A ACCICNMENT INFORMATION

HOUSING UNIT ADDRESS REGISTER 2020 Census of American Samoa

1.	IDENTIFICATION
County	
BCU	
Book	of

2. ASSIGNMENT INFORMATION																
		Name	e – Pleas	e Print	Employee ID Number	Telephone	Number	Date		Certification Statement – I certify that the information is true to the best of my knowledge and the work completed according to Census Bureau procedures.					n is	
								Assigned	Completed	The Crew Leader and all Enumerators must sign this certification statement.						
Crew Leader	 															
Enumerator																
Reassigned Enun	nerator															
Reassigned Enun	nerator								 							
				3	. ENUMERATO	R DAILY P	ROGRES	SS RECO	RD (LISTIN	G)						
Housing Units Listed	Da	ıte														
	Nun	nber														
	4. ENUMERATOR DAILY PROGRESS RECORD (ENUMERATION)															
Housing Units Enumerated	Da	ate														
	Nun	nber														

Remarks



Census 2020
American Samoa

5. OFFICE USE ONLY											
Name of Reviewer	Date	Initials									

Before sending to the Census Office, verify the following: The Enumerator has made entries in a legible manner. All appropriate fields are completed in the Address Listing Page for Housing Units. There are no duplicate addresses listed in the Address Listing Page for Housing Units. There is an entry of 0 in Pop. Count for vacant units in the Address Listing Page for Housing Units. The Enumerator completed the Assignment Information section. The Quality Control check is complete.

SPECIAL NOTICE

INFORMATION CONTAINED IN THIS ADDRESS REGISTER IS CONFIDENTIAL.

ALL ENTRIES MADE IN THIS ADDRESS REGISTER MUST BE LEGIBLE, COMPLETE, AND ACCURATE.

FORM D-ARCP-AS (4-11-2019)

2. ASSIGNMENT INFORMATION

HOUSING UNIT ADDRESS REGISTER 2020 Census of Guam

1.	IDENTIFICATION	
County		
BCU		
Book	_ of	

	Name – Please Print		Employee ID Telephone Number Number		Number		Date	Certification Statement – I certify that the information is true to the best of my knowledge and the work completed according to Census Bureau procedures.					n is			
								Assigned	I Completed				n this			
Crew Leader																
Enumerator									ļ							
Reassigned Enun	nerator															
Reassigned Enun	nerator															
				3	. ENUMERATO	R DAILY PR	ROGRES	SS RECO	RD (LISTIN	G)						
Housing Units Listed	Dat	te														
Listed	Num	ber														
4. ENUMERATOR DAILY PROGRESS RECORD (ENUMERATION)																
Housing Units Enumerated	Da	te														
	Num	ber														

Remarks



Census 2020

5. OFFICE USE ONLY											
Name of Reviewer	Date	Initials									

CREW LEADER REVIEW CHECKLIST
Before sending to the Census Office, verify the following:
The Enumerator has made entries in a legible manner.
All appropriate fields are completed in the Address Listing Page for Housing Units.
There are no duplicate addresses listed in the Address Listing Page for Housing Units.
There is an entry of 0 in Pop. Count for vacant units in the Address Listing Page for Housing Units.
The Enumerator completed the Assignment Information section.
The Quality Control check is complete.

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HOUSING UNIT ADDRESS REGISTER 2020 Census of the Commonwealth of the Northern Mariana Islands

1	I. IDENTII	FICATION	
County			
BCU			
Book	of	_	

2. ASSIGNMENT INFORMATION																
	 	Name	e – Pleas	e Print	Employee ID Number	Telephone	Number	Date		true to	Certification Statement – I certify that the information is true to the best of my knowledge and the work completed according to Census Bureau procedures.					
	 							Assigned	d The Cr							
Crew Leader																
Enumerator	 															
Reassigned Enun	nerator															
Reassigned Enun	nerator															
				3	. ENUMERATO	R DAILY P	ROGRES	SS RECO	RD (LIST	ING)						
Housing Units Listed	D	ate														
	Nu	mber														
				4. EN	IUMERATOR D	AILY PRO	GRESS F	RECORD	(ENUMEI	RATION)						
Housing Units Enumerated	D	ate														
	Nu	mber														

Remarks



Census
2020
Commonwealth of the Northern Mariana Islands

5. OFFICE USE ONLY											
Name of Reviewer	Date	Initials									

Before sending to the Census Office, verify the following: The Enumerator has made entries in a legible manner. All appropriate fields are completed in the Address Listing Page for Housing Units. There are no duplicate addresses listed in the Address Listing Page for Housing Units. There is an entry of 0 in Pop. Count for vacant units in the Address Listing Page for Housing Units. The Enumerator completed the Assignment Information section. The Quality Control check is complete.

