

Please fill out this  
official Census Form  
and mail it back on  
Census Day,  
Tuesday, April 1, 1980

# 1980 Census of the United States

## How to fill out your Census Form

Page 1

See the filled-out example in the yellow instruction guide. This guide will help with any problems you may have.

If you need more help, call the Census Office. The telephone number of the local office is shown at the bottom of the address box on the front cover.

Use a black pencil to answer the questions. Black pencil is better to use than ballpoint or other pens.

Fill circles "O" completely, like this ●

When you write in an answer, print or write clearly.

Make sure that answers are provided for everyone here.

See page 4 of the guide if a roomer or someone else in the household does not want to give you all the information for the form.

Answer the questions on pages 1 through 5, and then starting with pages 6 and 7, fill a pair of pages for each person in the household.

Check your answers. Then write your name, the date, and telephone number on page 20.

Mail back this form on Tuesday, April 1, or as soon afterward as you can. Use the enclosed envelope; no stamp is needed.

Please start by answering Question 1 below.

If the address shown below has the wrong apartment identification, please write the correct apartment number or location here.

(11)	A1	A2	A3	A5	A11
				L	

### A message from the Director, Bureau of the Census . . .

We must, from time to time, take stock of ourselves as a people if our Nation is to meet successfully the many national and local challenges we face. This is the purpose of the 1980 census.

The essential need for a population census was recognized almost 200 years ago when our Constitution was written. As provided by article I, the first census was conducted in 1790 and one has been taken every 10 years since then.

The law under which the census is taken protects the confidentiality of your answers. For the next 72 years — or until April 1, 2052 — only sworn census workers have access to the individual records, and no one else may see them.

Your answers, when combined with the answers from other people, will provide the statistical figures needed by public and private groups, schools, business and industry, and Federal, State, and local governments across the country. These figures will help all sectors of American society understand how our population and housing are changing. In this way, we can deal more effectively with today's problems and work toward a better future for all of us.

The census is a vitally important national activity. Please do your part by filling out this census form accurately and completely. If you mail it back promptly in the enclosed postage-paid envelope, it will save the expense and inconvenience of a census taker having to visit you.

Thank you for your cooperation.

Please continue →

## Your answers are confidential

By law (title 13, U.S. Code), census employees are subject to fine and/or imprisonment for any disclosure of your answers. Only after 72 years does your information become available to other government agencies or the public. The same law requires that you answer the questions to the best of your knowledge.

## Para personas de habla hispana

(For Spanish-speaking persons)  
SI USTED DESEA UN CUESTIONARIO DEL CENSO EN ESPAÑOL llame a la oficina del censo. El número de teléfono se encuentra en el encasillado de la dirección.

O, si prefiere, marque esta casilla  y devuelva el cuestionario por correo en el sobre que se le incluye.

U.S. Department of Commerce  
Bureau of the Census  
Form D-2

Form Approved  
OMB No. 41 578006

Please continue →

## Question 1

### List in Question 1

- Family members living here, including babies still in the hospital
- Relatives living here
- Lodgers or boarders living here
- Other persons living here
- College students who stay here while attending college, even if their parents live elsewhere
- Persons who usually live here but are temporarily away (including children in boarding school below the college level)
- Persons with a home elsewhere but who stay here most of the week while working

### Do Not List in Question 1

- Any person away from here in the Armed Forces
- Any college student who stays somewhere else while attending college
- Any person who usually stays somewhere else most of the week while working there
- Any person away from here in an institution such as a home for the aged or mental hospital
- Any person staying or visiting here who has a usual home elsewhere

### 1. What is the name of each person who was living here on Tuesday, April 1, 1980, or who was staying or visiting here and had no other home?

### Note

If everyone here is staying only temporarily and has a usual home elsewhere, please mark this box .

Then please:

- answer the questions on pages 2 through 5 only, and
- enter the address of your usual home on page 20.

