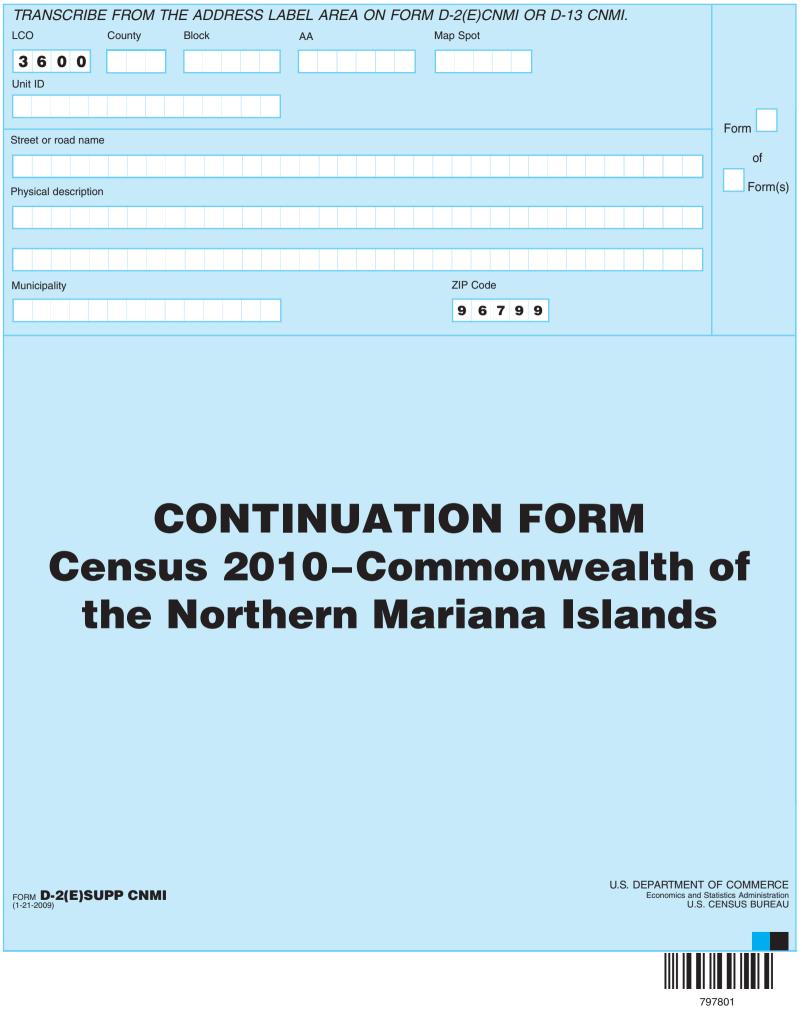
DRAFT #1 (1-21-2009)



2	ENUMERATOR NOTE:	For questions 2 through 5, prompt respondent with names if needed, for example, "Let's start with Bob	<i>."</i>
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 Let's make a list of all those people. Please start with the name of an owner or renter who was living here on April 1. Otherwise, start with any adult living here. 	 2. (Show Card B.) Please look at Card B. How is (Name) related to (Read name of Person 1)? Mark X ONE box. 	3. Is (Name) male or female? Mark X ONE box.
Person 6 First Name MI Last Name Image: Comparison of the second	X Person 1	MaleFemale
First Name MI Last Name Image: Comparison of the second se	 Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter Conter relative Roomer or boarder Housemate or roommate Unmarried partner Other nonrelative 	MaleFemale
Person 8 First Name MI Last Name	 Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter Cher relative Roomer or boarder Housemate or roommate Unmarried partner Other nonrelative 	MaleFemale
Person 9 First Name MI Last Name Image: Stress of the second seco	 Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter-in-law Other relative Roomer or boarder Housemate or roommate Unmarried partner Other nonrelative 	MaleFemale
First Name MI Last Name Image: Compare the second s	 Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law 	MaleFemale
ENUMERATOR NOTE: Refer to S5 on the cover. I members to Form D-2(E)SUPP CNMI, Continuation	f the number of people is more than 10, add additional househ n Form.	

What was (Name's) age on April 1, 2010? What is (Name's) date of birth? Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes.	5. What is (<i>Name's</i>) ethnic origin or race? <i>Read if necessary:</i> (For example: Chamorro, Samoan, White, Black, Carolinian, Filipino, Japanese, Korean, Palauan, Tongan, and so on.)
Age on April 1, 2010 DATE OF BIRTH Month Day Year of birth	
Age on April 1, 2010 DATE OF BIRTH Month Day Year of birth	
Age on April 1, 2010 DATE OF BIRTH Month Day Year of birth	
Age on April 1, 2010 DATE OF BIRTH Month Day Year of birth	
Age on April 1, 2010 DATE OF BIRTH Month Day Year of birth	
2(E)SUPP CNMI	

erson 6		
Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 1 from page 2. Print the name of Person 2.	b. 12.	Where was (your/'s) mother born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. Where was (your/'s) father born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. (Show Card E.) (Are you/Is) a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard or Armed Forces are rependent of an active-duty or retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve No At any time since February 1, 2010, (have you/has) attended school or college? Include only pre-kindergarten, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree. If "Yes," ASK – Was it public or private? No, has not attended since February 1 – SKIP to question 14 Yes, public school, public college Yes, public school, public college, home school
S)SUPP CNMI		
	Print the name of Person 1 from page 2. Iirst Name MI ast Name Iast Name Image: State St	Trint the name of Person 1 from page 2. 11a. irist Name MI ast Name Image: State of the united States or another Verse you/was) born? Print the name of the state of the united States? 12. Show Card C.) (Are you/Is) a CITIZEN or MATIONAL of the United States or another Verse, born in this Area - SKIP to question 11a Yes, born in the United States or another U.S. citizen by naturalization No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No, a du.S. citizen or national (permanent resident) No, not a U.S. citizen or national (permanent resident) No. not a U.S. citizen or national (permanent resident) Now dwith spouse or parent To attend school Med

(1-21-2009) Page 4 Solid black

14. (Show Card F.) What is the highest degree or level of school (you have/... has) COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest degree received.

NO SCHOOLING COMPLETED

No schooling completed

PRE-KINDERGARTEN THROUGH GRADE 12

- Pre-kindergarten
- Kindergarten
- Grade 1 through 11 Specify grade 1–11
- 12th grade NO DIPLOMA

HIGH SCHOOL GRADUATE

- Regular high school diploma
- GED or alternative credential

COLLEGE OR SOME COLLEGE

- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- 15. (Have you/Has ...) completed the requirements for a vocational training program at a trade school, business school, hospital, some other kind of school for occupational training, or place of work? Do not include academic college courses. If "Yes," ASK – Was training received in this area?
 - 🗌 No
 - Yes, in this Area
 - Yes, not in this Area

16a. (Do you/Does ...) speak a language other than English at home?

Yes

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No – SKIP to question 17a

b. What is this language?

(For ex	amnle	· Cha	morro	Sar	noan	Ca	rolin	ian	To	naan

- 16c. (Do you/Does ...) speak this language at home more frequently than English?
 - Yes, more frequently than English
 - Both equally often
 - No, less frequently than English
 - Does not speak English

17a. Did (you/...) live in this house or apartment 1 year ago (on April 1, 2009)?

- Person is under 1 year old SKIP to question 18
- Yes, this house *SKIP to question 18*
- No. different house

b. Where did (you/...) live 1 year ago?

What is the name of the island, U.S. state, commonwealth, territory, or foreign country? If outside this Area, print the answer below and SKIP to question 18.

с.	What	is	the	name	of	the	city.	town	or	village	2

	<i>ms a</i> Ins em	ura	nce		oug	ıh a	cu	CH rrer	nt oi	r foi	me		Ũ	No
b.	and Ins inst and	othe ura urai	er fa nce nce	pu cor	y m rcha npa	em ase iny	ber) d di (by	rec this	 tly f s pe	ron ersc	n ar on o	r		
c.	Me pec												. [
d.	Me gov with	ern	me	nt a	issi	star	nce	pla	n fo	or th			. [
e.	TR	ICA	RE	or	oth	er n	nilita	ary	hea	alth	car	е.	. [
f.	VA use			ling nrol									. [
g.	Loc	al ı	nec	dica	l pr	ogra	ams	s fo	r ind	dige	ents	; .	. [
h.	Any hea												I	



19a. (Are you/Is ...) deaf or (do you/does ...) have serious difficulty hearing?

Yes
No

6

- b. (Are you/Is ...) blind or (do you/does ...) have serious difficulty seeing even when wearing glasses?
 - Yes No

Ask questions 20a-20c if this person is 5 years old or over. Otherwise, SKIP to question 50.

20a. Because of a physical, mental, or emotional condition, (do you/does ...) have serious difficulty concentrating, remembering, or making decisions?

Yes

- No
- b. (Do you/Does ...) have serious difficulty walking or climbing stairs?
 - Yes
 - No
- c. (Do you/Does ...) have difficulty dressing or bathing?
 - Yes
 - No

Ask question 21 if this person is 15 years old or over. Otherwise, SKIP to question 50.

- 21. Because of a physical, mental, or emotional condition, (do you/does ...) have difficulty doing errands alone such as visiting a doctor's office or shopping?
 - Yes
 - No

22. What is (your/...'s) marital status?

- Now married
- Widowed
- Divorced
- Separated

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- Never married
- **23.** If this person is female, ASK **How many babies** (have you/has she) ever had, not counting stillbirths? Do not count stepchildren or children (you have/she has) adopted.

None	OR	Number of children

- Less than 6 months 6 to 11 months 1 or 2 years
- 3 or 4 years
- 5 or more years
- 25. (Show Card H.) (Have you/Has ...) ever served on active duty in the U.S. Armed Forces, military **Reserves, or National Guard? Active duty does** not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.

24a. (Do you/Does ...) have any of (your/his/her) own

house or apartment?

No – SKIP to question 25

No – SKIP to question 25

Yes

Yes

grandchildren under the age of 18 living in this

b. (Are you/Is ...) currently responsible for most of

C. How long (have you/has ...) been responsible for the(se) grandchild(ren)? If (you are/... is)

financially responsible for more than one

grandchild for whom (you have/... has) been

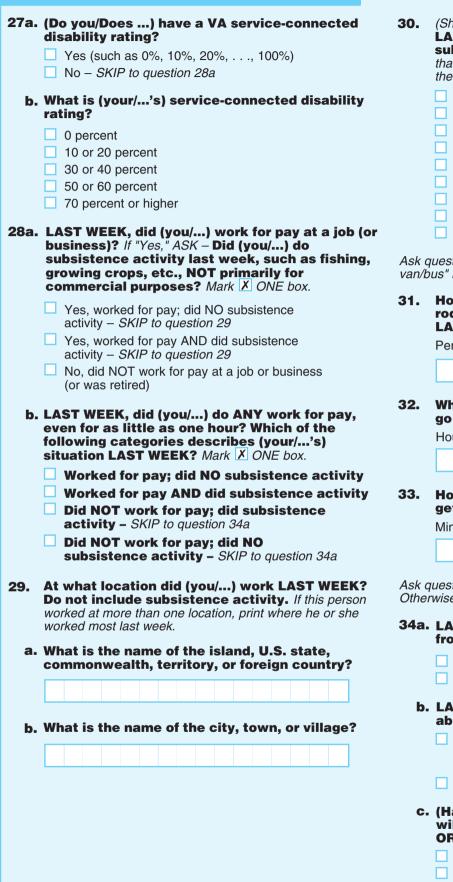
responsible for the longest period of time.

grandchild, answer the question for the

the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

- Yes, now on active duty
- Yes, on active duty during the last 12 months, but not now
- Yes, on active duty in the past, but not during the last 12 months
- No, training for Reserves or National Guard only - SKIP to question 27a
- No, never served in the military *SKIP to* question 28a
- 26. (Show Card I.) When did (you/...) serve on active duty in the U.S. Armed Forces? Mark X a box for EACH period in which this person served, even if just for part of the period. After each response, ASK - Any other time?
 - September 2001 or later
 - August 1990 to August 2001 (including Persian Gulf War)
 - September 1980 to July 1990
 - May 1975 to August 1980
 - Vietnam era (August 1964 to April 1975)
 - March 1961 to July 1964
 - February 1955 to February 1961
 - Korean War (July 1950 to January 1955)
 - January 1947 to June 1950
 - World War II (December 1941 to December 1946)
 - November 1941 or earlier





- (Show Card J.) How did (you/...) usually get to work LAST WEEK? Do not include transportation to subsistence activity. If this person usually used more than one method of transportation during the trip, mark X the box of the one used for most of the distance.
 - Car, truck, or private van/bus
 - Public van/bus
 - Boat
 - Taxicab
 - Motorcycle
 - Bicvcle
 - Walked
 - Worked at home SKIP to question 38

 - Other method

Ask question 31 if this person answered "Car, truck, or private van/bus" in question 30. Otherwise, SKIP to question 32.

