

Use this section to complete information for the rest of the people you counted in Question 1 on the front page. We may call for additional information about them.

Person 7 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Person 8 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Person 9 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Person 10 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Person 11 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Person 12 Last Name First Name MI

Sex Age on April 1, 2010 Date of Birth Related to Person 1?

Male Female

Thank you for completing your official 2010 Census form.

FOR OFFICIAL USE ONLY

JIC1 JIC2

If your enclosed postage-paid envelope is missing, please mail your completed form to:

U.S. Census Bureau National Processing Center 1201 East 10th Street Jeffersonville, IN 47132

If you need help completing this form, call 1-866-948-2010 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

TDD — Telephone display device for the hearing impaired. Call 1-866-783-2010 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

¿NECESITA AYUDA? Si usted necesita ayuda para completar este cuestionario, llame al 1-866-943-2010 entre las 8:00 a.m. y 9:00 p.m., 7 días a la semana. La llamada telefónica es gratis.

The U.S. Census Bureau estimates that, for the average household, this form will take about 10 minutes to complete, including the time for reviewing the instructions and answers. Send comments regarding this burden estimate or any other aspect of this burden to: Paperwork Reduction Project 0607-0919-C, U.S. Census Bureau, AMSD-3K138, 4600 Silver Hill Road, Washington, DC 20233. You may e-mail comments to <Paperwork@census.gov>; use "Paperwork Project 0607-0919-C" as the subject.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget.



This is the official form for all the people at this address. It is quick and easy, and your answers are protected by law.

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

Use a blue or black pen.

Start Here

The Census must count every person living in the United States on April 1, 2010.

Before you answer Question 1, count the people living in this house, apartment, or mobile home using our guidelines.

Count all people, including babies, who live and sleep here most of the time.

The Census Bureau also conducts counts in institutions and other places, so:

Do not count anyone living away either at college or in the Armed Forces.

Do not count anyone in a nursing home, jail, prison, detention facility, etc., on April 1, 2010.

Leave these people off your form, even if they will return to live here after they leave college, the nursing home, the military, jail, etc. Otherwise, they may be counted twice.

The Census must also include people without a permanent place to stay, so:

If someone who has no permanent place to stay is staying here on April 1, 2010, count that person. Otherwise, he or she may be missed in the census.

1. How many people were living or staying in this house, apartment, or mobile home on April 1, 2010?

Number of people =

2. Were there any additional people staying here April 1, 2010 that you did not include in Question 1?

Mark [X] all that apply.

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

3. Is this house, apartment, or mobile home —

Mark [X] ONE box.

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

4. What is your telephone number? We may call if we don't understand an answer.

Area Code + Number

OMB No. XXXX-XXXX: Approval Expires XX/XX/XXXX.

Form D-1(X5) (2-27-2009)

5. Please provide information for each person living here. Start with a person living here who owns or rents this house, apartment, or mobile home. If the owner or renter lives somewhere else, start with any adult living here. This will be Person 1.

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

Last Name First Name MI

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

[] Male [] Female

7. What is Person 1's age and what is Person 1's date of birth? Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes.

Age on April 1, 2010 Month Day Year of birth

8. What is Person 1's race or origin? Mark [X] one or more boxes.

- White
Black, African Am., or Negro
Mexican, Mexican Am., Chicano
Puerto Rican
Cuban
Other Hispanic, Latino, or Spanish origin
Other Asian
Other Pacific Islander

American Indian or Alaska Native — Print name of enrolled or principal tribe.

- Asian Indian
Chinese
Filipino
Other Asian
Japanese
Korean
Vietnamese
Native Hawaiian
Guamanian or Chamorro
Samoan
Other Pacific Islander

Some other race or origin — Print race or origin.

If more people were counted in Question 1, continue with Person 2.



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