Here are the QUESTIONS	PERSON in column 1		PERSON in column 2		PERSON in column 3		PERSON in column 4	
	Last name	First name	Last name	First name	Last name	First name	Last name	First name
2. How is this person related to the person in column 1? <i>Fill one circle.</i> <i>If "Other relative" of person in column 1, give exact relationship, such as mother-in-law, niece, grandson, etc.</i>	<b>START</b> in this column with the household member (or one of the members) in whose name the home is owned or rented. If there is no such person, start in this column with any adult household member.		If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister		If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister		If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister	
3. Sex <i>Fill one circle.</i>	<input type="radio"/> Male <input checked="" type="radio"/> Female		<input type="radio"/> Male <input checked="" type="radio"/> Female		<input type="radio"/> Male <input checked="" type="radio"/> Female		<input type="radio"/> Male <input checked="" type="radio"/> Female	
4. Is this person — <i>Fill one circle.</i>	<input type="checkbox"/> White <input type="checkbox"/> Asian Indian <input type="checkbox"/> Black or Negro <input type="checkbox"/> Hawaiian <input type="checkbox"/> Japanese <input type="checkbox"/> Guamanian <input type="checkbox"/> Chinese <input type="checkbox"/> Samoan <input type="checkbox"/> Filipino <input type="checkbox"/> Eskimo <input type="checkbox"/> Korean <input type="checkbox"/> Aleut <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other — Specify _____ <input type="checkbox"/> Indian (Amer.) Print tribe _____		<input type="checkbox"/> White <input type="checkbox"/> Asian Indian <input type="checkbox"/> Black or Negro <input type="checkbox"/> Hawaiian <input type="checkbox"/> Japanese <input type="checkbox"/> Guamanian <input type="checkbox"/> Chinese <input type="checkbox"/> Samoan <input type="checkbox"/> Filipino <input type="checkbox"/> Eskimo <input type="checkbox"/> Korean <input type="checkbox"/> Aleut <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other — Specify _____ <input type="checkbox"/> Indian (Amer.) Print tribe _____		<input type="checkbox"/> White <input type="checkbox"/> Asian Indian <input type="checkbox"/> Black or Negro <input type="checkbox"/> Hawaiian <input type="checkbox"/> Japanese <input type="checkbox"/> Guamanian <input type="checkbox"/> Chinese <input type="checkbox"/> Samoan <input type="checkbox"/> Filipino <input type="checkbox"/> Eskimo <input type="checkbox"/> Korean <input type="checkbox"/> Aleut <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other — Specify _____ <input type="checkbox"/> Indian (Amer.) Print tribe _____		<input type="checkbox"/> White <input type="checkbox"/> Asian Indian <input type="checkbox"/> Black or Negro <input type="checkbox"/> Hawaiian <input type="checkbox"/> Japanese <input type="checkbox"/> Guamanian <input type="checkbox"/> Chinese <input type="checkbox"/> Samoan <input type="checkbox"/> Filipino <input type="checkbox"/> Eskimo <input type="checkbox"/> Korean <input type="checkbox"/> Aleut <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other — Specify _____ <input type="checkbox"/> Indian (Amer.) Print tribe _____	
5. Age, and month and year of birth <i>a. Print age at last birthday.</i> <i>b. Print month and fill one circle.</i> <i>c. Print year in the spaces, and fill one circle below each number.</i>	<b>a. Age at last birthday</b> 1 8 8 8 <b>b. Month of birth</b> <input type="radio"/> Jan.—Mar. <input type="radio"/> 6 <input type="radio"/> Apr.—June <input type="radio"/> 7 <input type="radio"/> July—Sept. <input type="radio"/> 8 <input type="radio"/> Oct.—Dec. <input type="radio"/> 9		<b>a. Age at last birthday</b> 1 8 8 8 <b>b. Month of birth</b> <input type="radio"/> Jan.—Mar. <input type="radio"/> 6 <input type="radio"/> Apr.—June <input type="radio"/> 7 <input type="radio"/> July—Sept. <input type="radio"/> 8 <input type="radio"/> Oct.—Dec. <input type="radio"/> 9		<b>a. Age at last birthday</b> 1 8 8 8 <b>b. Month of birth</b> <input type="radio"/> Jan.—Mar. <input type="radio"/> 6 <input type="radio"/> Apr.—June <input type="radio"/> 7 <input type="radio"/> July—Sept. <input type="radio"/> 8 <input type="radio"/> Oct.—Dec. <input type="radio"/> 9		<b>a. Age at last birthday</b> 1 8 8 8 <b>b. Month of birth</b> <input type="radio"/> Jan.—Mar. <input type="radio"/> 6 <input type="radio"/> Apr.—June <input type="radio"/> 7 <input type="radio"/> July—Sept. <input type="radio"/> 8 <input type="radio"/> Oct.—Dec. <input type="radio"/> 9	
6. Marital status <i>Fill one circle.</i>	<input type="radio"/> Now married <input type="radio"/> Separated <input type="radio"/> Widowed <input type="radio"/> Never married <input type="radio"/> Divorced		<input type="radio"/> Now married <input type="radio"/> Separated <input type="radio"/> Widowed <input type="radio"/> Never married <input type="radio"/> Divorced		<input type="radio"/> Now married <input type="radio"/> Separated <input type="radio"/> Widowed <input type="radio"/> Never married <input type="radio"/> Divorced		<input type="radio"/> Now married <input type="radio"/> Separated <input type="radio"/> Widowed <input type="radio"/> Never married <input type="radio"/> Divorced	