How many people, including (yourself/...), usually rode to work in the car, truck, or private van/bus LAST WEEK?

Person(s)

- 32. What time did (you/...) usually leave home to go to work LAST WEEK?

Hour	Minute	е _
		_ ∐ a.m.
		🗕 🗌 p.m.

How many minutes did it usually take (you/...) to get from home to work LAST WEEK?

Minutes

Ask questions 34–37 if this person did NOT work last week. Otherwise, SKIP to question 38.

- 34a. LAST WEEK, (were you/was ...) on layoff from a job?
 - Yes SKIP to question 34c
 - No

b. LAST WEEK, (were you/was ...) TEMPORARILY absent from a job or business?

- Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. - SKIP to question 37
- No SKIP to question 35
- c. (Have you/Has ...) been informed that (you/he/she) will be recalled to work within the next 6 months OR been given a date to return to work?
 - Yes SKIP to question 36

No



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Person 6–Continued 35. During the LAST 4 WEEKS, (have you/has ...) 39. For whom did (you/...) work? been ACTIVELY looking for work? If now on active duty in the Armed Forces, mark X this box Yes and print the branch of the Armed Forces. No – SKIP to auestion 37 Name of company, business, or other employer 36. LAST WEEK, could (you/...) have started a job if offered one, or returned to work if recalled? If "No," ASK - Was this because of a temporary illness or for some other reason? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.) 37. When did (you/...) last work, even for a few 40. What kind of business or industry was this? days? Do not include subsistence activity. Describe the activity at the location where **employed.** (For example: hospital, fish cannery, 2010 watchmaker, auto repair shop, bank) 2009 2008 2005 to 2007 2000 to 2004 – *SKIP to question 47* 1999 or earlier – SKIP to question 47 Never worked; or did subsistence only – SKIP to question 47 **38–43. CURRENT OR MOST RECENT JOB** ACTIVITY **41.** Is this mainly – Mark X ONE box. Describe clearly (your/...'s) chief job activity or Manufacturing? business last week. If (you/...) had more than Wholesale trade? one job, describe the one at which (you/...) Retail trade? worked the most hours. If (you/...) had no job Other (agriculture, construction, service, or business last week, give information for (your/...'s) last job or business since 2005. government, etc.)? 42. What kind of work (were you/was ...) doing? **38.** (Show Card K.) (Were you/Was ...) – Mark X ONE box. (For example: registered nurse, machine repairer, An employee of a PRIVATE FOR-PROFIT watchmaker, secretary, accountant) company or business or of an individual, for wages, salary, or commissions? An employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization? A local or territorial GOVERNMENT employee (territorial/commonwealth, etc.)? A federal GOVERNMENT employee? SELF-EMPLOYED in own NOT **INCORPORATED** business, professional 43. What were (your/...'s) most important practice, or farm? activities or duties? (For example: patient care, repairing machinery, making watches, typing and SELF-EMPLOYED in own INCORPORATED filing, reconciling financial records) business, professional practice, or farm? Working WITHOUT PAY in family business or farm?



8



	LAST YEAR, 2009, did (you/) work at a job or business at any time? Do not include subsistence activity.	47b. Did (you/) receive any self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partneyships in 20092
	□ Yes	partnerships in 2009?
	□ No – SKIP to question 47	Yes – What was the NET income after busines expenses?
15a.	During 2009 (all 52 weeks), did (you/) work 50 or more weeks? Count paid time off as work.	Annual amount – <i>Dollars</i> Loss
	Do not include subsistence activity.	\$.00
	□ Yes – SKIP to question 46	
	No No	
b.	How many weeks DID (you/) work, even for a few hours, <u>including</u> paid vacation, paid sick leave, and military service? Do not include	c. Did (you/) receive any interest, dividends, net rental income, royalty income, or income from estates and trusts in 2009? Report even small amounts credited to an account.
	subsistence activity.	Yes – What was the amount?
	50 to 52 weeks	Annual amount – Dollars
	48 to 49 weeks	LOSS
	 ↓ 40 to 47 weeks ↓ 27 to 39 weeks 	\$00 🔲
	14 to 26 weeks	□ No
	13 weeks or less	d. Did (you/) receive any Social Security or
		Railroad Retirement in 2009?
I6 .	During 2009, in the WEEKS WORKED, how	Yes – What was the amount?
	many hours did (you/) usually work each WEEK? Do not include subsistence activity.	Annual amount – Dollars
	Usual hours worked each WEEK	
		\$,
		No
17.	The next set of questions is about each income source (you/) received during 2009. If the net income was a loss, please give the dollar amount of the loss. For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person (and mark X the "No" box for the other person). If the exact amount is not known, please give your best estimate. If net income is a loss, mark X the "Loss" box next to the	 e. Did (you/) receive any public assistance or welfare payments from the state or local welfare office, including Supplemental Security Income (SSI) in 2009? Yes - What was the amount? Annual amount - Dollars \$.00
	dollar amount.	□ No
a.	Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009?	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or 	f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security.
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? 	f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security.
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars
а.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars , .00
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? Annual amount - Dollars 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? Annual amount - Dollars \$, 00 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars \$,
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? Annual amount - Dollars \$, 00 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars \$,
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? Annual amount - Dollars \$, 00 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars \$,
a.	 Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes - What was the amount from all jobs before deductions for taxes, bonds, dues, or other items? Annual amount - Dollars \$, 00 	 f. Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security. Yes - What was the amount? Annual amount - Dollars \$,

rg.	Did (you/) receive any remittances in 2009? Include money from relatives outside the household or in the military.
	Yes – What was the amount?
	Annual amount – <i>Dollars</i>
	□ No
h.	Did (you/) receive any other sources of income regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
	Yes – What was the amount?
	Annual amount – Dollars
	\$.00
Instea amou	ot ask question 48 if questions 47a-47h are completed. ad, sum these entries and subtract any losses. Enter the int below. If the total amount was a loss, mark X the "Loss" ext to the dollar amount.
48.	What was (your/'s) total income during 2009?
	Annual amount – <i>Dollars</i> Loss
	During 2009, did (you/) GIVE or SEND
49.	money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate.
49.	of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known,
49.	of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate.
49.	of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate. Yes – What was the amount?



P	erson 7		
6.	Print the name of Person 2 from page 2. First Name MI	11a.	Where was (your/'s) mother born? Print the name of the island (village in American Samoa),
			U.S. state, commonwealth, territory, or foreign country.
	Last Name		
			Where was (your/'s) father born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country.
7.	Where (were you/was) born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country.	9	
		12.	(Show Card E.) (Are you/Is) a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time
8.	(Show Card C.) (Are you/Is) a CITIZEN or NATIONAL of the United States?		military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard.
	 Yes, born in this Area – SKIP to question 11a Yes, born in the United States or another U.S. territory or commonwealth 		 Yes, dependent of an active-duty member of the Armed Forces
	 Yes, born elsewhere of U.S. parent or parents 		Yes, dependent of retired member of the Armed
	Yes, a U.S. citizen by naturalization		Forces, or dependent of an active-duty or retired
	No, not a U.S. citizen or national (permanent resident)		member of full-time National Guard or Armed Forces Reserve
	No, not a U.S. citizen or national (temporary resident)		🗌 No
э.	When did (you/) come to this Area to stay? If (you have/ has) entered the Area more than once, what is the latest year? Print numbers in boxes. Year	13a.	At any time since February 1, 2010, (have you/has) attended school or college? Include only pre-kindergarten, kindergarten, elementar school, home school, and schooling which lead to a high school diploma or a college degree. <i>If</i> "Yes," ASK – Was it public or private?
10.	(Show Card D.) What was (your/'s) MAIN reason		No, has not attended since February 1 – SKIP to question 14
	for moving to this Area? Mark 🗴 ONE box.		Yes, public school, public college
	EmploymentMilitary		Yes, private school, private college, home school
	 Subsistence activities Missionary activities 	b.	What grade or level (were you/was) attending? <i>Mark X</i> ONE box.
	Moved with spouse or parent		Pre-kindergarten
	 To attend school Medical 		 Kindergarten Grade 1 through 12 –
	Housing		Specify grade 1–12
	□ Other		College undergraduate years (freshman to senior)
			Graduate or professional school beyond a bachelor's degree (for example, MA or PhD program or medical or law school)



14. (Show Card F.) What is the highest degree or level of school (you have/... has) COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest degree received.

NO SCHOOLING COMPLETED

No schooling completed

PRE-KINDERGARTEN THROUGH GRADE 12

- Pre-kindergarten
- Kindergarten
- Grade 1 through 11 –
- Specify grade 1-11 -
- 12th grade NO DIPLOMA

HIGH SCHOOL GRADUATE

- Regular high school diploma
- GED or alternative credential

COLLEGE OR SOME COLLEGE

- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- **15.** (Have you/Has ...) completed the requirements for a vocational training program at a trade school, business school, hospital, some other kind of school for occupational training, or place of work? Do not include academic college courses. If "Yes." ASK - Was training received in this area?

No

- Yes, in this Area
- Yes, not in this Area

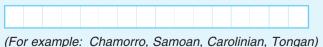
16a. (Do you/Does ...) speak a language other than English at home?

Yes

Form D-2(E)SUPP CNMI

No – SKIP to question 17a

b. What is this language?



- 16c. (Do you/Does ...) speak this language at home more frequently than English?
 - Yes, more frequently than English
 - Both equally often
 - No, less frequently than English
 - Does not speak English

17a. Did (you/...) live in this house or apartment 1 year ago (on April 1, 2009)?

