	Respondent	Person 2	Person 3	Person 4	Person 5	Person 6
1a. Let's create a list of everyone, including people not related to you, living or staying at this address.	First name (or initial):					
What is your name?						
(What is the name of the next person living or staying here?)						
Make sure to include the respondent if he/she is staying there.						
The following questions are to make sure everyone is included.	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
The people you have listed so far are  ❖ Read all names.						
1b. Other than these people, is there anyone else staying here such as  • Babies • Grandchildren • Foster children						
<ul> <li>Any other children, related or unrelated to you</li> <li>Roommates</li> <li>People or families who have no other place to stay?</li> </ul>	□□No additional perso	ons				
Do not include overnight or weekend guests who have a residence somewhere else.						
List additional names to the right.						

#### **2022 AMERICAN COMMUNITY SURVEY CONTENT TEST**

❖ Copy names from 1a and 1b.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
The following questions are to make sure everyone we have listed should be included in this survey.  I have Read all names.	 □□Yes □□No	 □□Yes □□No	 □□Yes □□No	Yes □□No	Yes □□No	Yes □□No
<ul> <li>1c. Do any of these people live somewhere else now, such as a college student or someone in the Armed Forces on deployment?</li> <li>MARK "No" for: <ul> <li>(1) children in boarding school or summer camp</li> </ul> </li> </ul>						
<ul> <li>MARK "Yes" for:         <ul> <li>(1) children in shared custody who are not currently staying at the sample address, regardless of the length of stay;</li> <li>(2) persons who are away NOW for more than two months^</li> </ul> </li> </ul>	Additional Person 1:  ———————————————————————————————————	Additional Person 2:  ———————————————————————————————————	Additional Person 3:  ———————————————————————————————————	Additional Person 4:  ———————————————————————————————————	Additional Person 5:  ———————————————————————————————————	Additional Person 6:  ———————————————————————————————————
^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.						

Copy names from 1a and 1b, but OMIT anyone with a "Yes" response to 1c.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
<ul><li>I have listed</li><li>❖ Read all remaining names.</li><li>1d. Are any of these people staying here for a short visit or for an</li></ul>	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
overnight stay?	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
<ul> <li>MARK "No" for:         <ul> <li>(1) children in shared custody who are currently staying at the sample address, regardless of where they usually stay;</li> <li>(2) commuter workers who stay in some other residence closer to work when their family residence is the sample address.</li> </ul> </li> <li>MARK "Yes" for:         <ul> <li>(1) Commuter workers who stay at the sample address to be closer to work;</li> <li>(2) Persons who have some other residence.</li> </ul> </li> </ul>	 □□Yes □□No	 □□Yes □□No	 □□Yes □□No	Yes □□No	□□Yes □□No	Yes □□No

❖ Copy names with a "Yes" response to 1d.	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
I have listed  ❖ Read names with a "Yes" response to 1d.  1e. Are you/Is <name> staying here for MORE than two months^?</name>	Yes □□No	 □□Yes □□No	 □□Yes □□No	 □□Yes □□No	 □□Yes □□No	 □□Yes □□No
<ul> <li>MARK "Yes":</li> <li>(1) persons who are staying MORE than two months^;</li> <li>(2) children in shared custody who are currently staying at</li> </ul>	Additional Person 1:	Additional Person 2:	Additional Person 3:	Additional Person 4:	Additional Person 5:	Additional Person 6:
the sample address, regardless of where they usually stay; (3) commuter workers who stay at the sample address to be closer to work	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No	□□Yes □□No
^ - The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.						
<ul> <li>Generate the final roster using the first 1-6 names remaining in the order they were mentioned:         <ul> <li>Copy names from 1a and 1b</li> <li>OMIT anyone with a "Yes" response to 1c.</li> <li>OMIT anyone with a "No" response to 1e.</li> </ul> </li> </ul>	Respondent:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:

Participant ID #:										
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Ask as topic-based, that is, ask question for each person	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
before moving to next question.						
<ul> <li>Use flash card for relationships.</li> </ul>		☐☐Opposite-sex	□□Opposite-sex	□□Opposite-sex	□□Opposite-sex	□□Opposite-sex
2a. Of the people you named, who owns or rents this place?		husband/wife/	husband/wife/	husband/wife/	husband/wife/	husband/wife/
2a. Of the people you hamed, who owns of fents this place:		spouse □□Opposite-sex	spouse □□Opposite-sex	spouse □□Opposite-sex	spouse □□Opposite-sex	spouse □□Opposite-sex
Fill in response as Householder. When listing non-		unmarried partner				
householders as Persons 2-6, maintain order established in		□□Same-sex	□□Same-sex	□□Same-sex	□□Same-sex	□□Same-sex
final roster.		husband/wife/	husband/wife/	husband/wife/	husband/wife/	husband/wife/
		spouse ∏∏Same-sex unmarried	spouse ∏∏Same-sex	spouse ∏∏Same-sex	spouse ∏∏Same-sex	spouse ☐☐Same-sex unmarried
2b. Using this list on my screen, how is <name>/are you related</name>		partner	unmarried partner	unmarried partner	unmarried partner	partner
to <fill "you"="" <="" householder="" if="" is="" respondent="" td=""><td></td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td><td>□□Biological</td></fill>		□□Biological	□□Biological	□□Biological	□□Biological	□□Biological
HOUSEHOLDER NAME>?		Son/Daughter	Son/Daughter	Son/Daughter	Son/Daughter	Son/Daughter
		□□Adopted Son/Daughter				
Opposite-sex husband/wife/spouse		Stepson/	Stepson/	Stepson/	Stepson/	Stepson/
Opposite-sex unmarried partner		Stepdaughter	Stepdaughter	Stepdaughter	Stepdaughter	Stepdaughter
Same-sex husband/wife/spouse		□□Brother/Sister	□□Brother/Sister	□□Brother/Sister	□□Brother/Sister	□□Brother/Sister
Same-sex unmarried partner		□□Father/Mother	□□Father/Mother	□□Father/Mother	□□Father/Mother	□□Father/Mother
Biological son or daughter		□□Grandchild □□Parent-in-law	□□Grandchild □□Parent-in-law	□□Grandchild □□Parent-in-law	□□Grandchild □□Parent-in-law	□□Grandchild □□Parent-in-law
Adopted son or daughter Stepson or stepdaughter		□□Son/daughter-law	□□Son/daughter-law	□□Farent-naw □□Son/daughter-law	□□Son/daughter-law	□□Son/daughter-law
Brother or sister		□□Other relative	☐☐Other relative	☐☐Other relative	☐☐Other relative	☐☐Other relative
Father or mother		□□Roommate/	□□Roommate/	□□Roommate/	□□Roommate/	□□Roommate/
Grandchild		Housemate ∏∏Foster child	Housemate ∏Foster child	Housemate ∏∏Foster child	Housemate ∏∏Foster child	Housemate ∏∏Foster child
Parent-in-law		☐☐Other nonrelative				
Son-in-law or daughter-in-law						
Other relative						
Roommate or housemate						
Foster child						
Other nonrelative						
❖ UNRELATED HOUSEHOLD CHECK:	•	•	•	•	•	-

❖ IS ENTIRE HOUSEHOLD UNRELATED (relationships for ALL household members are "Roomer/Boarder"," Housemate/Roommate"," Foster child", or "Other non-relative")?