7. Is this person of Spanish/Hispanic origin or descent? <i>Fill one circle.</i>	<input type="radio"/> No (not Spanish/Hispanic) <input type="radio"/> Yes, Mexican, Mexican-Amer., Chicano <input type="radio"/> Yes, Puerto Rican <input type="radio"/> Yes, Cuban <input type="radio"/> Yes, other Spanish/Hispanic		<input type="radio"/> No (not Spanish/Hispanic) <input type="radio"/> Yes, Mexican, Mexican-Amer., Chicano <input type="radio"/> Yes, Puerto Rican <input type="radio"/> Yes, Cuban <input type="radio"/> Yes, other Spanish/Hispanic		<input type="radio"/> No (not Spanish/Hispanic) <input type="radio"/> Yes, Mexican, Mexican-Amer., Chicano <input type="radio"/> Yes, Puerto Rican <input type="radio"/> Yes, Cuban <input type="radio"/> Yes, other Spanish/Hispanic		<input type="radio"/> No (not Spanish/Hispanic) <input type="radio"/> Yes, Mexican, Mexican-Amer., Chicano <input type="radio"/> Yes, Puerto Rican <input type="radio"/> Yes, Cuban <input type="radio"/> Yes, other Spanish/Hispanic	
8. Since February 1, 1980, has this person attended regular school or college at any time? <i>Fill one circle. Count nursery school, kindergarten, elementary school, and schooling which leads to a high school diploma or college degree.</i>	<input type="radio"/> No, has not attended since February 1 <input type="radio"/> Yes, public school, public college <input type="radio"/> Yes, private, church-related <input type="radio"/> Yes, private, not church-related		<input type="radio"/> No, has not attended since February 1 <input type="radio"/> Yes, public school, public college <input type="radio"/> Yes, private, church-related <input type="radio"/> Yes, private, not church-related		<input type="radio"/> No, has not attended since February 1 <input type="radio"/> Yes, public school, public college <input type="radio"/> Yes, private, church-related <input type="radio"/> Yes, private, not church-related		<input type="radio"/> No, has not attended since February 1 <input type="radio"/> Yes, public school, public college <input type="radio"/> Yes, private, church-related <input type="radio"/> Yes, private, not church-related	
9. What is the highest grade (or year) of regular school this person has ever attended? <i>Fill one circle.</i> <i>If now attending school, mark grade person is in. If high school was finished by equivalency test (GED), mark "12."</i>	<b>Highest grade attended:</b> <input type="checkbox"/> Nursery school <input type="checkbox"/> Kindergarten <input type="checkbox"/> Elementary through high school (grade or year) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> College (academic year) 1 2 3 4 5 6 7 8 or more <input type="checkbox"/> Never attended school — Skip question 10		<b>Highest grade attended:</b> <input type="checkbox"/> Nursery school <input type="checkbox"/> Kindergarten <input type="checkbox"/> Elementary through high school (grade or year) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> College (academic year) 1 2 3 4 5 6 7 8 or more <input type="checkbox"/> Never attended school — Skip question 10		<b>Highest grade attended:</b> <input type="checkbox"/> Nursery school <input type="checkbox"/> Kindergarten <input type="checkbox"/> Elementary through high school (grade or year) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> College (academic year) 1 2 3 4 5 6 7 8 or more <input type="checkbox"/> Never attended school — Skip question 10		<b>Highest grade attended:</b> <input type="checkbox"/> Nursery school <input type="checkbox"/> Kindergarten <input type="checkbox"/> Elementary through high school (grade or year) 1 2 3 4 5 6 7 8 9 10 11 12 <input type="checkbox"/> College (academic year) 1 2 3 4 5 6 7 8 or more <input type="checkbox"/> Never attended school — Skip question 10	
10. Did this person finish the highest grade (or year) attended? <i>Fill one circle.</i>	<input type="radio"/> Now attending this grade (or year) <input type="radio"/> Finished this grade (or year) <input type="radio"/> Did not finish this grade (or year)		<input type="radio"/> Now attending this grade (or year) <input type="radio"/> Finished this grade (or year) <input type="radio"/> Did not finish this grade (or year)		<input type="radio"/> Now attending this grade (or year) <input type="radio"/> Finished this grade (or year) <input type="radio"/> Did not finish this grade (or year)		<input type="radio"/> Now attending this grade (or year) <input type="radio"/> Finished this grade (or year) <input type="radio"/> Did not finish this grade (or year)	
	CENSUS USE ONLY    A    I    N    ○		CENSUS USE ONLY    A    I    N    ○		CENSUS USE ONLY    A    I    N    ○		CENSUS USE ONLY    A    I    N    ○	

