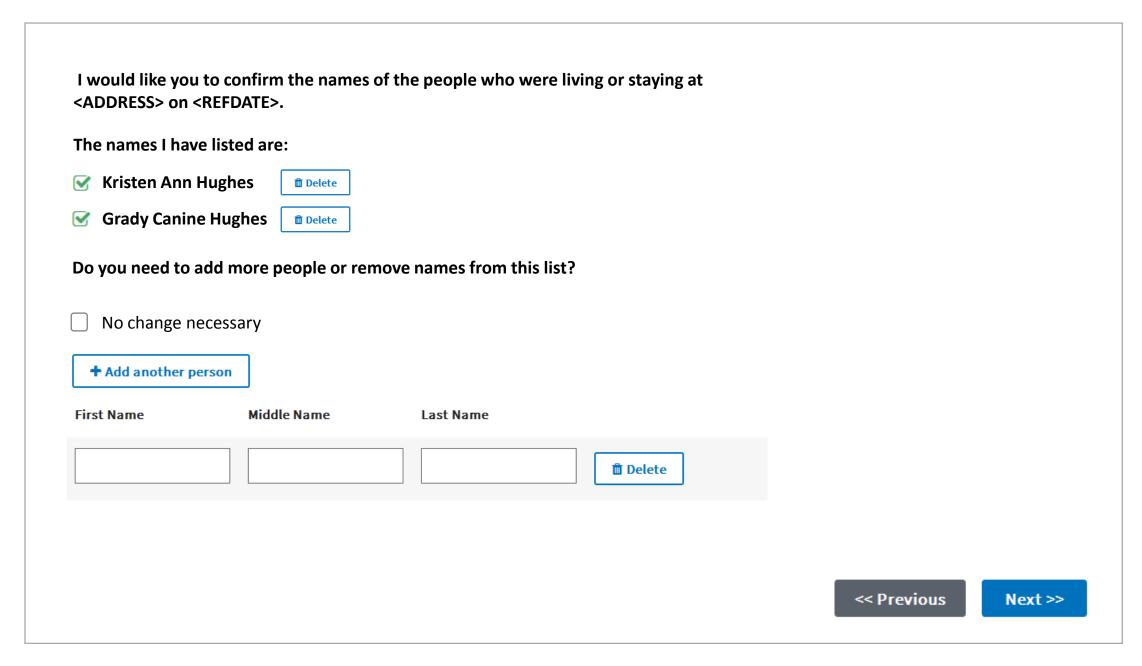
I am calling to verify (your/your household's) responses to the 2018 End-to-End Census Test so that we may evaluate how well our questions help us collect the correct information. Some of the questions I will ask are similar to what you were previously asked.

This interview is authorized by Title 13 of the US Code and should take approximately 10 minutes. All of the information you provide will be confidential.

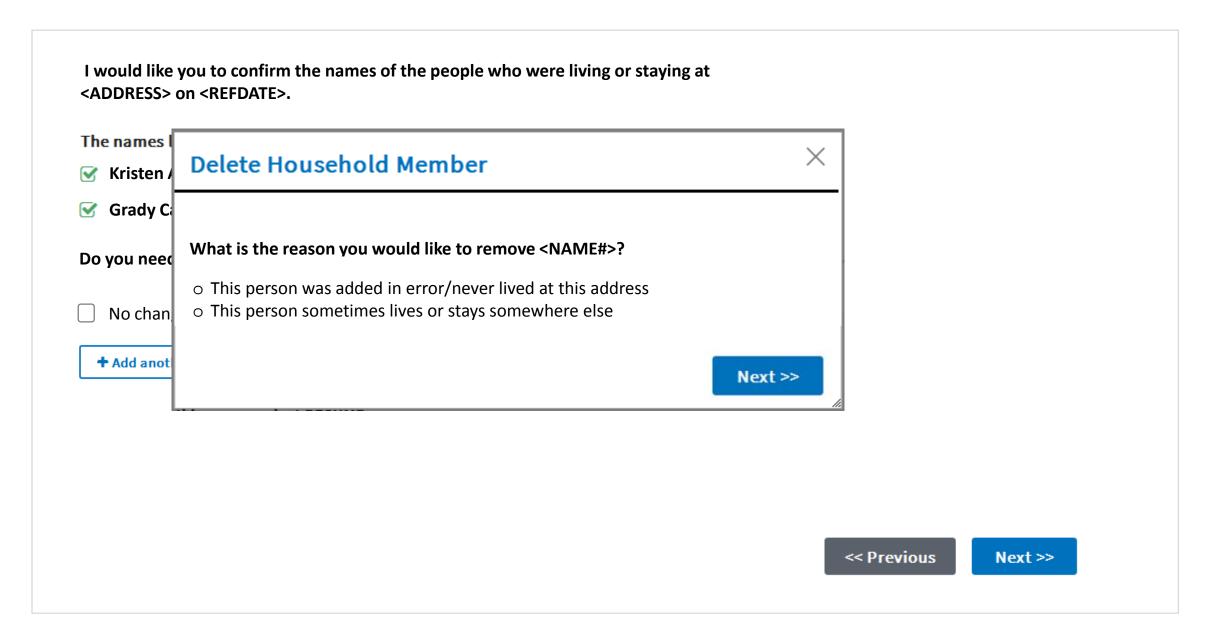
This interview may be recorded for quality assurance purposes. Do I have your permission to record this interview?