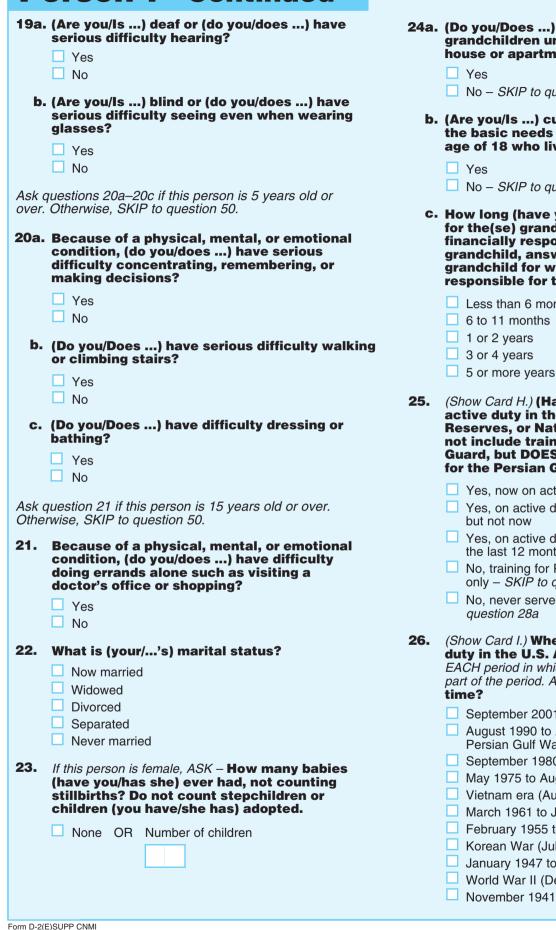
- Person is under 1 year old SKIP to guestion 18
- Yes, this house SKIP to question 18
- No, different house

b. Where did (you/...) live 1 year ago?

What is the name of the island, U.S. state, commonwealth, territory, or foreign country? If outside this Area, print the answer below and SKIP to question 18.

c. What is the name of the city, town, or village?

covered by any of the following types of health insurance or health coverage plans Mark "Yes" or "No" for EACH type of coverage in items a-h.a. Insurance through a current or former employer or union (of this person or another family member)Yes															
	 Insurance purchased directly from an insurance company (by this person or another family member) 														
с.	Me peo	ople									r, o 	r 			
d.		dica /ern n lo	me	nt a	issi	star	nce	pla	n fc	or th	10S(Э 			
е.	TR	ICA	RE	or	oth	er n	nilita	ary	hea	alth	car	е			
f.	VA use	(ind ed o													
g.	Lo	cal i	nec	lica	l pr	ogra	ams	s fo	r ind	dige	ents	;.	•		
h.	An hea	y ot alth										-			



24a. (Do you/Does ...) have any of (your/his/her) own grandchildren under the age of 18 living in this house or apartment?

No – SKIP to question 25

b. (Are you/Is ...) currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

No – SKIP to question 25

- c. How long (have you/has ...) been responsible for the(se) grandchild(ren)? If (you are/... is) financially responsible for more than one grandchild, answer the question for the grandchild for whom (you have/... has) been responsible for the longest period of time.
 - Less than 6 months
 - 6 to 11 months
- 25. (Show Card H.) (Have you/Has ...) ever served on active duty in the U.S. Armed Forces, military **Reserves, or National Guard? Active duty does** not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
 - Yes, now on active duty
 - Yes, on active duty during the last 12 months,
 - Yes, on active duty in the past, but not during the last 12 months
 - No, training for Reserves or National Guard only - SKIP to question 27a
 - No, never served in the military SKIP to
- (Show Card I.) When did (you/...) serve on active duty in the U.S. Armed Forces? Mark X a box for EACH period in which this person served, even if just for part of the period. After each response, ASK - Any other
 - September 2001 or later
 - August 1990 to August 2001 (including Persian Gulf War)
 - September 1980 to July 1990
 - May 1975 to August 1980
 - Vietnam era (August 1964 to April 1975)
 - March 1961 to July 1964
 - E February 1955 to February 1961
 - Korean War (July 1950 to January 1955)
 - January 1947 to June 1950
 - World War II (December 1941 to December 1946)
 - November 1941 or earlier



14

	(Do you/Does) have a VA service-connected	30.	
	disability rating? Yes (such as 0%, 10%, 20%,, 100%) 		
	□ No – SKIP to question 28a		
b.	, What is (your/'s) service-connected disability rating?		
	 10 or 20 percent 30 or 40 percent 		
	50 or 60 percent		
	70 percent or higher		
8a.	LAST WEEK, did (you/) work for pay at a job (or business)? If "Yes," ASK – Did (you/) do	r	
	subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? <i>Mark</i> X ONE box.	Ask van/l	
	Yes, worked for pay; did NO subsistence	31.	
	activity – SKIP to question 29		
	Yes, worked for pay AND did subsistence activity – SKIP to question 29		
	 No, did NOT work for pay at a job or business (or was retired) 		
b.	. LAST WEEK, did (you/) do ANY work for pay,	32.	
	even for as little as one hour? Which of the following categories describes (your/'s)		
	ALL ACT WEEKS Mark X ONE have		
	situation LAST WEEK? Mark X ONE box.		
	U Worked for pay; did NO subsistence activity	33	
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence 	33.	
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a 	33.	
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence 	33.	
9.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person 	33. Ask Othe	
9.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? 	Ask	, Pr
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she 	Ask Othe	, Pr
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - <i>SKIP to question 34a</i> Did NOT work for pay; did NO subsistence activity - <i>SKIP to question 34a</i> At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. 	Ask Othe	, Pr
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, 	Ask Othe 34a	
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe	er I
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, 	Ask Othe 34a	er I
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe 34a	er I
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe 34a	er I
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe 34a	
a.	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe 34a b	
	 Worked for pay; did NO subsistence activity Worked for pay AND did subsistence activity Did NOT work for pay; did subsistence activity - SKIP to question 34a Did NOT work for pay; did NO subsistence activity - SKIP to question 34a At what location did (you/) work LAST WEEK? Do not include subsistence activity. If this person worked at more than one location, print where he or she worked most last week. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? 	Ask Othe 34a b	

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ow Card J.) How did (you/...) usually get to work ST WEEK? Do not include transportation to sistence activity. If this person usually used more one method of transportation during the trip, mark 🗴 box of the one used for most of the distance.

- Car, truck, or private van/bus
- Public van/bus
- Boat
- Taxicab
- **Motorcycle**
- Bicycle
- Nalked
- Norked at home SKIP to question 38
- Other method

ion 31 if this person answered "Car, truck, or private n question 30. Otherwise, SKIP to question 32.

w many people, including (yourself/...), usually e to work in the car, truck, or private van/bus ST WEEK?

Per	son	(s)

at time did (you/...) usually leave home to to work LAST WEEK?

Hour		Minute	_	
	1.			a.m
			- F	p.m

w many minutes did it usually take (you/...) to from home to work LAST WEEK?

utes

ions 34–37 if this person did NOT work last week. SKIP to question 38.

ST WEEK, (were you/was ...) on layoff m a job?

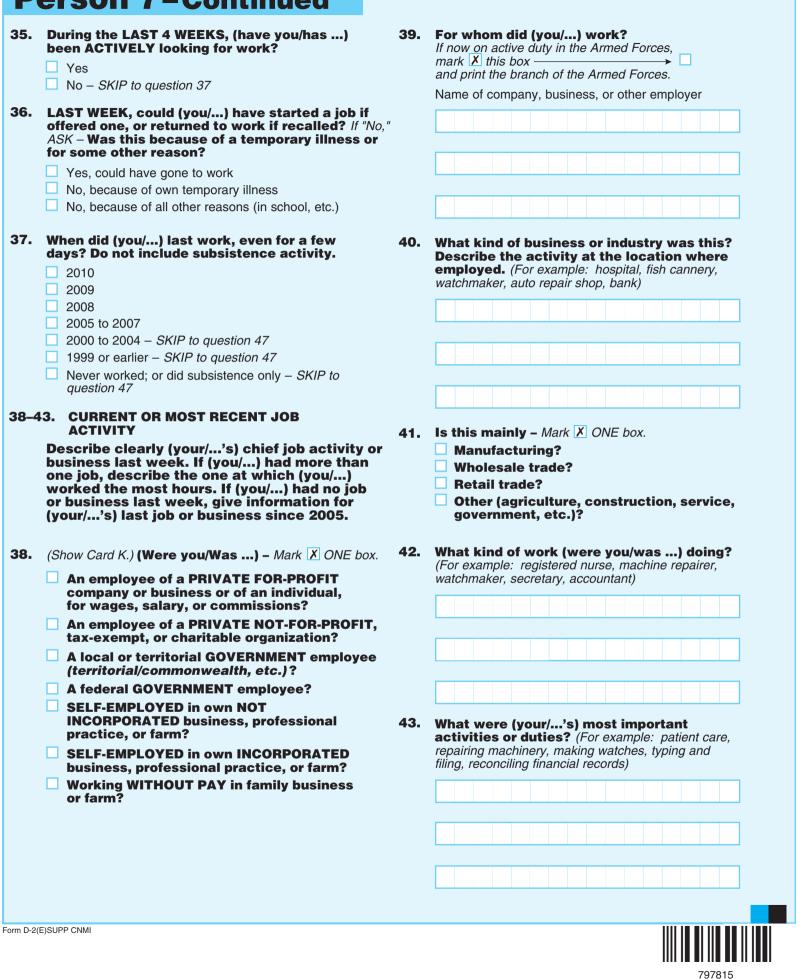
- Yes SKIP to question 34c
- No

ST WEEK, (were you/was ...) TEMPORARILY sent from a job or business?

- Yes, on vacation, temporary illness, maternity eave, other family/personal reasons, bad weather, etc. – SKIP to question 37
- No SKIP to question 35
- ve you/Has ...) been informed that (you/he/she) I be recalled to work within the next 6 months been given a date to return to work?
 - Yes SKIP to question 36

No





16			
P	erson 7-Continued		
44.	LAST YEAR, 2009, did (you/) work at a job or business at any time? Do not include subsistence activity.	47b.	Did (you/) receive any self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships in 2009?
	\square No – SKIP to question 47		Yes – What was the NET income after business expenses?
45a.	During 2009 (all 52 weeks), did (you/) work 50 or more weeks? Count paid time off as work. Do not include subsistence activity.		Annual amount – <i>Dollars</i> Loss
	 Yes – SKIP to question 46 No 		▶ .00 □ No
b.	How many weeks DID (you/) work, even for a few hours, <u>including</u> paid vacation, paid sick leave, and military service? Do not include subsistence activity.	с.	Did (you/) receive any interest, dividends, net rental income, royalty income, or income from estates and trusts in 2009? Report even small amounts credited to an account.
	_		Yes – What was the amount?
	50 to 52 weeks		Annual amount – <i>Dollars</i> Loss
	 48 to 49 weeks 40 to 47 weeks 		
	27 to 39 weeks		\$00
	\square 14 to 26 weeks		No No
	□ 13 weeks or less	d.	Did (you/) receive any Social Security or Railroad Retirement in 2009?
46.	During 2009, in the WEEKS WORKED, how		Yes – What was the amount?
	many hours did (you/) usually work each WEEK? Do not include subsistence activity.		Annual amount – <i>Dollars</i>
	Usual hours worked each WEEK		¢ 00
			\$.00
			No
47.	The next set of questions is about each income source (you/) received during 2009. If the net income was a loss, please give the dollar amount of the loss. For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person (and mark X the "No" box for the other person). If the exact amount is not known, please give your best estimate. If net income is a loss, mark X the "Loss" box next to the dollar amount.	e.	Did (you/) receive any public assistance or welfare payments from the state or local welfare office, including Supplemental Security Income (SSI) in 2009? Yes - What was the amount? Annual amount - Dollars \$
a.	Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009?	f.	Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security.
	Yes – What was the amount from all jobs before deductions for taxes, bonds, dues, or other items?		Yes – What was the amount?
	Annual amount – <i>Dollars</i>		Annual amount – <i>Dollars</i>
			\$
	\$00		No
	🗆 No		
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' gi	Did (you/) receive any remittances in 2009? Include money from relatives outside the household or in the military.
	Yes – What was the amount?
	Annual amount – Dollars
	\$.00
	□ No
h.	Did (you/) receive any other sources of income regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
	Yes – What was the amount?
	Annual amount – Dollars
	\$.00
nstea amou	ot ask question 48 if questions 47a-47h are completed. ad, sum these entries and subtract any losses. Enter the int below. If the total amount was a loss, mark \overline{X} the "Loss" ext to the dollar amount.
48.	What was (your/'s) total income during 2009?
	Annual amount – Dollars Loss
	□ None OR \$
19.	During 2009, did (you/) GIVE or SEND money TO relatives or friends living outside of this Area? Do not include charitable
	contributions or money given to charitable organizations. If exact amount is not known, please give best estimate.
	organizations. If exact amount is not known,
	organizations. If exact amount is not known, please give best estimate.
	 organizations. If exact amount is not known, please give best estimate. Yes - What was the amount? Annual amount - Dollars
	organizations. If exact amount is not known, please give best estimate.