NOTE: Questions 1-7 and H1-H12 asked of all households. Questions 8-33 and H13-H32 asked of sample households only.

PERSON in column 5		PERSON in column 6		PERSON in column 7	
Last name	Middle initial	Last name	Middle initial	Last name	Middle initial
First name		First name		First name	
If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister		If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister		If relative of person in column 1: <input type="checkbox"/> Husband/wife <input type="checkbox"/> Father/mother <input type="checkbox"/> Son/daughter <input type="checkbox"/> Other relative <input type="checkbox"/> Brother/sister	
If not related to person in column 1: <input type="checkbox"/> Roomer, boarder <input type="checkbox"/> Other nonrelative <input type="checkbox"/> Partner, roommate <input type="checkbox"/> Paid employee		If not related to person in column 1: <input type="checkbox"/> Roomer, boarder <input type="checkbox"/> Other nonrelative <input type="checkbox"/> Partner, roommate <input type="checkbox"/> Paid employee		If not related to person in column 1: <input type="checkbox"/> Roomer, boarder <input type="checkbox"/> Other nonrelative <input type="checkbox"/> Partner, roommate <input type="checkbox"/> Paid employee	
<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Male <input type="checkbox"/> Female	
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a. Age at last birthday	c. Year of birth	a. Age at last birthday	c. Year of birth	a. Age at last birthday	c. Year of birth
b. Month of birth		b. Month of birth		b. Month of birth	
<input type="checkbox"/> Now married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Never married <input type="checkbox"/> Divorced		<input type="checkbox"/> Now married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Never married <input type="checkbox"/> Divorced		<input type="checkbox"/> Now married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Never married <input type="checkbox"/> Divorced	
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CENSUS USE ONLY	A. I. N.	CENSUS USE ONLY	A. I. N.	CENSUS USE ONLY	A. I. N.

If you listed more than 7 persons in Question 1, please see note on page 20.

**H1. Did you leave anyone out of Question 1 because you were not sure if the person should be listed - for example, a new baby still in the hospital, a lodger who also has another home, or a person who stays here once in a while and has no other home?**

No  
 Yes - On page 20 give name(s) and reason left out.

**H2. Did you list anyone in Question 1 who is away from home now - for example, on a vacation or in a hospital?**

Yes - On page 20 give name(s) and reason person is away.  
 No

**H3. Is anyone visiting here who is not already listed?**

Yes - On page 20 give name of each visitor for whom there is no one at the home address to report the person to a census taker.  
 No

**H4. How many living quarters, occupied and vacant, are at this address?**

One  
 2 apartments or living quarters  
 3 apartments or living quarters  
 4 apartments or living quarters  
 5 apartments or living quarters  
 6 apartments or living quarters  
 7 apartments or living quarters  
 8 apartments or living quarters  
 9 apartments or living quarters  
 10 or more apartments or living quarters

**H5. Do you enter your living quarters -**

Directly from the outside or through a common or public hall?  
 Through someone else's living quarters?

