

Handwritten marks at the top of the page, possibly a date or signature.

REPUBLIC OF LIBERIA
MINISTRY OF PLANNING AND ECONOMIC AFFAIRS
FORM PH-3 LONG FORM 1974
CENSUS OF POPULATION

a. City, Town or other place name
b. Street address if available
c. Structure number
d. Household Serial number

CONFIDENTIAL: This questionnaire is required by the Government of Liberia for the purposes of planning for the future as well as appraising the present needs of the Country. All information herein is accorded confidential treatment and can not be used for purposes of taxation, investigation or regulation. No person on this form will be mentioned by name, only totals will be shown.

NAME	RELATIONSHIP TO HEAD	SEX	AGE	MARITAL STATUS				COUNTY OF BIRTH	LENGTH OF RESIDENCE	CITIZEN OF LIBERIA	TRIBE	LITERACY		SCHOOL ATTENDANCE	HIGHEST GRADE COMPLETED	NUMBER OF CHILDREN BORN	CHILDREN BORN IN PAST YEAR	ECONOMIC ACTIVITY	USUAL OCCUPATION	BUSINESS OR INDUSTRY	WORK STATUS			
				NEVER MARRIED	MARRIED	WIDOWED	DIVORCED / SEPERATED					AT HOME	AWAY FROM HOME								PAID EMPLOYEE	EMPLOYER	SELF/EMPLOYED	UNPAID FAMILY WORKER
(1)	(2)	(3) 1 2	(4)	(5) 1 2 3 4	(6)	(7)	(8) 1 2	(9)	(10) 1 2	(11) 1 2	(12)	(13) 1 2	(14)	(15) 1 2 3 4 5	(16)	(17)	(18) 1 2 3 4							
2		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
3		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
4		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
5		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
6		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
7		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
8		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
9		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				
10		1 2		1 2 3 4			1 2		1 2			1 2					1 2 3 4 5			1 2 3 4				

IF LISTING IS CONTINUED ON A CONTINUATION SHEET, ENTER "X" **ASK ALL HOUSEHOLDS**

<p>(H-1) TYPE OF HOUSING UNIT</p> <input type="checkbox"/> 1 Conventional-permanent. <input type="checkbox"/> 2 Conventional-semi-permanent <input type="checkbox"/> 3 Temporary <p>(H-2) IS HOUSING UNIT OWNED BY SOMEONE LIVING IN IT OR IS IT BEING RENTED?</p> <input type="checkbox"/> 1. Owned or being bought. <input type="checkbox"/> 2. Rented for cash <input type="checkbox"/> 3. Rent free or other arrangement. If rented, what is monthly rent? (enter amount) <u> </u>	<p>(H-3) CONSTRUCTION MATERIALS OF OUTERWALLS.</p> <input type="checkbox"/> Stone, concrete cement block <input type="checkbox"/> Wood boards <input type="checkbox"/> Mud and mat <input type="checkbox"/> Reed, bamboo, grass <input type="checkbox"/> Galvanized iron <input type="checkbox"/> Other	<p>(H-4)</p> <input type="checkbox"/> Number of households in this structure <input type="checkbox"/> Number of rooms in this household <input type="checkbox"/> Number of persons in household (Enter number of persons in household) <input type="checkbox"/> Number of persons in household under age 14 years (count children in column 1.)	<p>(H-5) UTILITIES AVAILABLE IN HOUSING UNIT</p> Yes No <input type="checkbox"/> 1 <input type="checkbox"/> 2 Inside pipe water <input type="checkbox"/> Electricity <input type="checkbox"/> Inside flush toilet <input type="checkbox"/> Is kitchen shared with other units? <input type="checkbox"/> Is toilet shared with other units?	<p>(H-6)</p> <input type="checkbox"/> Number of persons who died in this household in past year.	<p>(H-7) AVAILABILITY OF RADIO IN HOUSING UNIT</p> Yes No <input type="checkbox"/> 1 <input type="checkbox"/> 2 <p>(H-8) WHAT IS THE MONTHLY INCOME OF THE HEAD OF THIS HOUSEHOLD?</p> <input type="checkbox"/> 1. Under \$50 per month <input type="checkbox"/> 2. \$50 to \$100 per month <input type="checkbox"/> 3. \$100 to \$150 per month <input type="checkbox"/> 4. \$150 to \$200 per month <input type="checkbox"/> 5. \$200 to \$250 per month <input type="checkbox"/> 6. \$250 to \$300 per month <input type="checkbox"/> 7. \$300 to \$350 per month <input type="checkbox"/> 8. \$350 to \$400 per month <input type="checkbox"/> 9. Over \$400 per month
--	--	--	---	--	---

REPUBLIC OF LIBERIA
 Ministry Of Planning
 And Economic Affairs
 Form PH-4 Short Form
 1974 Census of Popu-
 lation

- a. City, Town or other place name
- b. Street address if available
- c. Structure number
- d. Household Serial number

CONFIDENTIAL: This questionnaire is required by the Government of Liberia for the purposes of planning for the future as well as appraising the present needs of the Country. All information herein is accorded confidential treatment and can not be used for purposes of taxation, investigation or regulation. No person on this form will be mentioned by name, only totals will be shown.