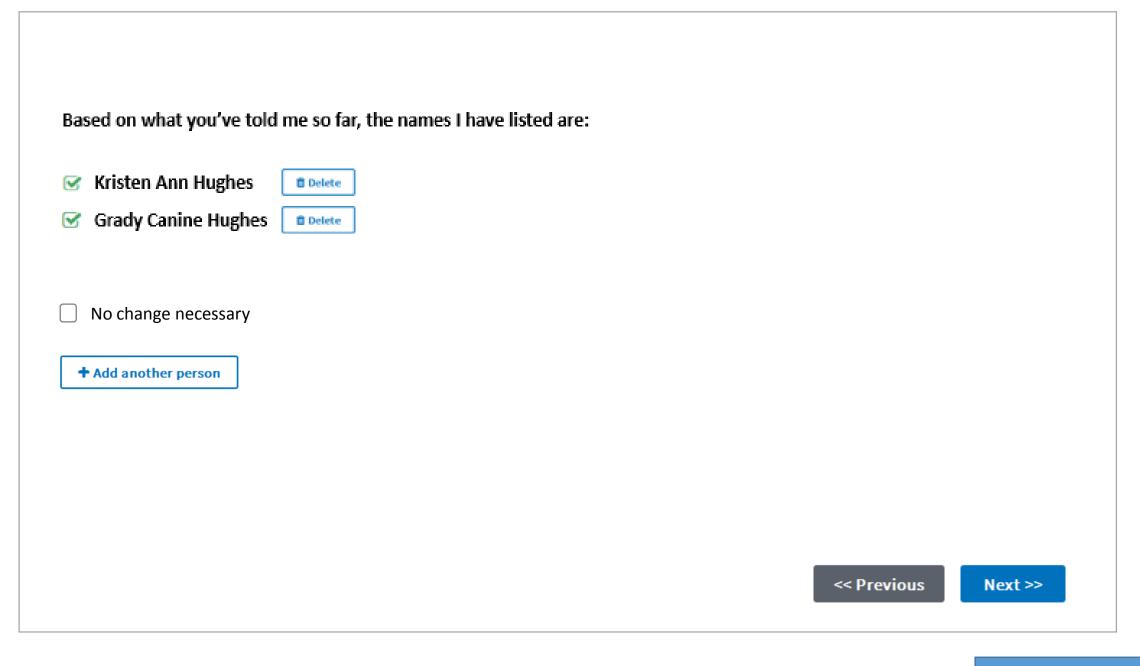
If the respondent indicates they do not wish to be recorded, please click the XXXX stop recording button located in your CTI Toolkit Agent Desktop. Click "Next" to continue.