**H6. Do you have complete plumbing facilities in your living quarters, that is, hot and cold piped water, a flush toilet, and a bathtub or shower?**

Yes, for this household only  
 Yes, but also used by another household  
 No, have some but not all plumbing facilities  
 No plumbing facilities in living quarters

**H7. How many rooms do you have in your living quarters? Do not count bedrooms, porches, balconies, foyers, halls, or half-rooms.**

1 room     4 rooms     7 rooms  
 2 rooms     5 rooms     8 rooms  
 3 rooms     6 rooms     9 or more rooms

**H8. Are your living quarters -**

Owned or being bought by you or by someone else in this household?  
 Rented for cash rent?  
 Occupied without payment of cash rent?

**H9. Is this apartment (house) part of a condominium?**

No  
 Yes, a condominium

**H10. If this is a one-family house -**

a. Is the house on a property of 10 or more acres?  
 Yes     No

b. Is any part of the property used as a commercial establishment or medical office?  
 Yes     No

**H11. If you live in a one-family house or a condominium unit which you own or are buying -**

What is the value of this property, that is, how much do you think this property (house and lot or condominium unit) would sell for if it were for sale?

Do not answer this question if this is -

- A mobile home or trailer
- A house on 10 or more acres
- A house with a commercial establishment or medical office on the property

Less than \$10,000     \$50,000 to \$54,999  
 \$10,000 to \$14,999     \$55,000 to \$59,999  
 \$15,000 to \$19,999     \$60,000 to \$64,999  
 \$20,000 to \$24,999     \$65,000 to \$69,999  
 \$25,000 to \$29,999     \$70,000 to \$74,999  
 \$30,000 to \$34,999     \$75,000 to \$79,999  
 \$35,000 to \$39,999     \$80,000 to \$89,999  
 \$40,000 to \$44,999     \$90,000 to \$99,999  
 \$45,000 to \$49,999     \$100,000 to \$124,999  
 \$50,000 or more     \$125,000 to \$149,999  
     \$150,000 to \$199,999  
     \$200,000 or more

**H12. If you pay rent for your living quarters -**

What is the monthly rent?  
 If rent is not paid by the month, see the instruction guide on how to figure a monthly rent.

Less than \$50     \$160 to \$169  
 \$50 to \$59     \$170 to \$179  
 \$60 to \$69     \$180 to \$189  
 \$70 to \$79     \$190 to \$199  
 \$80 to \$89     \$200 to \$224  
 \$90 to \$99     \$225 to \$249  
 \$100 to \$109     \$250 to \$274  
 \$110 to \$119     \$275 to \$299  
 \$120 to \$129     \$300 to \$349  
 \$130 to \$139     \$350 to \$399  
 \$140 to \$149     \$400 to \$499  
 \$150 to \$159     \$500 or more

**FOR CENSUS USE ONLY**

A4. Block number	A6. Serial number	B. Type of unit or quarters	C1. Is this unit for -	D. Months vacant	E. Total persons
		Occupied	Year round use	<input type="checkbox"/> Less than 1 month	<input type="checkbox"/>
		First form	Seasonal/Mig - Skip C2, C3, and D.	<input type="checkbox"/> 1 up to 2 months	<input type="checkbox"/>
		Continuation		<input type="checkbox"/> 2 up to 6 months	<input type="checkbox"/>
		Vacant	C2. Vacancy status	<input type="checkbox"/> 6 up to 12 months	<input type="checkbox"/>
		Regular	For rent	<input type="checkbox"/> 1 year up to 2 years	<input type="checkbox"/>
		Usual home elsewhere	For sale only	<input type="checkbox"/> 2 or more years	<input type="checkbox"/>
		Group quarters	Rented or sold, not occupied held for occasional use	E. Indicators	<input type="checkbox"/>
		First form	Other vacant	1. Mail return	<input type="checkbox"/>
		Continuation	C3. Is this unit boarded up?	2. Pop / F	<input type="checkbox"/>
			Yes		<input type="checkbox"/>
			No		<input type="checkbox"/>

**H13 Which best describes this building?**  
*Include all apartments, flats, etc., even if vacant.*  
 A mobile home or trailer  
 A one family house detached from any other house  
 A one family house attached to one or more houses  
 A building for 2 families  
 A building for 3 or 4 families  
 A building for 5 to 9 families  
 A building for 10 to 19 families  
 A building for 20 to 49 families  
 A building for 50 or more families  
 A boat, tent, van, etc.

