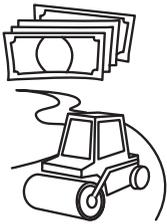




Template provided by the  
U.S. Census Bureau





1. How many people were living or staying in this house, apartment, or mobile home on April 1, 2020?

Number of people =

2. Were there any additional people staying here on April 1, 2020 that you **did not include** in Question 1?

Mark  all that apply.

- Children, related or unrelated, such as newborn babies, grandchildren, or foster children
- Relatives, such as adult children, cousins, or in-laws
- Nonrelatives, such as roommates or live-in babysitters
- People staying here temporarily
- No additional people

3. Is this house, apartment, or mobile home — Mark  ONE box.

- Owned by you or someone in this household with a mortgage or loan? *Include home equity loans.*
- Owned by you or someone in this household free and clear (without a mortgage or loan)?
- Rented?
- Occupied without payment of rent?

4. What is your telephone number?

*We will only contact you if needed for official Census Bureau business.*

Telephone Number

-  -

5. Please provide information for each person living here. If there is someone living here who pays the rent or owns this residence, start by listing him or her as Person 1. If the owner or the person who pays the rent does not live here, start by listing any adult living here as Person 1.

What is Person 1's name? *Print name below.*

First Name MI

--	--

Last Name(s)

--

--	--	--

6. What is Person 1's sex? Mark  ONE box.

Male  Female

7. What is Person 1's age and what is Person 1's date of birth? *For babies less than 1 year old, do not write the age in months. Write 0 as the age.*

Age on April 1, 2020 *Print numbers in boxes.* Month Day Year of birth

--	--	--	--	--	--	--	--	--	--

years

--	--	--	--	--	--	--	--	--

8. Is Person 1 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin – *Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.* ↴

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**9. What is Person 1's race?**

Mark  one or more boxes **AND** print origins.

White – Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc.

Black or African Am. – Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.

Chinese

Vietnamese

Native Hawaiian

Filipino

Korean

Samoan

Asian Indian

Japanese

Chamorro

Other Asian –  
Print, for example,  
Pakistani, Cambodian,  
Hmong, etc.

Other Pacific Islander –  
Print, for example,  
Tongan, Fijian,  
Marshallese, etc.

Some other race – Print race or origin.

**2. Does this person usually live or stay somewhere else?**

Mark  all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> No                             |   |
| <input type="checkbox"/> Yes, for college               | <input type="checkbox"/> Yes, with a parent or other relative   |
| <input type="checkbox"/> Yes, for a military assignment | <input type="checkbox"/> Yes, at a seasonal or second residence |
| <input type="checkbox"/> Yes, for a job or business     | <input type="checkbox"/> Yes, in a jail or prison               |
| <input type="checkbox"/> Yes, in a nursing home         | <input type="checkbox"/> Yes, for another reason                |

**3. How is this person related to Person 1?** Mark  ONE box.

- |   |  |
|---|--|
| <input type="checkbox"/> Opposite-sex husband/wife/spouse | <input type="checkbox"/> Father or mother              |
| <input type="checkbox"/> Opposite-sex unmarried partner   | <input type="checkbox"/> Grandchild                    |
| <input type="checkbox"/> Same-sex husband/wife/spouse     | <input type="checkbox"/> Parent-in-law                 |
| <input type="checkbox"/> Same-sex unmarried partner       | <input type="checkbox"/> Son-in-law or daughter-in-law |
| <input type="checkbox"/> Biological son or daughter       | <input type="checkbox"/> Other relative                |
| <input type="checkbox"/> Adopted son or daughter          | <input type="checkbox"/> Roommate or housemate         |
| <input type="checkbox"/> Stepson or stepdaughter          | <input type="checkbox"/> Foster child                  |
| <input type="checkbox"/> Brother or sister                | <input type="checkbox"/> Other nonrelative             |

Person 7

First Name

M

Last Name(s)

Sex  Male  Female

Age on April 1, 2020  years

Date of Birth  
 Month  Day  Year of birth

Related to Person 1?  Yes  No

