

APPENDIX III
QUESTIONNAIRE AND FLASH CARDS

O.M.B. No. 68-R1600; Approval Expires March 31, 1973

NOTICE - All information which would permit identification of the individual will be held in strict confidence, 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 purposes.

<p>FORM HIS-1 (1972) (10-9-71)</p> <p>U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS ACTING AS COLLECTING AGENT FOR THE U.S. PUBLIC HEALTH SERVICE</p> <p>U.S. HEALTH INTERVIEW SURVEY</p>	1. PSU	2a. Segment number	2b. Segment type AREA B P LSP	3. Serial number	4. Sample B -	5. D.C.C. number	6. I.D. code	7. Book ____ of ____ Books
<p>8. Street address (House No., Street, Apt. No., or other identification)</p> <p>-----</p> <p>City _____ State _____ ZIP code _____</p>				<p>Listing Sheet Sheet No. _____</p>	<p>9. Year built - If "Ask" box is "X"d, complete this item before starting the interview</p> <p><input type="checkbox"/> Ask <input type="checkbox"/> Do not ask</p> <p>When was this structure originally built?</p> <p><input type="checkbox"/> Before 4-1-60 (Continue interview) <input type="checkbox"/> After 4-1-60 (Go to Q. 13c, complete if required and end interview)</p>			
<p>10. What is your mailing address and ZIP code? <input type="checkbox"/> Same as 8</p> <p>-----</p> <p>City _____ State _____ ZIP-code _____</p>				<p>11. Special place name _____ Type _____</p>		<p>Description of sample unit (Room No., Bed No., etc.) _____ Sample unit number _____ Type code _____</p>		
<p>12. Type of living quarters ———→ 1 <input type="checkbox"/> Housing unit 2 <input type="checkbox"/> Other unit</p>						<p>Footnotes</p>		
<p>13. Ask:</p> <p><input type="checkbox"/> a. Are there any occupied or vacant living quarters besides your own in this building? Y (fill Table X) N</p> <p><input type="checkbox"/> b. Are there any occupied or vacant living quarters besides your own on this floor? Y (fill Table X) N</p> <p><input type="checkbox"/> c. Is there any other building on this property for people to live in - either occupied or vacant? Y (fill Table X) N</p> <p><input type="checkbox"/> d. None (item L)</p>								
<p>ITEM L 2 <input type="checkbox"/> Rural (14) 1 <input type="checkbox"/> All other (Q.1)</p>								
<p>14. Do you own or rent this place? <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Rent free</p>								
<p>15a. How many acres of land are included? 1 <input type="checkbox"/> 10 or more acres (b) 2 <input type="checkbox"/> Less than 10 acres (c)</p>								
<p>b. During the past 12 months did sales of crops, livestock, and other farm products from the place amount to \$50 or more? 2 Y (Q.1) 4 N (Q.1)</p>								
<p>c. During the past 12 months did sales of crops, livestock, and other farm products from the place amount to \$250 or more? 3 Y 5 N</p>								
<p>16. What is the telephone number here?</p> <p style="text-align: right;">2 <input type="checkbox"/> None</p>								
<p>17. Was this interview observed?</p> <p style="text-align: left;">1 Y 2 N</p>								
<p>18. Interviewer's name _____</p>				<p>Code _____</p>				

E		If this questionnaire is for an "EXTRA" unit in a B or NTA segment, enter →		Serial No. of original Sample Unit _____	Item No. by which found _____	If in NTA segment, also enter for FIRST unit listed on property →		LISTING SHEET			
		Sheet number	Line number								
TABLE X - LIVING QUARTERS DETERMINATIONS AT LISTED ADDRESS											
Line No.	LOCATION OF UNIT	If listed, enter sheet and line number and stop. If unlisted and: - B Segment, go to column 4 - Area Segment, go to column 5.	B SEGMENTS ONLY		OCCUPIED Do the occupants of these (specify location) quarters live and eat with any other group of people? (If "Yes," fill one line for each group)	USE OR CHARACTERISTICS			CLASSIFICATION	IF HU IN B SEGMENT ASK:	
	Where are these quarters located? <i>(Enter exact description or location, e.g., basement, 2nd floor, rear)</i> <i>(If outside Area Segment boundary, specify in notes, STOP Table X and continue with item 13 or L)</i>		INTERVIEWER: Are these quarters within the specific sample address shown in columns 2-4 of the B Segment list? <i>(If "Yes," continue Table X. If "No," STOP Table X and continue with item 13 or L)</i>	ALL QUARTERS Do these quarters in (specify location) have:		Direct access from the outside or through a common hall?	A kitchen or cooking equipment for exclusive use?	N - Not a separate unit, add occupants to this questionnaire. <i>(Complete a separate questionnaire for each unrelated person or family group.)</i> HU } Separate unit Ot } Interview on a separate questionnaire.		In what year were these quarters (specify location) created? <i>(If 1959 or 1960, specify "F" if first half, or "L" if last half.)</i>	<i>(If before July 1960)</i> What was the name of the household head of these quarters on April 1, 1960?
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
1		S ____ L ____	Y N	Y N	Y (9) N	Y N	Y N	N HU Ot			
2		S ____ L ____	Y N	Y N	Y (9) N	Y N	Y N	N HU Ot			
3		S ____ L ____	Y N	Y N	Y (9) N	Y N	Y N	N HU Ot			
NOTE: Be sure to continue interview with item 13 or L of the Household Page.											
FOOTNOTES											