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Person 8	
Print the name of Person 3 from page 2. First Name MI Last Name Last Name Where (were you/was) born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. (Show Card C.) (Are you/Is) a CITIZEN or NATIONAL of the United States? Yes, born in this Area – SKIP to question 11a Yes, born in the United States or another U.S. territory or commonwealth Yes, born in the United States or another U.S. territory or commonwealth Yes, born elsewhere of U.S. parent or parents	 11a. Where was (your/'s) mother born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. b. Where was (your/'s) father born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. 12. (Show Card E.) (Are you/Is) a dependent of an active-duty or retired Member of the full-time military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces Yes, dependent of retired member of the Armed Forces or dependent of an active-duty or retired member of the Armed Forces
 Yes, a U.S. citizen by naturalization No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (temporary resident) When did (you/) come to this Area to stay? If (you have/ has) entered the Area more than once, what is the latest year? Print numbers in boxes. Year 	 Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve No 13a. At any time since February 1, 2010, (have you/has) attended school or college? Includ only pre-kindergarten, kindergarten, elementa school, home school, and schooling which lead to a high school diploma or a college degree. /
 D. (Show Card D.) What was (your/'s) MAIN reason for moving to this Area? Mark I ONE box. Employment Military Subsistence activities 	 "Yes," ASK - Was it public or private? No, has not attended since February 1 - SKIP to question 14 Yes, public school, public college Yes, private school, private college, home school b. What grade or level (were you/was)
 Missionary activities Moved with spouse or parent To attend school Medical Housing Other 	 attending? Mark X ONE box. Pre-kindergarten Kindergarten Grade 1 through 12 - Specify grade 1-12 College undergraduate years (freshman to senior) Graduate or professional school beyond a bachelor's degree (for example, MA or PhD program or medical or law school)
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14. (Show Card F.) What is the highest degree or level of school (you have/... has) COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest degree received.

NO SCHOOLING COMPLETED

No schooling completed

PRE-KINDERGARTEN THROUGH GRADE 12

- Pre-kindergarten
- Kindergarten
- Grade 1 through 11 Specify grade 1–11
- 12th grade NO DIPLOMA

HIGH SCHOOL GRADUATE

- Regular high school diploma
- GED or alternative credential

COLLEGE OR SOME COLLEGE

- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- 15. (Have you/Has ...) completed the requirements for a vocational training program at a trade school, business school, hospital, some other kind of school for occupational training, or place of work? Do not include academic college courses. *If "Yes," ASK –* Was training received in this area?

No

- Yes, in this Area
- Yes, not in this Area

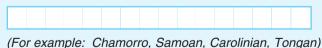
16a. (Do you/Does ...) speak a language other than English at home?



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No – SKIP to question 17a

b. What is this language?



- 16c. (Do you/Does ...) speak this language at home more frequently than English?
 - Yes, more frequently than English
 - Both equally often
 - No, less frequently than English
 - Does not speak English

17a. Did (you/...) live in this house or apartment 1 year ago (on April 1, 2009)?

- Person is under 1 year old SKIP to question 18
- Yes, this house SKIP to question 18
- No, different house

b. Where did (you/...) live 1 year ago?

What is the name of the island, U.S. state, commonwealth, territory, or foreign country? If outside this Area, print the answer below and SKIP to question 18.

c. What is the name of the city, town, or village?

18.	(Show Card G.) (Are you/Is) CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a-h. Yes No															
	a.	em	Insurance through a current or former employer or union (of this person or another family member)													
	b.		urai urar othe	nce	cor	npa	any	(by	this							
	c.	Me pec										r, o	r 			
	d.	 people with certain disabilities Medicaid or any kind of federal government assistance plan for those with low incomes or a disability 														
	е.	TR	ICA	RE	or	oth	er n	nilita	ary	hea	alth	car	е			
	f.	VA use	(ind ed o													
	g.	Loc	cal r	nec	lica	l pr	ogra	ams	s fo	r in	dige	ents	;.			
	h.	Any hea	y ot alth										r			
	Γ															
	Г															
									·							
														11		

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- **19a. (Are you/Is ...) deaf or (do you/does ...) have** serious difficulty hearing?
 - Yes

20

- b. (Are you/Is ...) blind or (do you/does ...) have serious difficulty seeing even when wearing glasses?
 - Yes
 No

Ask questions 20a–20c if this person is 5 years old or over. Otherwise, SKIP to question 50.

- 20a. Because of a physical, mental, or emotional condition, (do you/does ...) have serious difficulty concentrating, remembering, or making decisions?
 - Yes
 - No
 - b. (Do you/Does ...) have serious difficulty walking or climbing stairs?
 - Yes
 - No
 - c. (Do you/Does ...) have difficulty dressing or bathing?
 - Yes
 - 🗌 No

Ask question 21 if this person is 15 years old or over. Otherwise, SKIP to question 50.

- 21. Because of a physical, mental, or emotional condition, (do you/does ...) have difficulty doing errands alone such as visiting a doctor's office or shopping?
 - Yes
 - No

22. What is (your/...'s) marital status?

- Now married
- Widowed
- Divorced
- Separated

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- Never married
- 23. If this person is female, ASK How many babies (have you/has she) ever had, not counting stillbirths? Do not count stepchildren or children (you have/she has) adopted.

l	None	OR	Number of children

Dama 00 Calid block

24a. (Do you/Does ...) have any of (your/his/her) own grandchildren under the age of 18 living in this house or apartment?

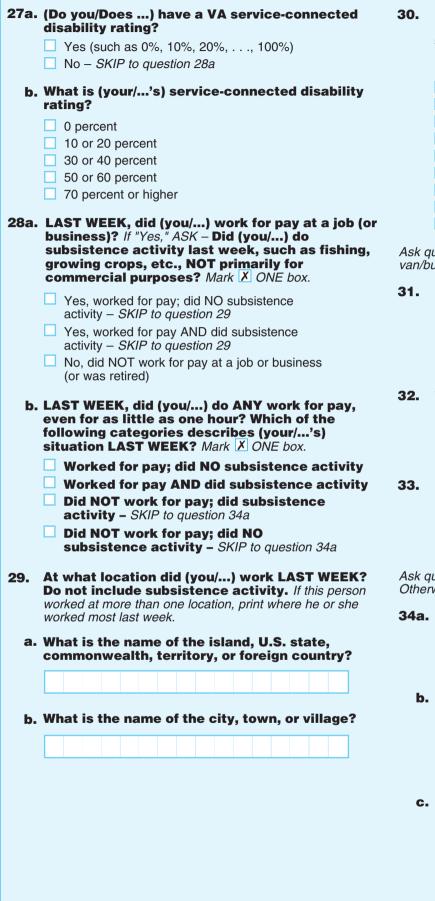
Yes

No – SKIP to question 25

b. (Are you/Is ...) currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

Yes

- No SKIP to question 25
- C. How long (have you/has ...) been responsible for the(se) grandchild(ren)? If (you are/... is) financially responsible for more than one grandchild, answer the question for the grandchild for whom (you have/... has) been responsible for the longest period of time.
 - Less than 6 months
 - 6 to 11 months
 - 1 or 2 years
 - 3 or 4 years
 - 5 or more years
- 25. (Show Card H.) (Have you/Has ...) ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
 - Yes, now on active duty
 - Yes, on active duty during the last 12 months, but not now
 - Yes, on active duty in the past, but not during the last 12 months
 - No, training for Reserves or National Guard only – SKIP to question 27a
 - □ No, never served in the military *SKIP to question 28a*
- 26. (Show Card I.) When did (you/...) serve on active duty in the U.S. Armed Forces? Mark ✗ a box for EACH period in which this person served, even if just for part of the period. After each response, ASK Any other time?
 - September 2001 or later
 - August 1990 to August 2001 (including Persian Gulf War)
 - September 1980 to July 1990
 - May 1975 to August 1980
 - Vietnam era (August 1964 to April 1975)
 - March 1961 to July 1964
 - February 1955 to February 1961
 - Korean War (July 1950 to January 1955)
 - January 1947 to June 1950
 - World War II (December 1941 to December 1946)
 - November 1941 or earlier



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30. (Show Card J.) **How did (you/...) usually get to work LAST WEEK? Do not include transportation to subsistence activity.** If this person usually used more than one method of transportation during the trip, mark X the box of the one used for most of the distance.

- Car, truck, or private van/bus
 - Public van/bus
- Boat
- Taxicab
- Motorcycle
- Bicvcle
- Walked
- Worked at home SKIP to question 38
- Other method

Ask question 31 if this person answered "Car, truck, or private van/bus" in question 30. Otherwise, SKIP to question 32.

31. How many people, including (yourself/...), usually rode to work in the car, truck, or private van/bus LAST WEEK?

Person(s)

32. What time did (you/...) usually leave home to go to work LAST WEEK?

Hour	Minute	_
		🔲 a.m
		🗌 p.m

33. How many minutes did it usually take (you/...) to get from home to work LAST WEEK?

Minutes

Ask questions 34–37 if this person did NOT work last week. Otherwise, SKIP to question 38.

- 34a. LAST WEEK, (were you/was ...) on layoff from a job?
 - Yes SKIP to question 34c
 - 🗌 No

b. LAST WEEK, (were you/was ...) TEMPORARILY absent from a job or business?

- Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. – SKIP to question 37
- □ No SKIP to question 35
- c. (Have you/Has ...) been informed that (you/he/she) will be recalled to work within the next 6 months OR been given a date to return to work?
 - Yes SKIP to question 36
 - No



22 **Person 8–Continued** 35. During the LAST 4 WEEKS, (have you/has ...) 39. For whom did (you/...) work? been ACTIVELY looking for work? If now on active duty in the Armed Forces, mark X this box Yes and print the branch of the Armed Forces. No – SKIP to auestion 37 Name of company, business, or other employer 36. LAST WEEK, could (you/...) have started a job if offered one, or returned to work if recalled? If "No," ASK - Was this because of a temporary illness or for some other reason? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.) 37. When did (you/...) last work, even for a few 40. What kind of business or industry was this? days? Do not include subsistence activity. Describe the activity at the location where **employed.** (For example: hospital, fish cannery, 2010 watchmaker, auto repair shop, bank) 2009 2008 2005 to 2007 2000 to 2004 – SKIP to question 47 1999 or earlier – SKIP to question 47 Never worked; or did subsistence only – SKIP to question 47 **38–43. CURRENT OR MOST RECENT JOB** ACTIVITY **41.** Is this mainly – Mark X ONE box. Describe clearly (your/...'s) chief job activity or **Manufacturing?** business last week. If (you/...) had more than Wholesale trade? one job, describe the one at which (you/...) Retail trade? worked the most hours. If (you/...) had no job Other (agriculture, construction, service, or business last week, give information for (your/...'s) last job or business since 2005. government, etc.)? 42. What kind of work (were you/was ...) doing? **38.** (Show Card K.) (Were you/Was ...) – Mark X ONE box. (For example: registered nurse, machine repairer, An employee of a PRIVATE FOR-PROFIT watchmaker, secretary, accountant) company or business or of an individual, for wages, salary, or commissions? An employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization? A local or territorial GOVERNMENT employee (territorial/commonwealth, etc.)? A federal GOVERNMENT employee? SELF-EMPLOYED in own NOT **INCORPORATED** business, professional 43. What were (your/...'s) most important practice, or farm? activities or duties? (For example: patient care, repairing machinery, making watches, typing and SELF-EMPLOYED in own INCORPORATED filing, reconciling financial records) business, professional practice, or farm? Working WITHOUT PAY in family business or farm? Form D-2(E)SUPP CNMI

Did (you/) receive any self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships in 2009?										
Yes - What was the NET income after business expenses?										
Annual amount – Dollars Loss										
\$.00										
□ No										
Did (you/) receive any interest, dividends, net rental income, royalty income, or income from estates and trusts in 2009? Report even small amounts credited to an account.										
Yes – What was the amount?										
Annual amount – <i>Dollars</i> Loss										
\$00 □										
□ No										
Did (you/) receive any Social Security or Railroad Retirement in 2009? Yes – What was the amount? Annual amount – <i>Dollars</i>										
Annual amount – Donars										
\$00										
□ No										
Did (you/) receive any public assistance or welfare payments from the state or local welfare office, including Supplemental Security Income (SSI) in 2009?										
Yes – What was the amount?										
Annual amount – Dollars										
\$.00										
□ No										
Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security.										
Yes – What was the amount?										
Annual amount – Dollars										
\$.00										
□ No										

44.	LAST YEAR, 2009, did (you/) work at a job or business at any time? Do not include subsistence activity.	47b.	Did (you/) recei income from own businesses, inclu partnerships in 2
	\square No – SKIP to question 47		Yes – What wa expense
45a.	During 2009 (all 52 weeks), did (you/) work 50 or more weeks? Count paid time off as work.		Annu
	Do not include subsistence activity.		\$
	 Yes – SKIP to question 46 No 		□ No
b.	How many weeks DID (you/) work, even for a few hours, <u>including</u> paid vacation, paid sick leave, and military service? Do not include subsistence activity.	C.	Did (you/) received rental income, restates and trust amounts credited
	_		Yes – What wa
	50 to 52 weeks 48 to 49 weeks		Annu
	40 to 47 weeks		•
	27 to 39 weeks		⊅
	□ 14 to 26 weeks		No No
	□ 13 weeks or less	d.	Did (you/) recei Railroad Retirem
46.	During 2009, in the WEEKS WORKED, how many hours did (you/) usually work each WEEK? Do not include subsistence activity.		Yes – What wa
	Usual hours worked each WEEK		7 (1110
			\$
			🔲 No
47.	The next set of questions is about each income source (you/) received during 2009. If the net income was a loss, please give the dollar amount of the loss. For income received jointly,	e.	Did (you/) recei welfare payment office, including (SSI) in 2009?
	report, if possible, the appropriate share for each person; otherwise, report the whole		Yes – What wa
	amount for only one person (and mark 🗴 the "No"		Annu
	box for the other person). If the exact amount is not known, please give your best estimate. If		.
	net income is a loss, mark X the "Loss" box next to the dollar amount.		\$ □ No
a.	Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009?		Did (you/) recei disability pension Social Security.
	Yes – What was the amount from all jobs before deductions for taxes, bonds, dues, or		Ves – What wa
	other items?		Annu
	Annual amount – Dollars		e
	\$.00		⊅
	□ No		No No

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h.	 Yes - What was the amount? Annual amount - Dollars \$
h.	 No Did (you/) receive any other sources of income regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home. Yes – What was the amount?
h.	 No Did (you/) receive any other sources of income regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home. Yes – What was the amount?
h.	 Did (you/) receive any other sources of income regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home. Yes – What was the amount?
h.	regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
	Annual amount – Dollars
	\$
Instea amoui	t ask question 48 if questions 47a-47h are completed. d, sum these entries and subtract any losses. Enter the nt below. If the total amount was a loss, mark X the "Loss" ext to the amount.
48.	What was (your/'s) total income during 2009?
	Annual amount – <i>Dollars</i> Loss
	□ None OR ^{\$}
49.	During 2009, did (you/) GIVE or SEND money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate.
	Yes – What was the amount?
	Annual amount – <i>Dollars</i>
	\$00
	No No
50.	Refer to S5 on form D-2(E)CNMI. If the number of people is more than eight, continue on the next page. If not, SKIP to the "Respondent Information" block on



the name of Person 4 from page 2. Name Name Are (were you/was) born? Prind d (village in American Samoa), U.S. s nonwealth, territory, or foreign country W Card C.) (Are you/Is) a CITIZ TONAL of the United States? es, born in this Area – SKIP to questi es, born in the United States or anoth .S. territory or commonwealth es, born elsewhere of U.S. parent or p es, a U.S. citizen or national (perm o, not a U.S. citizen or national (temp en did (you/) come to this Area e, what is the latest year? numbers in boxes.	state, y. ZEN or ion 11a her parents hanent resident) porary resident) a to stay? If	b. 12.	 active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Force Reserve No At any time since February 1, 2010, (have
ere (were you/was) born? Prin d (village in American Samoa), U.S. s monwealth, territory, or foreign country w Card C.) (Are you/Is) a CITIZ TONAL of the United States? es, born in this Area – SKIP to questi es, born in the United States or anoth .S. territory or commonwealth es, born elsewhere of U.S. parent or p es, a U.S. citizen by naturalization o, not a U.S. citizen or national (perm o, not a U.S. citizen or national (temp en did (you/) come to this Area e, what is the latest year?	state, y. ZEN or ion 11a her parents hanent resident) porary resident) a to stay? If	e 12.	 name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country. (Show Card E.) (Are you/Is) a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces. Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve No At any time since February 1, 2010, (have
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TONAL of the United States? es, born in this Area – <i>SKIP to questi</i> es, born in the United States or anoth .S. territory or commonwealth es, born elsewhere of U.S. parent or p es, a U.S. citizen by naturalization o, not a U.S. citizen or national (perm o, not a U.S. citizen or national (temp en did (you/) come to this Area have/ has) entered the Area e, what is the latest year?	ion 11a ner parents nanent resident) porary resident) a to stay? If		 active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard? Active duty does NOT include training for the military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve No At any time since February 1, 2010, (have
es, born in this Area – <i>SKIP to questi</i> es, born in the United States or anoth .S. territory or commonwealth es, born elsewhere of U.S. parent or p es, a U.S. citizen by naturalization o, not a U.S. citizen or national (perm o, not a U.S. citizen or national (temp en did (you/) come to this Area have/ has) entered the Area e, what is the latest year?	ner parents nanent resident) porary resident) a to stay? If	13a.	 military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Force Reserve No At any time since February 1, 2010, (have
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es, born elsewhere of U.S. parent or p es, a U.S. citizen by naturalization o, not a U.S. citizen or national (perm o, not a U.S. citizen or national (temp en did (you/) come to this Area have/ has) entered the Area e, what is the latest year?	nanent resident) porary resident) a to stay? If	13a.	 Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Force Reserve No At any time since February 1, 2010, (have
es, a U.S. citizen by naturalization o, not a U.S. citizen or national (perm o, not a U.S. citizen or national (temp on did (you/) come to this Area have/ has) entered the Area e, what is the latest year?	nanent resident) porary resident) a to stay? If	13a.	 member of full-time National Guard or Armed Force Reserve No At any time since February 1, 2010, (have
o, not a U.S. citizen or national (temp n did (you/) come to this Area have/ has) entered the Area e, what is the latest year?	borary resident)	13a.	Reserve No At any time since February 1, 2010, (have
have/ has) entered the Area e, what is the latest year?	a to stay? If more than	13a.	
			you/has) attended school or college? Inclu only pre-kindergarten, kindergarten, element school, home school, and schooling which le to a high school diploma or a college degree. "Yes," ASK – Was it public or private?
w Card D.) What was (your/'s) N	MAIN reason		○ No, has not attended since February 1 – SKIP to question 14
noving to this Area? Mark 🗴 ON	IE box.		Yes, public school, public college
			Yes, private school, private college, home school
		b.	What grade or level (were you/was) attending? Mark X ONE box.
-			Pre-kindergarten
			Kindergarten
			Grade 1 through 12 -
			Specify grade 1–12 College undergraduate years (freshman to senior)
			 Graduate or professional school beyond a bachelor's degree (for example, MA or PhD program or medical or law school)
	w Card D.) What was (your/'s) I noving to this Area? Mark X ON imployment fulitary subsistence activities Moved with spouse or parent fo attend school fedical lousing Other	Ailitary Subsistence activities Aissionary activities Aoved with spouse or parent To attend school Aedical Iousing	moving to this Area? Mark I ONE box. Employment Military Subsistence activities Missionary activities Moved with spouse or parent To attend school Medical Iousing

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14. (Show Card F.) What is the highest degree or level of school (you have/... has) COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest degree received.

NO SCHOOLING COMPLETED

No schooling completed

PRE-KINDERGARTEN THROUGH GRADE 12

- Pre-kindergarten
- Kindergarten
- Grade 1 through 11 -
- Specify grade 1–11 —
- 12th grade NO DIPLOMA

HIGH SCHOOL GRADUATE

- Regular high school diploma
- GED or alternative credential

COLLEGE OR SOME COLLEGE

- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- 15. (Have you/Has ...) completed the requirements for a vocational training program at a trade school, business school, hospital, some other kind of school for occupational training, or place of work? Do not include academic college courses. *If "Yes," ASK –* Was training received in this area?

No No

- Yes, in this Area
- Yes, not in this Area

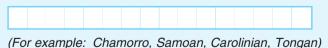
16a. (Do you/Does ...) speak a language other than English at home?

Yes

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No – SKIP to question 17a

b. What is this language?



- 16c. (Do you/Does ...) speak this language at home more frequently than English?
 - Yes, more frequently than English
 - Both equally often
 - No, less frequently than English
 - Does not speak English

17a. Did (you/...) live in this house or apartment 1 year ago (on April 1, 2009)?

- Person is under 1 year old SKIP to question 18
- Yes, this house SKIP to question 18
- No, different house

b. Where did (you/...) live 1 year ago?

What is the name of the island, U.S. state, commonwealth, territory, or foreign country? If outside this Area, print the answer below and SKIP to question 18.

c. What is the name of the city, town, or village?