Yes

No

❖ Ask or verify:	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
3. Are you/Is <fill householder="">/Is <fill name="" other=""> male or female?</fill></fill>	☐ Male ☐ Female					
<ul> <li>4a. What is your/<fill householder's="">/<fill name's="" other=""> date of birth?</fill></fill></li> <li>❖ Enter birth month.</li> <li>❖ Enter birth day.</li> <li>❖ Enter birth year (Enter 4 digits - ex: 1964).</li> </ul>	Birth Month: Birth Day: Birth Year:					
4b. Would you say you are/ <name> is <fill age="">?</fill></name>	☐ Yes					
(If no: What is your best estimate of your/ <name's> age?)</name's>	□ No:					
❖ Make sure the respondent gives the age in completed years as of today. Do not round the age up if the person was close to having a birthday. If the exact age is not known, an estimate will do. Do not enter age in months. For babies less than 1 year old, enter 0 as the age.						
❖ Complete all parts of question 5 (A-C) for each person before	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
moving on to the next person.  5a. Are you/Is <name> of Hispanic, Latino, or Spanish origin?</name>	□□□No, not of Hispanic,	□□□No, not of Hispanic,	□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□	□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
If response is "Yes, of Hispanic, Latino, or Spanish origin," ask Question 5b. If not, check appropriate box and move to next person.	Latino, or Spanish origin	Latino, or Spanish origin	Hispanic, Latino, or Spanish origin	Hispanic, Latino, or Spanish origin	Hispanic, Latino, or Spanish origin	Latino, or Spanish origin
Control of the person	□□Yes, of Hispanic, Latino, or Spanish origin					

5b. Are you/Is <name> Mexican, Mexican American, or Chicano; Puerto Rican; Cuban; or of some other Hispanic,</name>						
Latino, or Spanish Origin?  If response is "Yes, another Hispanic, Latino, or Spanish	☐☐Yes, Mexican, Mexican American, or Chicano	□□Yes, Mexican, Mexican American, or Chicano	☐☐Yes, Mexican, Mexican American, or Chicano	□□Yes, Mexican, Mexican American, or Chicano	☐☐Yes, Mexican, Mexican American, or Chicano	☐☐Yes, Mexican, Mexican American, or Chicano
origin," ask Question 5c. Otherwise, check appropriate box and move to next person.	□□Yes, Puerto Rican					
	□□Yes, Cuban					
5c. What is that origin or origins? For example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.?	☐☐Yes, another Hispanic, Latino, or Spanish origin(s):					
❖ Enter the group(s) provided by the respondent in the "Yes, another Hispanic, Latino, or Spanish origin" write-in box.						
❖ Complete all parts of Question 6 (A-G) for each person before	Householder:	Person 2:	Person 3:	Person 4:	Person 5:	Person 6:
moving on to the next person.		00000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000000000000000000000000000000000	00000000000000000000000000000000000000
❖ Flashcard: "RACE"	□□White	□□White	□□White	□□White	□□White	□□White
6a. Using this list, choose one or more races.	□□Black or African American	□□Black or African American				
Are you/Is <name> White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or</name>	□□American Indian or Alaska Native					
Other Pacific Islander, or Some other race?	□□Asian	□□Asian	∏∏Asian	□□Asian	□□Asian	∏∏Asian
	□□Native Hawaiian or Other Pacific Islander					
	□□Some other race					

#### 6a\_SKIP

- ❖ If person has a response of "White" to Question 6a, ask Question 6b for that person.
- ❖ Otherwise, SKIP to 6b\_SKIP.

6b. What is your/<NAME's> White origin or origins? For example, German, Irish, English, Italian, Lebanese, Egyptian, etc.

❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.







#### 6b\_SKIP

- ❖ If person has a response of "Black or African American" to Question 6a, ask Question 6c for that person.
- ❖ Otherwise, SKIP to 6c\_SKIP.

6c. What is your/<NAME's> Black or African American origin or origins? For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.

Householder:
00000000000000000000000000000000000000
Origin(s):

Person 2:	
Origin(s):	

Person 2.