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HOUSING UNIT ADDRESS REGISTER 2020 Census of the U.S. Virgin Islands

1.1	IDENTIFICATION
County	
BCU	
Book	_ of

2. ASSIGNMENT INFORMATION																								
	1	Name – Please Print			Name - Please Print			Name - Please Print Emplo			Employee ID Number		Telephone Number			Date		Certification Statement – I certify that the information is true to the best of my knowledge and the work completed according to Census Bureau procedures.						n is
									Assigne	d Co	ompleted	The Crew Leader and all Enumerators must so certification statement.				must sigi	sign this							
Crew Leader																								
Enumerator																								
Reassigned Enumer	rator																							
Reassigned Enume	Reassigned Enumerator																							
			3.	ENU	MERA	FOR D	AILY PF	ROGRES	SS REC	ORD (LISTIN	G)												
Housing Units Listed	Date																							
	Number																							
4. ENUMERATOR DAILY PROGRESS RECORD (ENUMERATION)																								
Housing Units Enumerated	Date																							
3	Number																							

Remarks



5. OFFICE USE ONLY												
Name of Reviewer	Date	Initials										

Before sending to the Census Office, verify the following: The Enumerator has made entries in a legible manner. All appropriate fields are completed in the Address Listing Page for Housing Units. There are no duplicate addresses listed in the Address Listing Page for Housing Units. There is an entry of 0 in Pop. Count for vacant units in the Address Listing Page for Housing Units. The Enumerator completed the Assignment Information section. The Quality Control check is complete.

SPECIAL NOTICE

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OMB No. 0607-1006: Approval Expires 11/30/2021

County _

FORM **D-ARLP-AS** (4-11-2019)



ADDRESS LISTING PAGE FOR HOUSING UNITS

2020 Census of American Samoa

	ATTES OF AIMERICAN SAMOA												BCU _			
Line No.	Questionnaire ID		Date Listed	Map Spot I	No. Deve	elopment/Building Name Ol Subdivision/Place Name	Address No.	Complete	Complete Street Name OR (9)		-		Apt/Unit No. Village OR (11) (13)		Rema	arks
				Within Map Sp	pot ID		Address Type Code	Physical Lo	ocation Description	ZIP Code	Estate - U.S	. Virgin Islands Only	<u>'</u>			
(1)	(2)		(3)	(5)		(6)	(8)		(10)	(12)		(14)	(1	5)		
(1)	(2)	> (3	3)	(4)	(6)		(7)	(9)		(11)	(13)		(15)			
				(5)			(8)	(10)		(12)	(14)		(00) 1104			
	(16) Case Status Code – Enumeration	(1		t Attempts – ration (Tally)	(18) Mailabl (Y/N/Dł		20) Self Proxy	(21) Pop. Count	(22) Final Interview Outcome Code (23	B) QC Action (24	Code – FFU	(25) Contact Attempts FFU – Tally	(26) JIC1 (27) JIC2			
							□ Рюху									
(1)	(2)	— → (3	3)	(4)	(6)		(7)	(9)		(11)	(13)		(15)			
	71.1 2.1 2.1322 112.112			(5)			(8)	(10)		(12)	(14)					
	(16) Case Status Code – Enumeration	(1	17) Contac Enumer	t Attempts – ration (Tally)	(18) Mailabl (Y/N/DI		20) Self Proxy	(21) Pop. Count	(22) Final Interview Outcome Code (23	B) QC Action (24) Case Status Code – FFU	(25) Contact Attempts FFU – Tally	(26) JIC1 (27) JIC2			
(1)	(2)	(3	3)	(4)	(6)		(7)	(9)		(11)	(13)		(15)			
	< APPLY LABEL HERE	>		(5)			(8)	(10)		(12)	(14)					
	(16) Case Status Code – Enumeration	(1	17) Contac Enumer	t Attempts – ration (Tally)	(18) Mailabl (Y/N/Dł		20) Self Proxy	(21) Pop. Count	(22) Final Interview Outcome Code	B) QC Action (24) Case Status Code – FFU	(25) Contact Attempts FFU – Tally	(26) JIC1 (27) JIC2			
S _ Qi		Case State		Notice of Visit	Ant -	Apartment Apartment Pop	- Population		Final Interview Outconterview MOV - Moved in		E - Usual Home	Page	Totals			
S - Single Unit M - Multi-Unit T - Trailer/Mobile Home O - Other GQ - Group Quarters T - Trailer/Mobile NLQ - Non-Living Quarters HOME A - Appointment GC - Gated Communit IC - Interview Conduct LB - Language Barrier NC - No Contact		ommunity I Conducted I Barrier I	RA - Rest	ricted Access sal afe	BCU - FFU -		Quality Control C Yes, No,	CO – Pop Count C B – Language Ba PI – Partial Interv	Only NC - No Conta arrier RA - Restricted	d Access UI	Elsewhere N - Unsafe C - Vacant	Occupied Vacant HUs HUs	GQs	TLs		

