) Masters degree
  - m) Professional degree
  - n) Doctorate degree
16. For Bachelors degrees, what were the specific majors?
17. What is the person's ancestry or ethnic origin?
18. Does the person speak a language other than English at home?
19. What is this language?
20. How well does this person speak English?
21. Did this person live in this house 1 year ago?
22. Where did this person live 1 year ago?
23. Number and street
24. Name of city or town
25. Name of U.S. county
26. Name of U.S. state
27. Zip Code

## Health

28. Is this person currently covered by health insurance?
  - a) Insurance through a current or former employer or union?
  - b) Insurance purchased directly from an insurance company?
  - c) Medicare?
  - d) Medicaid?
  - e) Tricare?
  - f) Veterans Administration?
  - g) Indian Health Service?
  - h) Any other type of health insurance or health coverage plan?
29. Is this person deaf or does this person have serious difficulty hearing?
30. Is this person blind or does this person have serious difficulty seeing?
31. Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?
32. Does this person have serious difficulty walking or climbing stairs?
33. Does this person have difficulty dressing or bathing?
34. Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping?
35. What is this person's marital status?
36. In the past 12 months did this person get –
  - a) Married?
  - b) Widowed?
  - c) Divorced?
37. Has this person given birth to any children in the past 12 months?
38. Does this person have any of his/her own grandchildren under the age of 18 living in the house?
39. Is this grandparent currently responsible for most of the basic needs of any grandchildren under the age of 18 living in the house?
40. How long has this grandparent been responsible for these grandchildren?
41. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves or National Guard?
42. When did this person serve on active duty in the U.S. Armed Forces?
43. Does this person have a VA service-connected disability rating?
44. What is this person's service-connected disability rating?

## Job

45. Last week did this person work for pay at a job or business?
46. Last week did this person do any work for pay, even for as little as one hour?
47. At what location did this person work last week?
  - a) Street address
  - b) Name of city or town
  - c) Is the work location inside the limits of that city or town?
  - d) Name of county
  - e) Name of U.S. state or foreign country
  - f) Zip code
48. How did this person usually get to work last week?
  - a) Car, truck or van
  - b) Bus
  - c) Streetcar
  - d) Subway
  - e) Railroad
  - f) Ferryboat
  - g) Taxicab
  - h) Motorcycle
  - i) Bicycle
  - j) Walked
  - k) Worked at home

l) Other method

49. How many people including this person usually rode to work in the car, truck or van last week?
50. What time did this person usually leave home to go to work last week?
51. How many minutes did it usually take this person to get from home to work last week?
52. Last week was this person on layoff from a job?
53. Last week was this person temporarily absent from a job or business?
54. 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?
55. During the last 4 weeks has this person been actively looking for work?
56. Last week, could this person have started a job if offered one, or returned to work if recalled?
57. When did this person last work, even for a few days?
58. During the past 12 months did this person work 50 or more weeks? Count paid time off as work.
59. How many weeks did this person work, even for a few hours, including paid vacation, paid sick leave, and military service?
60. During the past 12 months, in the weeks worked, how many hours did this person usually work each week?
61. Was this person? –
  - a) An employee of a private for-profit business for wages, salary or commissions?
  - b) An employee of a private not-for-profit tax-exempt or charitable organization?
  - c) A local government employee?
  - d) A state government employee?
  - e) A federal government employee?
  - f) Self employed in own not incorporated business, professional practice or farm?
  - g) Self employed in own incorporated business, professional practice or farm?
  - h) Working without pay in family business or farm?
62. For whom did this person work?
  - a) Name of company, business or other employer
63. What kind of business or industry was this? Describe.
64. Is this mainly? –
  - a) Manufacturing?
  - b) Wholesale trade?
  - c) Retail trade?
  - d) Other
65. What kind of work was this person doing? Describe.
66. What were the persons most important activities or duties?

Income in the past 12 months

67. What was the amount of wages, salary, commissions, bonuses or tips from all jobs?
68. What was the amount of self-employment income from own nonfarm business or farm businesses, including proprietorships and partnerships?
69. What was the amount of interest, dividends, net rental income, royalty income or income from estates and trusts?
70. What was the amount of social security or railroad retirement income?
71. What was the amount of supplemental security income?
72. What was the amount of any public assistance or welfare payments from the state or local welfare office?
73. What was the amount of retirement, survivor, or disability pension income?
74. What was the amount of income from any other sources of income received regularly such as Veterans payments, unemployment compensation, child support or alimony?
75. What was the amount of the persons total income during the past 12 months?