# Person 3: Origin(s):

# Person 4: Origin(s):

Origin(s):	
   00000000000000000000   000	

Person 5:

## Origin(s):

Person 6:

Person 6:

ППП

#### 6c\_SKIP

- ❖ If person has a response of "American Indian or Alaska Native" to Question 6a, ask Question 6d for that person.
- Otherwise, SKIP to 6d\_SKIP.

6d. What is your/<NAME's> American Indian or Alaska Native enrolled or principal tribe or tribes? For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.

*	Enter the group(s) provided by the respondent in the
	corresponding write-in box in this row.

Householder: 000000000000000000000000000000000000
Tribe(s):

ППП

Tribe(s):

Person 3:	
☐ Tribe(s):	
00000000000000000000000000000000000000	

Person 4:
Tribe(s):

Person 5:	
□ Tribe(s):	

00000000000000000000000000000000000000	
Tribe(s):	

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 $\square\square$ Chinese

□□Filipino

∏∏Asian Indian

∏∏Vietnamese

Person 5:

□□Other Pacific

Islander:

#### 6d\_SKIP

- ❖ If person has a response of "Asian" to Question 6a, ask Question 6e for that person.
- ❖ Otherwise, SKIP to 6e\_SKIP.

6e. You may choose one or more Asian groups. Are you/Is <NAME> Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, or of some other Asian origin?

- ❖ If Chinese, Filipino, Asian Indian, Vietnamese, Korean, or Japanese, check the appropriate box.
- ❖ If response is "Other Asian," ask Question 6f. Otherwise, check appropriate box and move to next person.

6f. What is that origin or origins? For example, Pakistani, Cambodian, Hmong, etc.?

❖ Enter the group(s) provided in the corresponding Other Asian write-in space in this row.

][Chinese	
][Filipino	

∏Asian Indian

∏∏Vietnamese

∏∏Korean

∏∏Japanese

∏∏Samoan

Islander:

∏∏Chamorro

□□Other Pacific

 $\square$ Other Asian:

∏∏Chinese □□Filipino ∏∏Asian Indian

∏∏Vietnamese

∏∏Korean

∏∏apanese

 $\square$ Other Asian:

∏∏Asian Indian ∏∏Vietnamese ∏∏Korean

∏∏Chinese

∏∏Filipino

∏∏apanese

 $\square$ Other Asian:

∏∏Samoan

Islander:

∏∏Chamorro

□□Other Pacific

∏∏Korean □□Japanese  $\square$ Other Asian:

∏∏Chinese

□□Filipino

∏Asian Indian

 $\prod V$ ietnamese

∏∏Korean □□Japanese □□Other Asian:

∏Korean
□□Japanese
□□Other Asian:

∏∏Chinese

□□Filipino

∏∏Asian Indian

∏∏Vietnamese

#### 6f SKIP

- ❖ If person has a response of "Native Hawaiian or Other Pacific Islander" to Question 6a, ask Question 6g for that person.
- ❖ Otherwise, SKIP to 6g\_SKIP.

6g. You may choose one or more Pacific Islander groups. Are vou/Is <NAME> Native Hawaiian, Samoan, Chamorro, or of some other Pacific Islander origin?

- ❖ If Native Hawaiian, Samoan, or Chamorro, check the appropriate box.
- ❖ If response is "Other Pacific Islander," ask Question 6h. Otherwise, check appropriate box and move to next person.

6h. What is that origin or origins? For example, Tongan, Fijian, Marshallese, etc.?

❖ Enter the group(s) provided in the corresponding Other Pacific Islander write-in space in this row.

Householder:	Person 2:		
∏Native Hawaiian	□□Native Haw		

□□Native Hawaiian
□ <b>□</b> Samoan
□□Chamorro
∏Other Pacific

Person 3:	Person 4:			
∏∏Native Hawaiian	∏∏Native			

∏Native Hawaiian	□□Native Hawaiian
∏Samoan	∏Samoan

∏∏Chamorro

Islander:

□□Other Pacific

□□Samoan	∏∏Samoan
□□Chamorro	□□Chamorro

□□Native Hawaiian

Person 6:

Islander:

### 6h\_SKIP ❖ If

- ❖ If person has a response of "Some Other Race" to Question 6a, ask Question 6i for that person.
- ❖ Otherwise, SKIP to 6i\_SKIP.