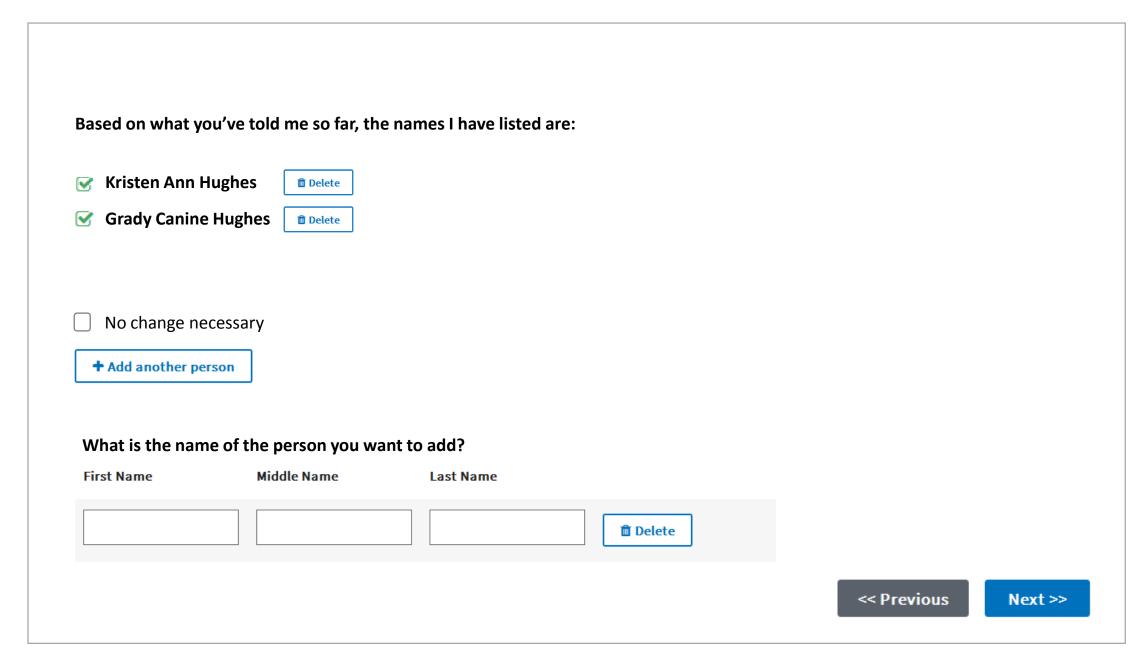
I would like you to confirm the names of the people who were living or staying at <ADDRESS> on <REFDATE>. The names I have listed are: Kristen Ann Hughes 🗓 Delete Grady Canine Hughes 🗓 Delete Do you need to add more people or remove names from this list? No change necessary + Add another person << Previous Next >>



If "Add another person" is selected, display name fields as shown above.

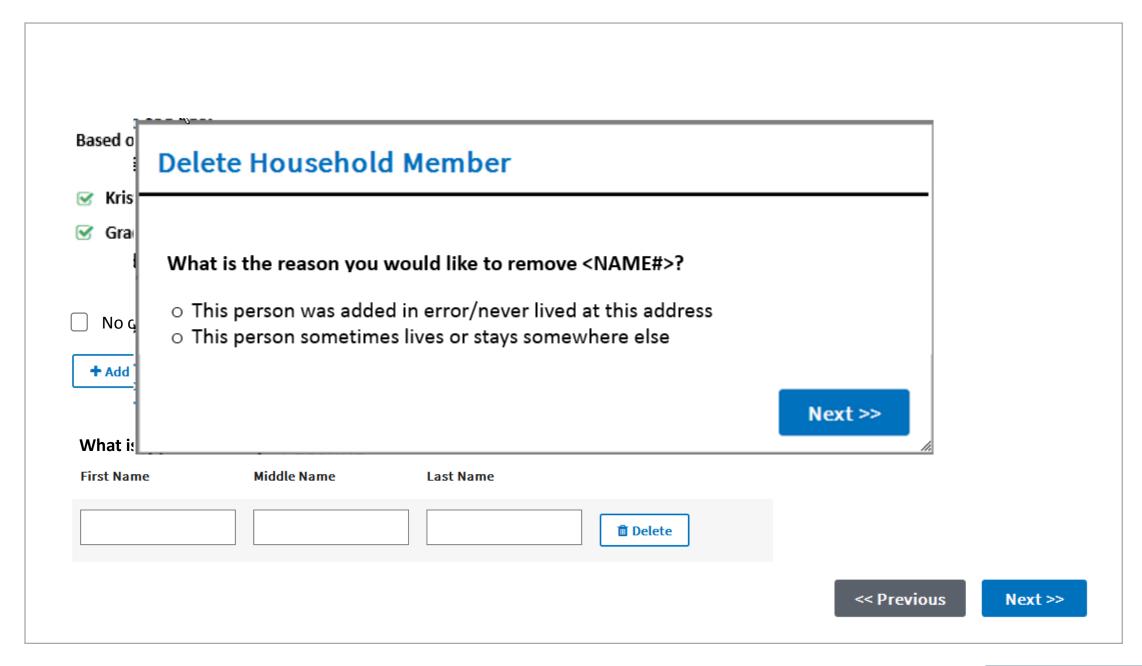






If "Add another person" is selected, display name fields as shown above.