Ý	rug	nu	510																				-h	a -	5 a	ns	Иа ter	it	
[r 				for on					nis	th	of	ı (e	on	u	or	r	/e	оу	ol	mp	er		а	i
[Insurance purchased directly from an insurance company (by this person or another family member) 																												
[c. Medicare, for people 65 and older, or people with certain disabilities																												
d. Medicaid or any kind of federal government assistance plan for those with low incomes or a disability																													
[e. TRICARE or other military health care																												
[f. VA (including those who have ever used or enrolled for VA health care)																									
[g. Local medical programs for indigents .																											
[or	0						ins Spe) .	h	
								Τ								Γ												Г	
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								Т								Γ		Τ										Г	

- 19a. (Are you/Is ...) deaf or (do you/does ...) have serious difficulty hearing?
 - Yes No
 - b. (Are you/Is ...) blind or (do you/does ...) have serious difficulty seeing even when wearing glasses?
 - Yes No

Ask questions 20a-20c if this person is 5 years old or over. Otherwise, SKIP to question 50.

- 20a. Because of a physical, mental, or emotional condition, (do you/does ...) have serious difficulty concentrating, remembering, or making decisions?
 - Yes
 - No
 - b. (Do you/Does ...) have serious difficulty walking or climbing stairs?
 - Yes
 - No
 - c. (Do you/Does ...) have difficulty dressing or bathing?
 - Yes
 - No

Ask question 21 if this person is 15 years old or over. Otherwise, SKIP to question 50.

- 21. Because of a physical, mental, or emotional condition, (do you/does ...) have difficulty doing errands alone such as visiting a doctor's office or shopping?
 - Yes
 - No

22. What is (your/...'s) marital status?

- Now married
- Widowed
- Divorced
- Separated
- Never married
- **23.** If this person is female, ASK **How many babies** (have you/has she) ever had, not counting stillbirths? Do not count stepchildren or children (you have/she has) adopted.

	None	OR	Number	of	children

24a. (Do you/Does ...) have any of (your/his/her) own grandchildren under the age of 18 living in this house or apartment?

Yes

No – SKIP to question 25

b. (Are you/Is ...) currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

Yes

- No SKIP to question 25
- C. How long (have you/has ...) been responsible for the(se) grandchild(ren)? If (you are/... is) financially responsible for more than one grandchild, answer the question for the grandchild for whom (you have/... has) been responsible for the longest period of time.
 - Less than 6 months
 - 6 to 11 months
 - 1 or 2 years
 - 3 or 4 years
 - 5 or more years
- 25. (Show Card H.) (Have you/Has ...) ever served on active duty in the U.S. Armed Forces, military **Reserves, or National Guard? Active duty does** not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
 - Yes, now on active duty
 - Yes, on active duty during the last 12 months, but not now
 - Yes, on active duty in the past, but not during the last 12 months
 - No, training for Reserves or National Guard only - SKIP to question 27a
 - No, never served in the military *SKIP to* question 28a
- 26. (Show Card I.) When did (you/...) serve on active duty in the U.S. Armed Forces? Mark X a box for EACH period in which this person served, even if just for part of the period. After each response, ASK - Any other time?
 - September 2001 or later
 - August 1990 to August 2001 (including Persian Gulf War)
 - September 1980 to July 1990
 - May 1975 to August 1980
 - Vietnam era (August 1964 to April 1975)
 - March 1961 to July 1964
 - February 1955 to February 1961
 - Korean War (July 1950 to January 1955)
 - January 1947 to June 1950
 - World War II (December 1941 to December 1946)
 - November 1941 or earlier



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disability rating? Yes (such as 0%, 10%, 20%,, 100%) No - SKIP to question 28a b. What is (your/'s) service-connected disability rating? 0 percent 30 or 40 percent 50 or 60 percent 70 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? If "Yes," ASK - Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? Mark IX ONE box. Yes, worked for pay; did NO subsistence activity - SKIP to question 29 Yes, worked for pay at a job or business (or was retired) b. LAST WEEK, did (you/) do ANY work for pay, even for as little as one hour? Which of the following categories describes (your/'s) situation LAST WEEK? Mark IX ONE box. Worked for pay; did NO subsistence activity Worked for pay, AND did subsistence activity Worked for pay, did NO subsistence activity Worked for pay; did NO subsistence activity Worked for pay; did NO subsistence activity B. LAST WEEK, did (you/) do ANY work for pay, even for as little as one hour? Which of the following categories describes (your/'s) situation LAST WEEK? Day and bid subsistence activity Worked for pay; did NO subsistence activity B. LAST WEEK, Aid (you/) work LAST WEEK? Did NOT work for pay; did NO subsistence activity	 disability rating? Yes (such as 0%, 10%, 20%,, 100%) No - <i>SKIP to question 28a</i> b. What is (your/'s) service-connected disability rating? 0 percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? <i>If "Yes," ASK –</i> Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? <i>Mark</i> 🖉 ONE box. Yes, worked for pay; did NO subsistence activity – <i>SKIP to question 29</i> Yes, worked for pay AND did subsistence activity – <i>SKIP to question 29</i> No, did NOT work for pay at a job or business (or was retired) b. LAST WEEK, did (you/) do ANY work for pay, even for as little as one hour? Which of the following categories describes (your/'s)	sk que n/bus
 Yes (such as 0%, 10%, 20%,, 100%) No - <i>SKIP to question 28a</i> b. What is (your/'s) service-connected disability rating? 0 percent 30 or 40 percent 30 or 40 percent 50 or 60 percent 50 or 60 percent 70 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? <i>if 'Yes,' ASK</i> – Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? <i>Mark</i> [2] ONE box. Yes, worked for pay, AD did subsistence activity - <i>SKIP to question 29</i> No, did NOT work for pay at a job or business (or was retired) 32. Were for as little as one hour? Which of the following categories describes (your/'s) situation LAST WEEK? <i>Mark</i> [2] ONE box. Worked for pay AND did subsistence activity Worked for pay; did NO subsistence activity - <i>SKIP to question 34a</i> Did NOT work for pay; did NO subsistence activity Did NOT work for pay; did NO subsistence activity - <i>SKIP to question 34a</i> 29. At what location did (you/) work LAST WEEK? Do not include subsistence activity - <i>SKIP to question 34a</i> a. What is the name of the city, town, or village? a. What is the name of the city, town, or village? b. What is the name of the city, town, or village? c. ([] 	 No - SKIP to question 28a b. What is (your/'s) service-connected disability rating? 0 percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? If "Yes," ASK - Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? Mark X ONE box. Yes, worked for pay; did NO subsistence activity - SKIP to question 29 Yes, worked for pay AND did subsistence activity - SKIP to question 29 No, did NOT work for pay at a job or business (or was retired) 	sk que n/bus
 b. What is (your/'s) service-connected disability rating? O percent 30 or 40 percent 30 or 40 percent 50 or 60 percent 50 or 60 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? <i>Ii</i> "Yes," <i>ASK</i> - Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? <i>Mark</i> // ONE box. Yes, worked for pay; did NO subsistence activity - <i>SKIP to question 29</i> No, did NOT work for pay at a job or business (or was retired) b. LAST WEEK, did (you/) do ANY work for pay, even for as little as one hour? Which of the following categories describes (your/'s) situation LAST WEEK? <i>Mark</i> // ONE box. Worked for pay; did NO subsistence activity Worked for pay; did NO subsistence activity Did NOT work for pay; did subsistence activity Did NOT work for pay; did Subsistence activity. <i>I H</i> this person worked at more han one location, print where he or she worked most last week. a. What is the name of the island, U.S. state, commonwealth, territory, or foreign country? b. What is the name of the city, town, or village? c. ((w) 	 b. What is (your/'s) service-connected disability rating? 0 percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher 28a. LAST WEEK, did (you/) work for pay at a job (or business)? If "Yes," ASK – Did (you/) do subsistence activity last week, such as fishing, growing crops, etc., NOT primarily for commercial purposes? Mark X ONE box. Yes, worked for pay; did NO subsistence activity – <i>SKIP to question 29</i> Yes, worked for pay at a job or business (or was retired) 32 b. LAST WEEK, did (you/) do ANY work for pay, even for as little as one hour? Which of the following categories describes (your/'s)	sk que n/bus I. H rc L P
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Form D-2(E)SUPP CNMI

30. (Show Card J.) **How did (you/...) usually get to work LAST WEEK? Do not include transportation to subsistence activity.** If this person usually used more than one method of transportation during the trip, mark the box of the one used for most of the distance.

- Car, truck, or private van/bus
- Public van/bus
- Boat
- 📃 Taxicab
- Motorcycle
- Bicycle
- Walked
- Worked at home SKIP to question 38
- Other method

Ask question 31 if this person answered "Car, truck, or private van/bus" in question 30. Otherwise, SKIP to question 32.

31. How many people, including (yourself/...), usually rode to work in the car, truck, or private van/bus LAST WEEK?

Per	son	(s)

32. What time did (you/...) usually leave home to go to work LAST WEEK?

Hour		Minute	_
	1.		a.m
			🗌 p.m

33. How many minutes did it usually take (you/...) to get from home to work LAST WEEK?

/linutes

Ask questions 34–37 if this person did NOT work last week. Otherwise, SKIP to question 38.

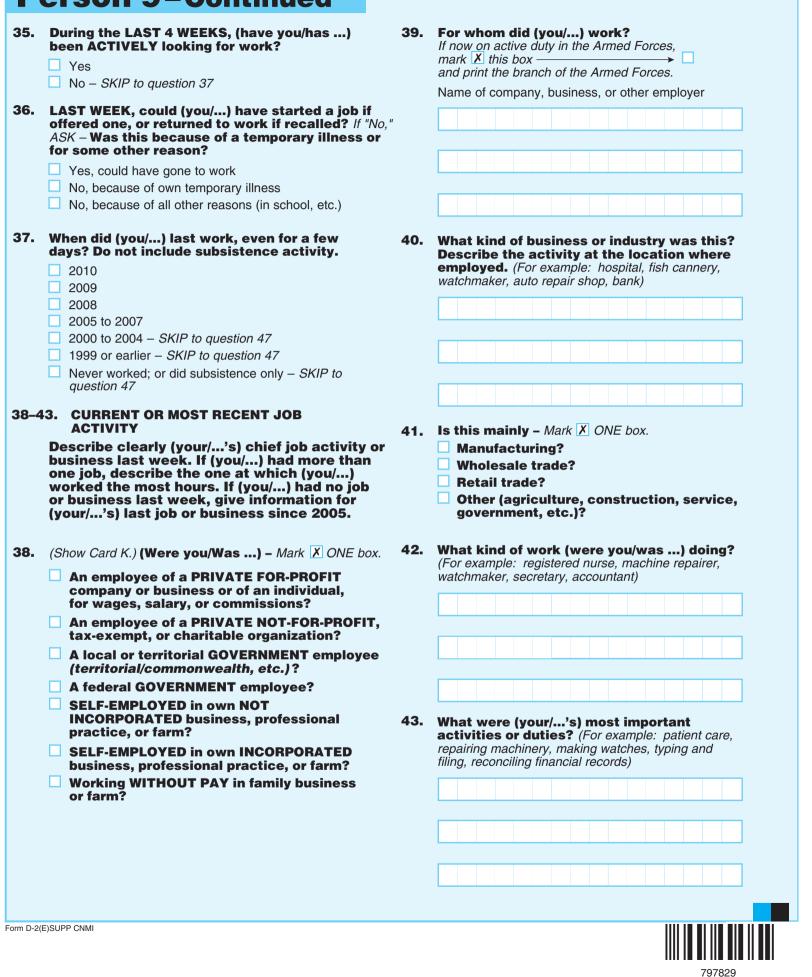
34a. LAST WEEK, (were you/was ...) on layoff from a job?