#### 6i. What is your/<NAME's> other race or origin?

❖ Enter the group(s) provided by the respondent in the corresponding write-in box in this row.

#### 6i SKIP

❖ After asking race questions for all persons on roster, continue with housing questions.

#### Now I am going to ask about this place...

- Use flashcard for building types.
- 7. Using this list, which best describes this building?
- Self-propelling RVs or motorhomes should be included in the category "Boat, RV, van, etc." Towable RVs, such as travel trailers or fifth-wheel trailers, should be included in the category "Mobile home."

A mobile home

A one-family house detached from any other house

A one-family house attached to one or more houses

A building with 2 apartments

A building with 3 or 4 apartments

A building with 5 to 9 apartments

A building with 10 to 19 apartments

A building with 20 to 49 apartments

A building with 50 or more apartments

Boat, RV, van, etc.

- ∏∏Mobile home
- ☐☐One-family house detached from any other house
- ☐☐One-family house attached to one or more houses
- ☐☐Building with 2 apartments
- ☐☐Building with 3 or 4 apartments
- ☐ Building with 5 to 9 apartments
- ☐☐Building with 10 to 19 apartments
- ☐ Building with 20 to 49 apartments
- ☐☐Building with 50 or more apartments
- □□Boat, RV, van, etc.

8. About when was this <fill building="" type=""> first built?</fill>	□□2000 or later: Enter year built:
❖ If the building was built in the year 2000 or later, enter the specific year.	□□1990-1999
2000 or later	□□1980-1989
1990-1999 1980-1989	□□1970-1979
1970-1979 1960-1969	□□1960-1969
1950-1959 1940-1949	□□1950-1959
1939 or earlier	□□1940-1949
	□□1939 or earlier
9a. In what year did you/ <fill householder=""> move into this <fill building="" type="">?</fill></fill>	Year:
9b. In what month was that?	Month:
	Nondi.
9b_SKIP  ❖ If building type is a HOUSE or a MOBILE HOME, ask Questions 10 and 11.  ❖ Otherwise, SKIP to Question 12a.	
10. Is this <fill building="" type=""></fill>	□□Less than 1 acre
On less than 1 acre, Between 1 and 9.9 acres,	□□Between 1 and 9.9 acres
or 10 or more acres?	□□10 or more acres

10_SKIP  ❖ If response is "Less than 1 acre," SKIP to Question 12a. ❖ Otherwise, go to Question 11a.	
11a. IN THE PAST 12 MONTHS, were there any sales of agricultural products from this property?	□□Yes
Yes No	□□No
<ul><li>11a_SKIP</li><li>❖ If response is "No," SKIP to Question 12a.</li><li>❖ Otherwise, go to Question 11b.</li></ul>	
11b. How much were the sales?	□□\$1 - \$999
\$1 - \$999 \$1 000 \$2 400	□□\$1,000 - \$2,499
\$1,000 - \$2,499 \$2,500 - \$4,999	□□\$2,500 - \$4,999
\$5,000 - \$9,999 \$10,000 or more	□□\$5,000 - \$9,999
	□□\$10,000 or more
The next questions are about the number and kinds of rooms at this place. Rooms must be separated by built-in archways or walls that extend out at least 6 inches and go from floor to ceiling.	Number of rooms:
12a. How many separate rooms are in this <fill building="" type=""> not counting bathrooms, porches, balconies, foyers, halls or unfinished basements?</fill>	
❖ INCLUDE bedrooms, kitchens, etc.	