**H14a How many stories (floors) are in this building?**  
*Count an attic or basement as a story if it has any finished rooms for living purposes.*  
 1 to 3 — Skip to H15      7 to 12  
 4 to 6                              13 or more stories

**b. Is there a passenger elevator in this building?**  
 Yes                              No

**H15a Is this building —**  
 On a city or suburban lot, or on a place of less than 1 acre? — Skip to H16  
 On a place of 1 to 9 acres?  
 On a place of 10 or more acres?

**b. Last year, 1979, did sales of crops, livestock, and other farm products from this place amount to —**  
 Less than \$50 (or None)      \$250 to \$599      \$1,000 to \$2,499  
 \$50 to \$249                      \$600 to \$999      \$2,500 or more

**H16. Do you get water from —**  
 A public system (city water department, etc.) or private company?  
 An individual drilled well?  
 An individual dug well?  
 Some other source (a spring, creek, river, cistern, etc.)?

**H17 Is this building connected to a public sewer?**  
 Yes, connected to public sewer  
 No, connected to septic tank or cesspool  
 No, use other means

**H18. About when was this building originally built? Mark when the building was first constructed, not when it was remodeled, added to, or converted.**  
 1979 or 1980      1960 to 1969      1940 to 1949  
 1975 to 1978      1950 to 1959      1939 or earlier  
 1970 to 1974

**H19. When did the person listed in column 1 move into this house (or apartment)?**  
 1979 or 1980                      1950 to 1959  
 1975 to 1978                      1949 or earlier  
 1970 to 1974                      Always lived here  
 1960 to 1969

**H20. How are your living quarters heated?**  
*Fill one circle for the kind of heat used most.*  
 Steam or hot water system  
 Central warm air furnace with ducts to the individual rooms  
*(Do not count electric heat pumps here.)*  
 Electric heat pump  
 Other built-in electric units (permanently installed in wall, ceiling, or baseboard)   
 Floor, wall, or pipeless furnace  
 Room heaters with flue or vent, burning gas, oil, or kerosene  
 Room heaters without flue or vent, burning gas, oil, or kerosene (not portable)  
 Fireplaces, stoves, or portable room heaters of any kind  
 No heating equipment

ALSO ANSWER THESE QUESTIONS

**H21a. Which fuel is used most for house heating?**  
 Gas, from underground pipes serving the neighborhood  
 Gas, bottled, tank, or LP  
 Electricity  
 Fuel oil, kerosene, etc.   
 Coal or coke  
 Wood  
 Other fuel  
 No fuel used

**b. Which fuel is used most for water heating?**  
 Gas, from underground pipes serving the neighborhood  
 Gas, bottled, tank, or LP  
 Electricity  
 Fuel oil, kerosene, etc.   
 Coal or coke  
 Wood  
 Other fuel  
 No fuel used

**c. Which fuel is used most for cooking?**  
 Gas, from underground pipes serving the neighborhood  
 Gas, bottled, tank, or LP  
 Electricity  
 Fuel oil, kerosene, etc.   
 Coal or coke  
 Wood  
 Other fuel  
 No fuel used

**H22. What are the costs of utilities and fuels for your living quarters?**  
**a. Electricity**  
 \$ \_\_\_\_\_ 00 OR Included in rent or no charge  
 Average monthly cost      Electricity not used

**b. Gas**  
 \$ \_\_\_\_\_ 00 OR Included in rent or no charge  
 Average monthly cost      Gas not used

**c. Water**  
 \$ \_\_\_\_\_ 00 OR Included in rent or no charge  
 Yearly cost      These fuels not used

**d. Oil, coal, kerosene, wood, etc.**  
 \$ \_\_\_\_\_ 00 OR Included in rent or no charge  
 Yearly cost      These fuels not used

**H23 Do you have complete kitchen facilities? Complete kitchen facilities are a sink with piped water, a range or cookstove, and a refrigerator.**  
 Yes  No

**H24 How many bedrooms do you have?**  
*Count rooms used mainly for sleeping even if used also for other purposes.*  
 No bedroom      2 bedrooms      4 bedrooms  
 1 bedroom      3 bedrooms      5 or more bedrooms