- Yes SKIP to question 34c
- No

b. LAST WEEK, (were you/was ...) TEMPORARILY absent from a job or business?

- Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. – SKIP to question 37
- No SKIP to question 35
- C. (Have you/Has ...) been informed that (you/he/she) will be recalled to work within the next 6 months OR been given a date to return to work?
 - Yes SKIP to question 36
 - 🗌 No





30			
P	erson 9-Continued		
44.	LAST YEAR, 2009, did (you/) work at a job or business at any time? Do not include subsistence activity.	47b.	 Did (you/) receive any self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships in 2009?
	\square No – SKIP to question 47		Yes - What was the NET income after business expenses?
45a.	During 2009 (all 52 weeks), did (you/) work 50 or more weeks? Count paid time off as work. Do not include subsistence activity.		Annual amount – <i>Dollars</i> Loss
	 Yes – SKIP to question 46 No 		\$00 No
b.	How many weeks DID (you/) work, even for a few hours, <u>including</u> paid vacation, paid sick leave, and military service? Do not include subsistence activity.	c.	Did (you/) receive any interest, dividends, net rental income, royalty income, or income from estates and trusts in 2009? Report even small amounts credited to an account.
	_		Yes – What was the amount?
	50 to 52 weeks		Annual amount – <i>Dollars</i> Loss
	48 to 49 weeks		LUSS
	40 to 47 weeks		\$, .00
	27 to 39 weeks		□ No
	14 to 26 weeks		
	13 weeks or less	d.	Did (you/) receive any Social Security or Railroad Retirement in 2009?
46.	During 2009, in the WEEKS WORKED, how		Yes – What was the amount?
	many hours did (you/) usually work each WEEK? Do not include subsistence activity.		Annual amount – Dollars
	Usual hours worked each WEEK		¢ 00
			\$00
			No No
47.	The next set of questions is about each income source (you/) received during 2009. If the net income was a loss, please give the dollar amount of the loss. For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person (and mark X the "No" box for the other person). If the exact amount is not known, please give your best estimate. If net income is a loss, mark X the "Loss" box next to the dollar amount.	e.	 Did (you/) receive any public assistance or welfare payments from the state or local welfare office, including Supplemental Security Income (SSI) in 2009? Yes - What was the amount? Annual amount - Dollars \$
а.	Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009?	f.	Did (you/) receive any retirement, survivor, or disability pensions in 2009? Do NOT include Social Security.
	Yes – What was the amount from all jobs before deductions for taxes, bonds, dues, or other items?		Yes – What was the amount?
			Annual amount – <i>Dollars</i>
	Annual amount – <i>Dollars</i>		¢
	\$.00		\$00
	□ No		No No
Form D-2(E)SUPP CNMI		
0 2(,		
			

h. Die reg un ali pa sa 	Yes – What was the amount? Annual amount – Dollars \$
h. Dia reg un ali pa sa sa conot as stead, s nount ba	No No d (you/) receive any other sources of incom gularly such as Veterans' (VA) payments, nemployment compensation, child support, or imony in 2009? Do NOT include lump-sum typents such as money from an inheritance of le of a home. Yes – What was the amount? Annual amount – Dollars \$
h. Dia reg un ali pa sa sa conot as stead, s nount ba	No d (you/) receive any other sources of incom gularly such as Veterans' (VA) payments, temployment compensation, child support, or imony in 2009? Do NOT include lump-sum typents such as money from an inheritance of the of a home. Yes – What was the amount? Annual amount – Dollars \$
h. Dia reg un ali pa sa sa conot as stead, s nount ba	d (you/) receive any other sources of incom gularly such as Veterans' (VA) payments, memployment compensation, child support, or imony in 2009? Do NOT include lump-sum syments such as money from an inheritance of le of a home. Yes – What was the amount? Annual amount – Dollars () 00 No
o not as stead, s nount bo	gularly such as Veterans' (VA) payments, memployment compensation, child support, or imony in 2009? Do NOT include lump-sum ayments such as money from an inheritance of a home. Yes – What was the amount? Annual amount – Dollars \$.00 No Sk question 48 if questions 47a-47h are completed.
not as stead, s nount be	Annual amount – <i>Dollars</i> \$
o not as stead, s nount be	No sk question 48 if questions 47a-47h are completed.
not as stead, s nount be	No sk question 48 if questions 47a-47h are completed.
stead, s nount be	
	elow. If the total amount was a loss, mark \mathbf{X} the "Loss to the dollar amount.
3. Wł	hat was (your/'s) total income during 2009?
	Annual amount – Dollars Loss
	None OR \$
mo of co org	uring 2009, did (you/) GIVE or SEND oney TO relatives or friends living outside this Area? Do not include charitable ontributions or money given to charitable ganizations. If exact amount is not known, ease give best estimate.
	Yes - What was the amount?
	Annual amount – <i>Dollars</i>
	\$00
	No
peo not	efer to S5 on form D-2(E)CNMI. If the number of ople is more than nine, continue on the next page. If t, SKIP to the "Respondent Information" block on ge 42 of form D-2(E)CNMI.

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P	Person 10		
6.	Print the name of Person 5 from page 2. First Name MI	11a.	Where was (your/'s) mother born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country.
	Last Name	b.	Where was (your/'s) father born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country.
7.	Where (were you/was) born? Print the name of the island (village in American Samoa), U.S. state, commonwealth, territory, or foreign country.		
8.	(Show Card C.) (Are you/Is) a CITIZEN or NATIONAL of the United States?	12.	(Show Card E.) (Are you/Is) a dependent of an active-duty or retired member of the Armed Forces of the United States or of the full-time military Reserves or National Guard? Active duty does NOT include training for the
	 Yes, born in this Area – SKIP to question 11a Yes, born in the United States or another U.S. territory or commonwealth 		 military Reserves or National Guard. Yes, dependent of an active-duty member of the Armed Forces
	 Yes, born elsewhere of U.S. parent or parents Yes, a U.S. citizen by naturalization No, not a U.S. citizen or national (permanent resident) No, not a U.S. citizen or national (temporary resident) 		 Yes, dependent of retired member of the Armed Forces, or dependent of an active-duty or retired member of full-time National Guard or Armed Forces Reserve No
9.	When did (you/) come to this Area to stay? If (you have/ has) entered the Area more than once, what is the latest year? Print numbers in boxes. Year	13a.	At any time since February 1, 2010, (have you/has) attended school or college? Include only pre-kindergarten, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree. <i>If</i> <i>"Yes," ASK</i> – Was it public or private?
10.	(Show Card D.) What was (your/'s) MAIN reason		No, has not attended since February 1 – SKIP to question 14
	 for moving to this Area? Mark X ONE box. Employment Military 		 Yes, public school, public college Yes, private school, private college, home school
	 Subsistence activities Missionary activities 	b.	What grade or level (were you/was) attending? Mark X ONE box.
	 Moved with spouse or parent To attend school Medical 		 Pre-kindergarten Kindergarten Grade 1 through 12 –
	 Housing Other 		 Specify grade 1–12
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Person 10-Continued

14. (Show Card F.) What is the highest degree or level of school (you have/... has) COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest degree received.

NO SCHOOLING COMPLETED

No schooling completed

PRE-KINDERGARTEN THROUGH GRADE 12

- Pre-kindergarten
- Kindergarten
- Grade 1 through 11 Specify grade 1–11
- 12th grade NO DIPLOMA

HIGH SCHOOL GRADUATE

- Regular high school diploma
- GED or alternative credential

COLLEGE OR SOME COLLEGE

- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS)

AFTER BACHELOR'S DEGREE

- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- 15. (Have you/Has ...) completed the requirements for a vocational training program at a trade school, business school, hospital, some other kind of school for occupational training, or place of work? Do not include academic college courses. *If "Yes," ASK* – Was training received in this area?

No No

- Yes, in this Area
- Yes, not in this Area

16a. (Do you/Does ...) speak a language other than English at home?

Yes

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No – SKIP to question 17a

b. What is this language?

- 16c. (Do you/Does ...) speak this language at home more frequently than English?
 - Yes, more frequently than English
 - Both equally often
 - No, less frequently than English
 - Does not speak English

17a. Did (you/...) live in this house or apartment 1 year ago (on April 1, 2009)?

- Person is under 1 year old SKIP to question 18
- Yes, this house SKIP to question 18
- No, different house

b. Where did (you/...) live 1 year ago?

What is the name of the island, U.S. state, commonwealth, territory, or foreign country? If outside this Area, print the answer below and SKIP to question 18.

c. What is the name of the city, town, or village?

18.	co he Má	how vei alt ark "	r ed h ir 'Yes	by 1su 5″0	ar Irai	ny e nce	of t e or	he ' he	fol alt	lov th e	vin cov	g t vera	ype age	es (e pl age	lan in	
	а.		urai ploy othe	/er	or ι	Inic	n (c	of th	nis p				r	۱ . ا	/es	No
	b.		urai urar othe	nce	cor	npa	any	(by	this					.		
	с.	Me pec	dica ople								lde	r, o	r 	.		
	d.		dica /ern n lo	me	nt a	issi	star	nce	pla	n fc	or th	10S6	Э	.		
	е.	TR	ICA	RE	or	oth	er n	nilita	ary	hea	alth	car	e	.		
	f.	VA use	(ind ed o											.		
	g.	Loc	cal r	nec	lica	l pr	ogra	ams	s fo	r ind	dige	ents	;.			
	h.	Any hea	y ot alth										-			



- 19a. (Are you/Is ...) deaf or (do you/does ...) have serious difficulty hearing?
 - Yes No

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- b. (Are you/Is ...) blind or (do you/does ...) have serious difficulty seeing even when wearing glasses?
 - Yes No

Ask questions 20a-20c if this person is 5 years old or over. Otherwise, SKIP to question 50.

- 20a. Because of a physical, mental, or emotional condition, (do you/does ...) have serious difficulty concentrating, remembering, or making decisions?
 - Yes
 - No
 - b. (Do you/Does ...) have serious difficulty walking or climbing stairs?
 - Yes
 - No
 - c. (Do you/Does ...) have difficulty dressing or bathing?
 - Yes
 - No

Ask question 21 if this person is 15 years old or over. Otherwise, SKIP to question 50.

- 21. Because of a physical, mental, or emotional condition, (do you/does ...) have difficulty doing errands alone such as visiting a doctor's office or shopping?
 - Yes
 - No

22. What is (your/...'s) marital status?

- Now married
- Widowed
- Divorced
- Separated

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- Never married
- **23.** If this person is female, ASK **How many babies** (have you/has she) ever had, not counting stillbirths? Do not count stepchildren or children (you have/she has) adopted.

_ L	None	OR	Number of children

(1-21-2009)Page 34 Solid black 24a. (Do you/Does ...) have any of (your/his/her) own grandchildren under the age of 18 living in this house or apartment?