NAME	RELATIONSHIP TO HEAD	SEX	AGE	MARITAL STATUS				COUNTY OF BIRTH	LENGTH OF RESIDENCE	CITIZEN OF LIBERIA		TRIBE	LITERACY		SCHOOL ATTENDANCE	HIGHEST GRADE COMPLETED	NUMBER OF CHILDREN BORN			CHILDREN BORN IN PAST YEAR	ECONOMIC ACTIVITY	USUAL OCCUPATION	BUSINESS OR INDUSTRY	WORK STATUS																								
				NEVER MARRIED	MARRIED	WIDOWED	DIVORCED / SEPERATED			CODE	YES		NO	CODE			YES	NO	YES					NO	AT HOME	AWAY FROM HOME	DIED	EVER BORN	SURVIVING	CODE	WORKING	KEEPING HOUSE	STUDENT	RETIRED	OTHER	CODE	PAID EMPLOYEE	EMPLOYER	SELF/EMPLOYED	UNPAID FAMILY WORKER								
1	(1)		(2)	(3)	1	2	3	4	(4)	(5)	1	2	(6)	(7)	(8)	1	2	(9)	(10)	1	2	(11)	1	2	(12)	(13)	(14)	1	2	(15)	3	4	5	(16)	(17)	1	2	(18)	3	4								
2					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
3					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
4					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
5					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
6					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
7					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
8					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
9					1	2	3	4			1	2				1	2			1	2								1	2	3	4																
10					1	2	3	4			1	2				1	2			1	2								1	2	3	4																

IF LISTING IS CONTINUED ON A CONTINUATION SHEET, ENTER "X"

REPUBLIC OF LIBERIA
 Ministry Of Planning
 And Economic Affairs
 Form PH-5 Continuation
 Long Form, 1974 Census
 of Population

a. Place Name on original questionnaire
 b. Original Structure Number
 c. Original Household Serial Number

CONFIDENTIAL: This questionnaire is required by the Government of Liberia for the purposes of planning for the future as well as appraising the present needs of the Country. All information herein is accorded confidential treatment and can not be used for purposes of taxation, investigation or regulation. No person on this form will be mentioned by name, only totals will be shown.

Ask all persons over age 5 years

Ask all women over age 10 years

Ask all persons over age 10 years

NAME	RELATIONSHIP TO HEAD	SEX	AGE	MARITAL STATUS				COUNTY OF BIRTH	LENGTH OF RESIDENCE	CITIZEN OF LIBERIA		TRIBE	LITERACY		SCHOOL ATTENDANCE	HIGHEST GRADE COMPLETED	NUMBER OF CHILDREN BORN					CHILDREN BORN IN PAST YEAR	ECONOMIC ACTIVITY	USUAL OCCUPATION	BUSINESS OR INDUSTRY	WORK STATUS									
				NEVER MARRIED	MARRIED	WIDOWED	DIVORCED / SEPERATED			CODE	YES		NO	CODE			YES	NO	YES	NO	AT HOME					AWAY FROM HOME	DIED	EVER BORN	SURVIVING	WORKING	KEEPING HOUSE	STUDENT	RETIRED	OTHER	CODE
1	(1)		(2)	1	2	3	4	(6)	(7)	1	2	(9)	1	2	1	2	(12)			(13)		(14)	1	2	3	4	5	(16)		(17)		1	2	(18)	3
2		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
3		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
4		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
5		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
6		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
7		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
8		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
9		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		
10		1	2	1	2	3	4			1	2		1	2	1	2							1	2	3	4	5				1	2	3		

IF ABSENT ENTER "X"

IF LISTING IS CONTINUED ON A CONTINUATION SHEET, ENTER "X"

Enter housing information on original questionnaire

REPUBLIC OF LIBERIA
Ministry Of Planning
And Economic Affairs
Form PH-6 Continuation; Short Form, 1974
Census of Population

- a. City, Town or other place name
- b. Street address if available
- c. Structure number
- d. Household Serial number

CONFIDENTIAL: This questionnaire is required by the Government of Liberia for the purposes of planning for the future as well as appraising the present needs of the Country. All information herein is accorded confidential treatment and can not be used for purposes of taxation, investigation or regulation. No person on this form will be mentioned by name, only totals will be shown.