**H25. How many bathrooms do you have?**  
*A complete bathroom is a room with flush toilet, bathtub or shower, and wash basin with piped water.*  
*A half bathroom has at least a flush toilet or bathtub or shower, but does not have all the facilities for a complete bathroom.*  
 No bathroom, or only a half bathroom  
 1 complete bathroom  
 1 complete bathroom, plus half bath(s)  
 2 or more complete bathrooms

**H26. Do you have a telephone in your living quarters?**  
 Yes  No

**H27. Do you have air conditioning?**  
 Yes, a central air conditioning system  
 Yes, 1 individual room unit  
 Yes, 2 or more individual room units  
 No

**H28. How many automobiles are kept at home for use by members of your household?**  
 None  2 automobiles  
 1 automobile                      3 or more automobiles

**H29. How many vans or trucks of one-ton capacity or less are kept at home for use by members of your household?**  
 None  2 vans or trucks  
 1 van or truck                      3 or more vans or trucks

CENSUS USE

*Please answer H30—H32 if you live in a one-family house which you own or are buying, unless this is —*

- A mobile home or trailer
- A house on 10 or more acres
- A condominium unit
- A house with a commercial establishment or medical office on the property

*If any of these, or if you rent your unit or this is a multi-family structure, skip H30 to H32 and turn to page 6.*

**H30. What were the real estate taxes on this property last year?**  
 \$ \_\_\_\_\_ 00 OR None

**H31. What is the annual premium for fire and hazard insurance on this property?**  
 \$ \_\_\_\_\_ 00 OR None

**H32a. Do you 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 page 6

**b. Do you have a second or junior mortgage on this property?**  
 Yes  No

**c. How much is your total regular monthly payment to the lender?**  
*Also include payments on a contract to purchase and to lenders holding second or junior mortgages on this property.*  
 \$ \_\_\_\_\_ 00 OR No regular payment required — Skip to page 6

**d. Does your regular monthly payment (amount entered in H32c) include payments for real estate taxes on this property?**  
 Yes, taxes included in payment   
 No, taxes paid separately or taxes not required

**e. Does your regular monthly payment (amount entered in H32c) include payments for fire and hazard insurance on this property?**  
 Yes, insurance included in payment  
 No, insurance paid separately or no insurance

**Please turn to page 6** →

FOR CENSUS USE ONLY

①	2	4	②	2	4	③	2	4
S.S.			S.S.			S.S.		
Yes			Yes			Yes		
No			No			No		
④	2	4	⑤	2	4	⑥	2	4
S.S.			S.S.			S.S.		
Yes			Yes			Yes		
No			No			No		
⑦	2	4	GQ	H30	H31	H32c		
S.S.								
Yes								
No								

**Name of Person 1 on page 2:** Last name First name Middle initial

11. In what State or foreign country was this person born? Print the State where this person's mother was living when this person was born. Do not give the location of the hospital unless the mother's home and the hospital were in the same State.

12. If this person was born in a foreign country — a. Is this person a naturalized citizen of the United States? b. When did this person come to the United States to stay?

13a. Does this person speak a language other than English at home? b. What is this language? c. How well does this person speak English?

14. What is this person's ancestry? If uncertain about how to report ancestry, see instruction guide.

15a. Did this person live in this house five years ago (April 1, 1975)? b. Where did this person live five years ago (April 1, 1975)?

16. When was this person born? c. Working at a job or business? 17. In April 1975 (five years ago) was this person — a. On active duty in the Armed Forces? b. Attending college? 18a. Is this person a veteran of active-duty military service in the Armed Forces of the United States? b. Was active-duty military service during — 19. Does this person have a physical, mental, or other health condition which has lasted for 6 or more months and which — a. Limits the kind or amount of work this person can do at a job? b. Prevents this person from working at a job? c. Limits or prevents this person from using public transportation? 20. If this person is a female — How many babies has she ever had, not counting stillbirths? Do not count her stepchildren or children she has adopted. 21. If this person has ever been married — a. Has this person been married more than once? b. Month and year of first marriage? c. If married more than once — Did the first marriage end because of the death of the husband (or wife)?