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12b. How many of the rooms would you list as bedrooms if this <fill building="" type=""> were for sale or rent?</fill>	Number of bedrooms:
Bollish Wife for suic of fenc.	
13a. Does this <fill building="" type=""> have hot and cold running water?</fill>	□□Yes
13b. Does this <fill building="" type=""> have a bathtub or shower?</fill>	□□Yes
	□□No
13c. Does this <fill building="" type=""> have a sink with a faucet?</fill>	□□Yes
	□□No
13d. Does this <fill building="" type=""> have a stove or range?</fill>	□□Yes
13e. Does this <fill building="" type=""> have a refrigerator?</fill>	□□Yes
	□□No
14. What is the MAIN type of sewage disposal for this <fill building="" type="">?</fill>	□□Public sewer
Public sewer	□□Septic system or cesspool
Septic system or cesspool, or	□□Another type of sewage disposal
Another type of sewage disposal	

15. Can you or any member of this household both make and receive phone calls when at this <fill building="" type="">? Include calls using cell phones,</fill>	□□Yes
land lines, or other phone devices.	□□No
Yes No	
16a. At this <fill building="" type="">, do you or any member of this household own or use a desktop or laptop-computer?</fill>	□□Yes
	□□No
16b. At this <fill building="" type="">, Do you or any member of this household own or use a smartphone?</fill>	The state of the
	□□No
16c. At this <fill building="" type="">, Do you or any member of this household own or use a tablet or other portable wireless computer?</fill>	□□Yes
16d. At this <fill building="" type="">, Do you or any member of this household own or use some other type of computer?</fill>	□□Yes
	□□No
16d_SKIP	
<ul> <li>If response to Question 16d is "No," SKIP to Question 17.</li> <li>Otherwise, go to Question 16e.</li> </ul>	
16e. What is this other type of computer?	Other computer type:

17. At this <fill building="" type="">, do you or any member of this household have access to the Internet?</fill>	□□Yes
nouschold have decess to the internet.	
Yes No	
17_SKIP	
<ul> <li>If response to Question 17 is "No," SKIP to Question 20.</li> <li>Otherwise, go to Question 18.</li> </ul>	
18. At this <fill building="" type="">, Do you or any member of this household pay a cell phone company or Internet service provider to access the</fill>	□□Yes
Internet?	□□No
Yes No	
<b>18_SKIP</b> ❖ If response to Question 18 is "No," SKIP to Question 20.  ❖ Otherwise, go to Question 19.	
19a. Do you or any member of this household have access to the Internet using a cellular data plan for a smartphone or other mobile device?	□□Yes
	□□No
19b. Do you or any member of this household have access to the Internet using a broadband or high speed Internet service such as cable, fiber optic, or DSL	□□Yes
service installed in this <fill building="" type="">?</fill>	□□No
19c. Do you or any member of this household have access to the Internet using a satellite Internet service installed in this <fill building="" type="">?</fill>	□□Yes
•	□□No

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I di di cipanti ib iii	 		 	 	 	

19d. Do you or any member of this household have access to the Internet using	□□Yes
a dial-up Internet service installed in this <fill building="" type="">?</fill>	□□No
10. De very en annument of this beyond like the lettermet veing	
19e. Do you or any member of this household have access to the Internet using some other service?	□□Yes
19e_SKIP	
❖ If response to Question 19e is "No," SKIP to Question 20.	
❖ Otherwise, go to Question 19f.	
19f. What is this other type of Internet service?	
1 131. WHALIS HIIS OTHELL VICE OF THEFTHELSELVICE:	
150 What is this other type of internet services	Other Internet type:
250 What is this other type of internet services	Other Internet type:
20. How many cars, vans, and trucks of one-ton capacity or less are kept at	Other Internet type:
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?	
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)	□□None
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)  None	
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)  None	□□None □□1 □□2 □□3
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)  None	□□None □□1 □□2 □□3 □□4
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)  None 1 2 3 4 5	□□None □□1 □□2 □□3
20. How many cars, vans, and trucks of one-ton capacity or less are kept at home for use by members of this household?  (If a business vehicle is available for personal use, it should be included.)  None	□□None □□1 □□2 □□3 □□4