Yes

No – SKIP to question 25

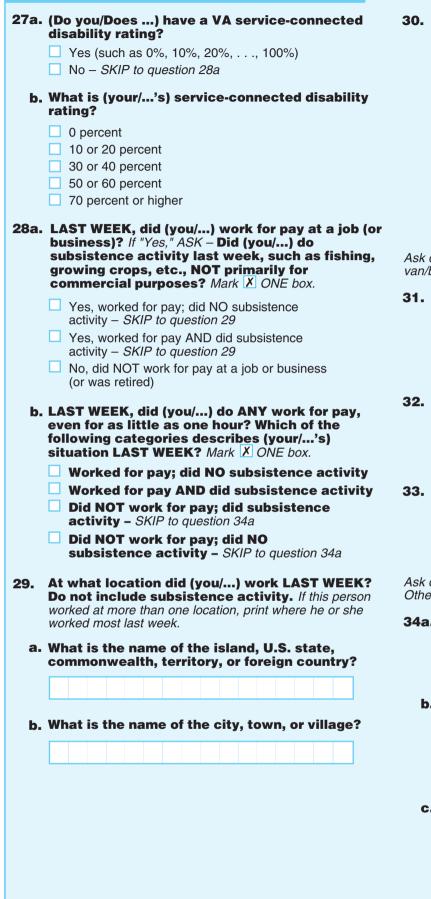
b. (Are you/Is ...) currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?

Yes

- No SKIP to question 25
- c. How long (have you/has ...) been responsible for the(se) grandchild(ren)? If (you are/... is) financially responsible for more than one grandchild, answer the question for the grandchild for whom (you have/... has) been responsible for the longest period of time.
 - Less than 6 months
 - 6 to 11 months
 - 1 or 2 years
 - 📃 3 or 4 years
 - 5 or more years
- 25. (Show Card H.) (Have you/Has ...) ever served on active duty in the U.S. Armed Forces, military **Reserves, or National Guard? Active duty does** not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
 - Yes, now on active duty
 - Yes, on active duty during the last 12 months, but not now
 - Yes, on active duty in the past, but not during the last 12 months
 - No, training for Reserves or National Guard only - SKIP to question 27a
 - No, never served in the military *SKIP to* question 28a
- 26. (Show Card I.) When did (you/...) serve on active duty in the U.S. Armed Forces? Mark X a box for EACH period in which this person served, even if just for part of the period. After each response, ASK - Any other time?
 - September 2001 or later
 - August 1990 to August 2001 (including Persian Gulf War)
 - September 1980 to July 1990
 - May 1975 to August 1980
 - Vietnam era (August 1964 to April 1975)
 - March 1961 to July 1964
 - February 1955 to February 1961
 - Korean War (July 1950 to January 1955)
 - January 1947 to June 1950
 - World War II (December 1941 to December 1946)
 - November 1941 or earlier



Person 10-Continued



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30. (Show Card J.) **How did (you/...) usually get to work LAST WEEK? Do not include transportation to subsistence activity.** If this person usually used more than one method of transportation during the trip, mark X the box of the one used for most of the distance.

- Car, truck, or private van/bus
 - Public van/bus
- Boat
- Taxicab
- Motorcycle
- Bicvcle
- Walked
- Worked at home SKIP to question 38
- Other method

Ask question 31 if this person answered "Car, truck, or private van/bus" in question 30. Otherwise, SKIP to question 32.

31. How many people, including (yourself/...), usually rode to work in the car, truck, or private van/bus LAST WEEK?

Person(s)

32. What time did (you/...) usually leave home to go to work LAST WEEK?

Hour	Minute	e
		🗆 a.m
		🗕 🗌 p.m

33. How many minutes did it usually take (you/...) to get from home to work LAST WEEK?

Minutes

Ask questions 34–37 if this person did NOT work last week. Otherwise, SKIP to question 38.

- 34a. LAST WEEK, (were you/was ...) on layoff from a job?
 - Yes SKIP to question 34c
 - 🗌 No

b. LAST WEEK, (were you/was ...) TEMPORARILY absent from a job or business?

- Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. – SKIP to question 37
- □ No SKIP to question 35
- c. (Have you/Has ...) been informed that (you/he/she) will be recalled to work within the next 6 months OR been given a date to return to work?
 - Yes SKIP to question 36

No



 5. During the LAST 4 WEEKS, (have you/has) been ACTIVELY looking for work? Yes No - SKIP to question 37 5. LAST WEEK, could (you/) have started a job if offered one, or returned to work if recalled? <i>If</i> "No," ASK - Was this because of a temporary illness or for some other reason? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.) 	39.	For whom did (you/) work? If now on active duty in the Armed Forces, mark X this box and print the branch of the Armed Forces. Name of company, business, or other employer
 When did (you/) last work, even for a few days? Do not include subsistence activity. 2010 2009 2008 2005 to 2007 2000 to 2004 - <i>SKIP to question 47</i> 1999 or earlier - <i>SKIP to question 47</i> Never worked; or did subsistence only - <i>SKIP to question 47</i> 	40.	What kind of business or industry was this? Describe the activity at the location where employed. (For example: hospital, fish cannery, watchmaker, auto repair shop, bank)
 CURRENT OR MOST RECENT JOB ACTIVITY Describe clearly (your/'s) chief job activity or business last week. If (you/) had more than one job, describe the one at which (you/) worked the most hours. If (you/) had no job or business last week, give information for (your/'s) last job or business since 2005. 	41.	 Is this mainly - Mark X ONE box. Manufacturing? Wholesale trade? Retail trade? Other (agriculture, construction, service, government, etc.)?
 Show Card K.) (Were you/Was) - Mark X ONE box. An employee of a PRIVATE FOR-PROFIT company or business or of an individual, for wages, salary, or commissions? An employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization? A local or territorial GOVERNMENT employee (territorial/commonwealth, etc.)? A federal GOVERNMENT employee? SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm? Working WITHOUT PAY in family business or farm? 		What kind of work (were you/was) doing? (For example: registered nurse, machine repairer, watchmaker, secretary, accountant) (Intersection of the secretary of

 44. LAST YEAR, 2009, did (you/) work at a job or business at any time? Do not include subsistence activity. Yes 	47b. Did (you/) receive any self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships in 2009?
□ No – SKIP to question 47	Yes – What was the NET income after business expenses?
45a. During 2009 (all 52 weeks), did (you/) work 50 or more weeks? Count paid time off as work. Do not include subsistence activity.	Annual amount – <i>Dollars</i> Loss
 Do not include subsistence activity. Yes - SKIP to question 46 No b. How many weeks DID (you/) work, even for a few hours, including paid vacation, paid sick leave, and military service? Do not include subsistence activity. 50 to 52 weeks 48 to 49 weeks 40 to 47 weeks 27 to 39 weeks 14 to 26 weeks 13 weeks or less 46. During 2009, in the WEEKS WORKED, how many hours did (you/) usually work each WEEK? Do not include subsistence activity. Usual hours worked each WEEK 47. The next set of questions is about each income source (you/) received during 2009. If the net income was a loss, please give the dollar amount of the loss. For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person (and mark X ithe "No" box for the other person). If the exact amount is not known, please give your best estimate. If net income is a loss, mark X the "Loss" box next to the dollar amount. a. Did (you/) receive any wages, salary, commissions, bonuses, or tips in 2009? Yes – What was the amount from all jobs before deductions for taxes, bonds, dues, or other itams? 	 No No No Co. Did (you/) receive any interest, dividends, net rental income, royalty income, or income from estates and trusts in 2009? Report even small amounts credited to an account. Yes - What was the amount? No Annual amount - Dollars Loss No Annual amount - Dollars Yes - What was the amount? Annual amount - Dollars Yes - What was the amount? No No Payments from the state or local welfare or welfare payments from the state or local welfare office, including Supplemental Security Income (SSI) in 2009? Yes - What was the amount? Annual amount - Dollars No No So No No So No So No No So So No So No So No So So No So So No So So No So
Annual amount – <i>Dollars</i>	Annual amount – <i>Dollars</i>
\$00	• • • • • • • • • • • • • • • • • • •
m D-2(E)SUPP CNMI	

 alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance sale of a home. Yes - What was the amount? Annual amount - Dollars Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark to the 'Lobox next to the dollar amount. 48. What was (your/'s) total income during 2009. Annual amount - Dollars Loss None OR Annual amount - Dollars Loss On this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate. Yes - What was the amount? Annual amount - Dollars No	8	
Include money from relatives outside the household or in the military. Yes - What was the amount? Annual amount - Dollars No No No No No No Yes - What was the amount? Annual amount - Dollars Yes - What was the amount? Annual amount - Dollars Yes - What was the amount? Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark [] the "Lobox next to the dollar amount. Annual amount - Dollars Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark [] the "Lobox next to the dollar amount. Annual amount - Dollars Yes - What was (your/'s) total income during 2009 Annual amount - Dollars None OR Yes - What was the amount? Annual amount - Dollars None OR Yes - What was the amount is not known, please give best estimate. Yes - What was the amount? Annual amount - Dollars Yes - What was the amount? Annual amount - Dollars No	P	erson 10-Continued
Annual amount - Dollars Yes - What was the amount? Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark to the dollar amount. Annual amount - Dollars Annual amount - Dol	47g.	Include money from relatives outside the
 No No No Did (you/) receive any other sources of incorregularly such as Veterans' (VA) payments, unemployment compensation, child support, alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance sale of a home. Yes - What was the amount? Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark is the "Lobox next to the dollar amount. 48. What was (your/'s) total income during 2009. Annual amount - Dollars Loss None OR Summa 2009, did (you/) GIVE or SEND money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable contribu		Yes – What was the amount?
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 h. Did (you/) receive any other sources of incoregularly such as Veterans' (VA) payments, unemployment compensation, child support, alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance sale of a home. Yes - What was the amount? Annual amount - Dollars Annual amount - Dollars No Do not ask question 48 if questions 47a-47h are completed. Instead, sum these entries and subtract any losses. Enter the amount below. If the total amount was a loss, mark X the "Lostox next to the dollar amount. 48. What was (your/'s) total income during 2009 Annual amount - Dollars Loss None OR .00 49. During 2009, did (you/) GIVE or SEND money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate. Yes - What was the amount? Annual amount - Dollars So 50. Refer to S5 on form D-2(E)CNMI. If the number of people is more than 10, go to the next form D-2(E)SUPP CNMI. If not, SKIP to the "Respondent"		\$.00
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Annual amount – Dollars Annual amount – Dollars No No No No No No Annual amount vas a loss, mark X the "Loss amount below. If the total amount was a loss, mark X the "Loss amount below. If the total amount was a loss, mark X the "Loss Annual amount – Dollars Loss Annual amount – Dollars Loss None OR None OR Yes – What was the amount is not known, please give best estimate. Yes – What was the amount is not known, please give best estimate. Yes – What was the amount – Dollars No	h.	regularly such as Veterans' (VA) payments, unemployment compensation, child support, c alimony in 2009? Do NOT include lump-sum payments such as money from an inheritance
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 money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known, please give best estimate. Yes - What was the amount? Annual amount - Dollars \$		□ None OR \$
Annual amount – <i>Dollars</i> \$, , , , , , , , , , , , , , , , , , ,	49.	money TO relatives or friends living outside of this Area? Do not include charitable contributions or money given to charitable organizations. If exact amount is not known,
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people is more than 10, go to the next form D-2(E)SUPP CNMI. If not, SKIP to the "Respondent		
	50.	people is more than 10, go to the next form D-2(E)SUPP CNMI. If not, SKIP to the "Respondent

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