ANSWER THESE QUESTIONS FOR

22a. Did this person work at any time last week? b. How many hours did this person work last week (at all jobs)? 23. At what location did this person work last week? a. Address (Number and street) b. Name of city, town, village, borough, etc. c. Is the place of work inside the incorporated (legal) limits of that city, town, village, borough, etc.? d. County e. State f. ZIP Code 24a. Last week, how long did it usually take this person to get from home to work (one way)? b. How did this person usually get to work last week? FOR CENSUS USE ONLY

Per. No.	11	13b	14	15b	23	VL	24a
1	0	0	0	0	0	0	0
2	1	1	1	1	1	1	1
3	2	2	2	2	2	2	2
4	3	3	3	3	3	3	3
5	4	4	4	4	4	4	4
6	5	5	5	5	5	5	5
7	6	6	6	6	6	6	6
8	7	7	7	7	7	7	7
9	8	8	8	8	8	8	8
0	9	9	9	9	9	9	9

PERSON 1 ON PAGE 2

c. When going to work last week, did this person usually — d. How many people, including this person, usually rode to work in the car, truck, or van last week? 25. Was this person temporarily absent or on layoff from a job or business last week? 26a. Has this person been looking for work during the last 4 weeks? b. Could this person have taken a job last week? 27. When did this person last work, even for a few days? 28-30. Current or most recent job activity 28. Industry a. For whom did this person work? b. What kind of business or industry was this? c. Is this mainly — 29. Occupation a. What kind of business was this person doing? b. What were this person's most important activities or duties? 30. Was this person —

31a. Last year (1979), did this person work, even for a few days, at a paid job or in a business or farm? b. How many weeks did this person work in 1979? c. During the weeks worked in 1979, how many hours did this person usually work each week? d. Of the weeks not worked in 1979 (if any), how many weeks was this person looking for work or on layoff from a job? 32. Income in 1979 — a. Wages, salary, commissions, bonuses, or tips from all jobs b. Own nonfarm business, partnership, or professional practice c. Own farm d. Interest, dividends, royalties, or net rental income e. Social Security or Railroad Retirement f. Supplemental Security (SSI), Aid to Families with Dependent Children (AFDC), or other public assistance or public welfare payments g. Unemployment compensation, veterans' payments, pensions, alimony or child support, or any other sources of income received regularly 33. What was this person's total income in 1979?

NOTE: Questions 11-33 repeat on pages 8-19 of the questionnaire for other persons in the household.

Please turn to the next page and answer the questions for Person 2 on page 2

## Please Make Sure You Have Filled This Form Completely

<p>For persons who answered in Question 1 that they are staying here only temporarily and have a usual home elsewhere, enter the address of usual home here:</p>		
House number	Street or road	Apartment number or location
City	County	State
State		ZIP Code
<p><i>For Answers to Questions H1, H2, and H3:</i></p>		
<p><b>H1.</b> Name of person(s) left out and reason:</p>		
<p><b>H2.</b> Name of person(s) away from home and reason away:</p>		
<p><b>H3.</b> Name of visitor(s) for whom there is no one at the home address to report the person to a Census Taker:</p>		

### NOTE

If you have listed more than 7 persons in Question 1, please make sure that you have filled the form for the first 7 people. Then mail back this form. A Census Taker will call to obtain the information for the other people.

### 1 Check to be certain you have:

- Answered Question 1 on page 1.
- Answered Questions 2 through 10 for each person you listed at the top of pages 2 and 3.
- Answered Questions H1 through H32 on pages 3, 4, and 5.
- Filled a pair of pages for each person listed on pages 2 and 3. That is, pages 6 and 7 should be filled for the Person in column 1, pages 8 and 9 for the Person in column 2, etc.

*Please notice we need answers to questions 17 through 33 for every person born before April 1965 even though they may not seem to apply to the particular person.*

*For example, you may have forgotten to fill all the necessary circles on work or on income for a teenager going to school, or a retired person. To avoid our having to check with you to make sure of the answer, please be certain you have given all the necessary answers.*

### 2 Write here the name of the person who filled the form, the date the form was completed, and the telephone number on which the people in this household can be called.

Name

Date

Telephone Number

### 3 Then fold the form the way it was sent to you. Mail it back in the enclosed envelope. The address of the U.S. Census Office appears on the front cover of this questionnaire. Please be sure that before you seal the envelope the address shows through the window. No stamp is required.

*Thank you very much*