ROSTER REVIEW



If "Delete" is selected, display the modal as shown above.

I'd like to make sure on <refdate>.</refdate>	e that we are not mis	sing anyone who lived or stayed at <ad< th=""><th>DRESS></th><th></th><th></th></ad<>	DRESS>		
Were there any bak mention yet?	oies, children, grandc	nildren, or foster children that you did n	ot		
YesNo					
If Yes, display:					
First Name	Middle Name	Last Name			
		☐ Delete			
+ Add another perso	n				
				<< Previous	Next >>

		living or staying there that you did not mates, or anyone without a permanent place	ce
YesNo			
If Yes, display:			
First Name	Middle Name	Last Name	
		☐ Delete	
+ Add another perso	n		
			<< Previous Next >>

Please provide the full address of the place where <NAME#> sometimes lives or stays with a parent, grandparent, or other person.

Fist time an alternate street address is asked:

Please provide the complete street address you would use to have a package delivered directly to your residence, rather than a rural route or P.O. Box address used for mailing purposes. A street address is the most helpful for processing your response.

When entering an address, you must provide an Address Number and Street Name. You must also provide a City and State or a ZIP Code. If the address is for a group living facility, please provide the name of the facility in the "Facility Name" field.

If the respondent indicates that they do not have a city-style address, select "The other place does not have a street address."

Address Number	Street Name		Apt/Unit	
Ex: 101	Ex: N Main St	Ex: Apt 23		
City		State	ZIP Code	
		~		
Facility Name (if a	applicable)			
☐ The other place	ce does not hav	e a street addre	ess.	

Can you provide a rural route	address for the other place whe	ere <name> sometimes lives or stays?</name>
o Yes		
o No		
If yes, display:		
Please provide the complete I	rural route address, and then des	scribe the physical location of that place?
For the location description, p	olease provide as much informati	tion as possible about the location, such as "The apartment
		orch on the northeast corner of Farm Road and Highway 46."
		or, Rural Route number, Rural Route Box ID number. You must also provide
a City and State or a ZIP Code. If t	the address is for a group living facili	ity, please provide the name of the facility in the "Facility Name" field.
If the respondent indicates that t	hey do not have a rural route addres.	ss. select "Next".
•	ral Route # RR B	Sox ID #
City	State	ZIP Code
	•	
Physical Location Descrip	otion	
- ···· · · · · · · · · · · · · · · · ·		
Facility Name (if applicab	oie)	

We need to know as much information as possible about the other place where <name> sometimes lives or stays. Please tell me the City and State, or the ZIP Code. Then describe the physical location.</name>					
	-	=	about the location. For example, you could so eet intersection or shelter, if you were	ay	
You must provide at least a City ar provide the name of the facility in			other place is a group living facility, please		
City	State 🗸	ZIP Code			
Physical Location Description					
Facility Name (if applicable)					
				<< Previous	Next >>

OC

	(Some people live or stay in more than one place, and we would like to make sure everyone is only counted once.) 1 st time/person asked			
grandpar nursing h	AME#> sometimes live or stay somewhere else, other than <address>, (such as with a parent, rent, or other person, while attending college, to be closer to a job or military assignment, in a some or group home, in a jail or prison, at a seasonal or second residence, or for another reason?) and time asked</address>			
Select all	that apply.			
	l No			
	Yes, with a parent, grandparent, or other person			
	Yes, while attending college			
	Yes, for a military assignments			
	Yes, to be closer to a job			
	Yes, in a nursing home or a group home			
	Yes, in a jail or prison			
	Yes, at a seasonal or second residence			
	Yes, for another reason			
	Don't know			
	l Refused			