APPENDIX III. QUESTIONNAIRE AND FLASH CARDS

Questions on health insurance (Questions 31-33) were asked first and fourth quarters. Questions on X-ray visits (Questions 39-44, Table 12) were asked during second and third quarters. The remaining questions were asked for all four quarters of 1970.

NOTICE - All information which would permit identification of the individual will be held in strict confidence and will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to others for any purpose.

BUDGET BUREAU No. 60-R1600
APPROVAL EXPIRES MARCH 31, 1971

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<td>125</td>
<td>54</td>
<td>32</td>
<td>17</td>
<td>463</td>
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8. Street address (House No., Street, Apts. No., or other identification)

City: State: ZIP code: Line: No.: 9. Year built - If "Ask" box is "X"d, complete this item before the interview.

When was this structure originally built?

When was this structure originally built?

10. What is your mailing address? 

City: State: ZIP code: Description of sample unit (Room No., Bed No., etc.): Sample unit number: Type code: 

12. Type of living quarters

Housing unit: Other unit:

13. Ask:

- a. Are there any occupied or vacant living quarters besides your own in this building?

- b. Are there any occupied or vacant living quarters besides your own on this floor?

- c. Is there any other building on this property for people to live in - either occupied or vacant?

- d. None (Item L)

14. Do you own or rent this place? 

- Own (15a)

- Rent (15b)

- Rent free (15c)

15c. (Own or rent free) Does this place have 10 or more acres? 

- Yes (15e)

- No (16)

16. What type of heating system do you have? (Mark one type only)

- Steam or hot water system

- Central warm air furnace with ducts to individual rooms, or central heat pump

- Built-in electric units (permanently installed in wall, ceiling, or baseboard)

- Floor, wall, or pipeless furnace

- Circulating, radiant, or room heaters, WITH flue or vent, burning coal, wood, or kerosene

- Other (Describe)

17. Do you have air conditioning?

- Individual room unit

- Central air conditioning

18. What is the telephone number here? 

19. Was this interview observed? 

- Yes

- No

20. Interviewer's name: Code: 

21. Noninterview reason

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<tr>
<th>TYPE A</th>
<th>TYPE B</th>
<th>TYPE C</th>
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<tbody>
<tr>
<td>1. Refusal (Describe in a footnote)</td>
<td>1. Vacant - nonseasonal</td>
<td>1. Demolished</td>
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<tr>
<td>2. No one at home - repeated calls</td>
<td>2. Vacant - seasonal</td>
<td>2. In sample by mistake</td>
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<td>4. Other (Specify)</td>
<td>4. Armed Forces</td>
<td>4. Built after April 1, 1960</td>
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<tr>
<td>5. Other (Specify)</td>
<td>5. Other (Specify)</td>
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22. Record of calls at household

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Entire household

Begin Time: Ending Time: 

Footnotes