NAME	RELATIONSHIP TO HEAD	SEX	AGE	MARITAL STATUS				COUNTY OF BIRTH	LENGTH OF RESIDENCE	CITIZEN OF LIBERIA	TRIBE	LITERACY		SCHOOL ATTENDANCE	HIGHEST GRADE COMPLETED	NUMBER OF CHILDREN BORN			CHILDREN BORN IN PAST YEAR	ECONOMIC ACTIVITY	USUAL OCCUPATION	BUSINESS OR INDUSTRY	WORK STATUS													
				NEVER MARRIED	MARRIED	WIDOWED	DIVORCED / SEPERATED					YES	NO			YES	NO	AT HOME					AWAY FROM HOME	DIED	EVER BORN	SURVIVING	WORKING	KEEPING HOUSE	STUDENT	RETIRED	OTHER	PAID EMPLOYEE	EMPLOYER	SELF/EMPLOYED	UNPAID FAMILY WORKER	
1	(1)		(2)		(3)	1 2 3 4	(4)		(5)	1 2	(6)	1 2	(7)	1 2	1 2	(8)	1 2	(9)	1 2	(10)	1 2	(11)	1 2	(12)		(13)		(14)	1 2 3 4 5	(15)		(16)		(17)	1 2 3 4	(18)
2		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
3		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
4		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
5		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
6		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
7		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
8		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
9		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		
10		1 2		1 2 3 4					1 2			1 2	1 2							1 2	1 2	1 2	1 2					1 2 3 4 5						1 2 3 4		

IF LISTING IS CONTINUED ON A CONTINUATION SHEET, ENTER "X"

REPUBLIC OF LIBERIA

Ministry of Planning

And Economic Affairs

Form PH-7 GROUP QUARTERS

1974 Census of Population

a. City, town or place name

□□□

b. Street address if available

c. Name of Group Quarters _____ Type _____

CONFIDENTIAL: This questionnaire is required by the Government of Liberia for the purposes of planning for the future as well as appraising the present needs of the Country. All information herein is accorded confidential treatment and can not be used for purposes of taxation, investigation or regulation. No person on this form will be mentioned by name, only totals will be shown.

Ask all persons over age 5 years

Ask all women over age 10 years

Ask all persons over age 10 years

NAME	RELATIONSHIP Inmate Patient Guest Lodger Worker Worker's son Soldier	SEX MALE FEMALE	AGE Last birth date	MARITAL STATUS Ask all persons over 10 years				COUNTY OF BIRTH Country if outside Liberia	LENGTH OF RESIDENCE Number of years person lived in this country. If always, enter "25" If less than 1 yr, enter "00"	CITIZEN OF LIBERIA YES NO	TRIBE Write name of tribe. If no tribe enter "00"	LITERACY Can person read and write English?		SCHOOL ATTENDANCE Is person presently attending school?		HIGHEST GRADE COMPLETED What was the highest grade completed? If none enter "00"	NUMBER OF CHILDREN BORN Ask all women over age 14 years regardless of marital status.			CHILDREN BORN IN PAST YEAR	ECONOMIC ACTIVITY What was person doing most during past 12 months? (If person reported as anything but working, skip columns on occupation, industry and work status.)	USUAL OCCUPATION If person working, what type of work did they do? Example: Rice Farmer Auto Mechanic	BUSINESS OR INDUSTRY What kind of business or industry did person work in? Example: Iron mine Rice farm	WORK STATUS Was person paid employee? Was person employer? Was person self-employed? Was person unpaid family worker?																
				NEVER MARRIED	MARRIED	WIDOWED	DIVORCED / SEPERATED					CODE	YES	NO	CODE		YES	NO	YES					NO	AT HOME	AWAY FROM HOME	DIED	EVER BORN	SURVIVING	WORKING	KEEPING HOUSE	STUDENT	RETIRED	OTHER	CODE	CODE	PAID EMPLOYEE	EMPLOYER	SELF/EMPLOYED	UNPAID FAMILY WORKER
1	(1)		(2)	(3)	1	2	3	4	(6)	(7)	(8)	1	2	(10)	1	2	(11)	1	2	(12)			(13)		(14)	1	2	(15)	3	4	5	(16)		(17)		1	2	(18)	3	4
2				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
3				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
4				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
5				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
6				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
7				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
8				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
9				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		
10				1	2	3	4				1	2		1	2	1	2									1	2	3	4	5					1	2	3	4		

IF LISTING IS CONTINUED ON A CONTINUATION SHEET, ENTER "X" □