<ul> <li>21. Are any of the following types of electric vehicles kept at home for use by members of this household?</li> <li>Read one at a time:</li> <li>A plug-in electric vehicle?</li> <li>Another type of electric vehicle?</li> </ul>	Plug-in electric vehicle:  □□Yes □□No  Another type of electric vehicle: □□Yes □□No
22a. To heat this <fill building="" type="">, which fuel do you use MOST—</fill>	□□Gas
Gas,	□□Electricity
Electricity, Fuel oil or kerosene,	□□Fuel oil or kerosene
Coal or coke, Wood,	□□Coal or coke
Solar energy, or Some other fuel?	□□Wood
	□□Solar energy
	☐ Some other fuel
	□□No fuel used
<ul> <li>22a_SKIP</li> <li>If response to 22a is "Gas," go to Question 22b.</li> <li>Otherwise, SKIP to Question 23.</li> </ul>	
22b. Is it natural gas from underground pipes serving the neighborhood?	☐ Yes
Yes No	□□No

22b_SKIP	
❖ If response to Question 22b is "Yes," SKIP to Question 23.	
Otherwise, go to Question 22c.	
22c. Is it a gas such as propane or butane?	☐ Yes
Yes	□□No
No No	
23. Does this <fill building="" type=""> use solar panels that generate</fill>	□□Yes
electricity?	
Yes	□□No
No No	
The next few questions deal with general utility use	□□Yes
24a. Does anyone in this household pay for electricity?	
2 ia. Does anyone in ans nousenota pay for electricity.	
Yes	
No	
24a_SKIP	
❖ If response to 24a is "No," SKIP to Question 24c.	
Otherwise, go to Question 24b.	
24b. LAST MONTH, what was the cost of electricity for this <fill< th=""><th>Cost of Electricity: \$</th></fill<>	Cost of Electricity: \$
BUILDING TYPE>?	
❖ Estimate last month's cost in dollars.	
❖ If electricity and gas are paid together, enter the combined amount under	
electricity and enter that it includes gas in Question 24f.	

24b_SKIP  ❖ If Question 24b was asked, SKIP to Question 24d.  ❖ Otherwise, go to Question 24c.	
24c. Are the electricity costs included in the rent or condominium fee or is there no charge for electricity?  Included in rent or condominium fee No charge for electricity  24d. Does anyone in this household pay for gas?  Yes No	□□Included in rent or condominium fee □□No charge for electricity □□Yes □□No
24d_SKIP  ❖ If response to 24d is "No," SKIP to Question 24f.  ❖ Otherwise, go to Question 24e.	
24e. LAST MONTH, what was the cost of gas for this <fill building="" type="">?  * Estimate last month's cost in dollars.</fill>	Cost of Gas: \$
<ul> <li>24e_SKIP</li> <li>If Question 24e was asked, SKIP to Question 24g.</li> <li>Otherwise, go to Question 24f.</li> </ul>	
24f. Are the gas costs included in the rent or condominium fee, or included in the electricity payment, or is there no charge for gas?  Included in rent or condominium fee Included with electricity payment recorded above No charge for gas	☐☐Included in rent or condominium fee ☐☐Included in electricity payment recorded above ☐☐No charge for gas

