

United States™  
**Census  
2010**

**CORRECTIONAL FACILITY CONTINUATION FORM  
GROUP QUARTERS VALIDATION**

PAGE

OF

CASE ID

OLQ NAME

LCO

AA

State

County

Block

Map Spot







*For Office Use Only*

<b>a. Let's talk about the ...</b>	<b>b. What is the name or designation of this building?</b>	<b>c. What is the maximum number of inmates who can live or stay here at this building?</b>	
<input type="text"/> building*	<input type="text"/>	<input type="text"/>	<b>Is there another building?</b>
<input type="text"/> building	<input type="text"/>	<input type="text"/>	<b>Yes → Go to "Question a" and ask about the next building</b>
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	<b>No → Return to Tab 4, Question 12, in the questionnaire</b>
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	

**\* Enter the next building number in the space provided.**  
If there are more buildings, please continue on the next page.



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<input type="text"/> building*	<input type="text"/>	<input type="text"/>	<p><b>Is there another building?</b></p> <p><b>Yes</b> → Go to "Question a" and ask about the next building</p> <p><b>No</b> → Return to Tab 4, Question 12, in the questionnaire</p>
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	
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<input type="text"/> building	<input type="text"/>	<input type="text"/>	
<input type="text"/> building	<input type="text"/>	<input type="text"/>	

**\* Enter the next building number in the space provided. If there are more buildings, please continue with another CF Continuation Form, D-351CF(GQV)**