Participant ID #:
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24g. Does anyone in this household pay for water and sewer?	□□Yes
Yes No	
INO	
24g_SKIP  ❖ If response to 24g is "No," SKIP to Question 24i.  ❖ Otherwise, go to Question 24h.	
24h. IN THE PAST 12 MONTHS, what was the cost of the water and sewer for this <fill building="" type="">?</fill>	Water and Sewer Cost: \$
❖ Estimate past 12 months' cost in dollars.	
24h_SKIP  ❖ If Question 24h was asked, SKIP to Question 24j.  ❖ Otherwise, go to Question 24i.	
24i. Are the water and sewer costs included in the rent or condominium fee, or is there no charge for water and sewer?	□□Included in rent or condominium fee
Included in rent or condominium fee	□□No charge for water and sewer
No charge for water and sewer	
24j. Does this household use other fuels like oil, coal, kerosene, wood or any other fuel?	□□Yes
Yes	□□No
No No	
24j_SKIP  ❖ If response to Question 24j was "No," SKIP to Question 25.  ❖ Otherwise, go to Question 24k.	

24k. Does anyone in this household pay for other fuels like oil, coal, kerosene, wood or any other fuel?	□□Yes
wood of any other fact:	
Yes No	
24k_SKIP	
<b>❖</b> If response to Question 24k is "No," SKIP to Question 24m.	
❖ Otherwise, go to Question 24L.	
24L. IN THE PAST 12 MONTHS, what was the cost of other fuels like oil,	□□Cost of Other Fuels: \$
coal, kerosene, wood, or any other fuel for this <fill building="" type="">?</fill>	
❖ Estimate past 12 months' cost in dollars.	
Listifiate past 12 months cost in donars.	
24L_SKIP	
<ul> <li>If Question 24L was asked, SKIP to Question 25.</li> <li>Otherwise, go to Question 24m.</li> </ul>	
• Otherwise, go to Question 24m.	
24m. Are the costs of the other fuels like oil, coal, kerosene, wood or any other fuel included in the rent or condominium fee, or is there no charge for other	□□Included in rent or condominium fee
fuels?	□□No charge for other fuels
Included in rent or condominium fee No charge for other fuels	
25. In 2019, did you or any member of this household receive benefits from the Food Stamp Program or SNAP, the Supplemental Nutrition Assistance	□□Yes
Program? Do NOT include WIC, the School Lunch Program, or assistance	
1	
from food banks.	
Yes No	

The next few questions refer to this <fill building="" type="">.</fill>	□□Yes
26a. Is this <fill building="" type=""> part of a condominium?</fill>	□□No
Yes No	
26a_SKIP  ❖ If response to 26a is "No," SKIP to Question 27.  ❖ Otherwise, go to Question 26b.	
26b. Is there a condominium fee?	□□Yes
Yes	□□No
No	
26b_SKIP  ❖ If response to 26b is "No," SKIP to Question 27.  ❖ Otherwise, go to Question 26c.	
26c. What is the MONTHLY condominium fee?	Monthly Condo Fee: \$
❖ Estimate monthly amount in dollars.	
27. Do you or does someone in this household own this <fill building<="" th=""><th>☐☐ Own with a mortgage or loan including home equity loans</th></fill>	☐☐ Own with a mortgage or loan including home equity loans
TYPE> with a mortgage or loan including home equity loans, own it free and clear, rent it, or occupy it without having to pay rent?	□□ Own free and clear
Own with a mortgage or loan including home equity loans Own free and clear Rent Occupy without having to pay rent	☐☐ Rent ☐☐ Occupy without having to pay rent

27_SKIP	
♦ If response to Question 27 is "Rent," go to Question 28a.	
Otherwise, the interview is closed.	
28a. What is the MONTHLY rent for this <fill building="" type="">?</fill>	Monthly Rent: \$
Estimate monthly rent in dollars.	
28b. Does the MONTHLY rent include any meals?	□□ Yes
Yes	
No	
Overcount Follow-up	Explanation:
We are conducting research to understand why people stay in more than one	
place. Earlier in the survey you indicated that <name(s) additional="" from="" person(s)=""> sometimes live(s) somewhere else or is (are) only staying here for a</name(s)>	
short time.	
Could you briefly explain <name(s) additional="" from="" person(s)=""> 's living</name(s)>	
situation?	