FORM **D-ARLP-GU** (4-11-2019) OMB No. 0607-1006: Approval Expires 11/30/2021



ADDRESS LISTING PAGE FOR HOUSING UNITS

2020 Census of Guam

,	Guam		2020 Census of Guam										
	STATES OF F					BCU							
Line No.	Questionnaire ID	Date Liste		Development/Building Name OR Subdivision/Place Name	Address No.	Complete Street Name OR (9)	Apt/Unit No.	Village OR (13)	Remarks				
			Within Map Spo	t ID	Address Type Code	Physical Location Description	ZIP Code	Estate – U.S. Virgin Islands	Only				
(1)	(2)	(3)	(5)	(6)	(8)	(10)	(12)	(14)	(15)				
(1)	(2) ≪ — — — — — APPLY LABEL HERE — — — —	(3)	(4)	(6)	(8)	(9) 	(11)	(13)	(15)				
	(16) Case Status Code – Enumeration	(17) Co	ntact Attempts – (1			(21) Pop. Count (22) Final Interview (2	3) QC Action (24)	Case Status (25) Contact Atter	npts (26) JIC1				
		En	umeration (Tally)	(Y/N/DK)	☐ Self ☐ Proxy	Outcome Code		Code – FFU FFU – Tally	(27) JIC2				
(1)	(2) < APPLY LABEL HERE	(3)	(4)	(6)	(7)	(9)	(11)	(13)	(15)				
			(5)		(8)	(10)	(12)	(14)					
	(16) Case Status Code – Enumeration	(17) Co En	ntact Attempts – (1 umeration (Tally)	8) Mailable? (Y/N/DK) (19) Date Enumerated (2	20) Self Proxy	(21) Pop. Count (22) Final Interview Outcome Code	3) QC Action (24)	Case Status (25) Contact Atter (25) Contact Atter (25) FFU – Tally	(27) JIC2				
(1)	(2) ⋖ — — — — APPLY LABEL HERE — — — —	(3)	(4)	(6)	(7)	(9)	(11)	(13)	(15)				
			(5)		(8)	(10)	(12)	(14)					
	(16) Case Status Code – Enumeration	(17) Co En	ntact Attempts – (1 umeration (Tally)	(Y/N/DK)	⊇0) ☐ Self ☐ Proxy	(21) Pop. Count (22) Final Interview Outcome Code	3) QC Action (24)	Case Status (25) Contact Atter ((26) JIC1 (27) JIC2				
	Address Type Codes Ingle Unit GQ – Group Quarters A – Appoints		_eft Notice of Visit			Final Interview Outc	After April 1 UHE	E – Usual Home Elsewhere	age Totals				
M – Mu T – Tra Ho O – Oth	tiler/Mobile NLQ - Non-Living Quarters me IC - Interview LB - Language	v Conducted RE – ye Barrier UN –	Jnsafe	FFU – Field Followup Y/N/DK –	Yes, No,	O – Pop Count Only B – Language Barrier PI – Partial Interview NC – No Conta RA – Restricte REF – Refusal	d Access UN	I - Unsafe Occupied Va	cant Us GQs TLs				

OMB No. 0607-1006: Approval Expires 11/30/2021

FORM **D-ARLP-MI** (4-11-2019)



ADDRESS LISTING PAGE FOR HOUSING UNITS

2020 Census of the Commonwealth of the Northern Mariana Islands County BCU Line **Questionnaire ID** Date Map Spot No. **Development/Building Name OR** Address No. **Complete Street Name OR** Apt/Unit No. Village OR **Remarks** Subdivision/Place Name No. Listed (11) (7) (13)Estate - U.S. Virgin Islands Only **ZIP Code Address Type Code Physical Location Description** Within Map Spot ID (1) (2) (3) (5) (6) (10) (12) (15) (14) (4) (11) (13) (15) — — APPLY LABEL HERE — (10)(14) (5) (8) (12)(26) JIC1 (18) Mailable? (19) Date Enumerated (22) Final Interview (23) QC Action (24) Case Status (25) Contact Attempts (16) Case Status Code - Enumeration (17) Contact Attempts -(21) Pop. Count Code - FFU Enumeration (Tally) (Y/N/DK) FFU - Tally Outcome Code Self (27) JIC2 ☐ Proxy (2) (4) (6) (7) (9) (11) (13) (15)(5) (8) (10)(12)(14) (18) Mailable? (26) JIC1 (19) Date Enumerated (25) Contact Attempts (17) Contact Attempts -(22) Final Interview (23) QC Action (24) Case Status (21) Pop. Count (16) Case Status Code - Enumeration Enumeration (Tally) (Y/N/DK) Outcome Code Code – FFU FFU - Tally Self Proxy (27) JIC2 (6) (11) (15) (4) (9) (13)--- APPLY LABEL HERE ----(5) (8) (10) (12) (14) (16) Case Status Code - Enumeration (17) Contact Attempts -(18) Mailable? (19) Date Enumerated (21) Pop. Count (22) Final Interview (23) QC Action (24) Case Status (25) Contact Attempts (26) JIC1 Enumeration (Tally) (Y/N/DK) Outcome Code Code - FFU FFU - Tally ☐ Self Proxy (27) JIC2 **Final Interview Outcome Codes** Address Type Codes **Case Status Codes Abbreviations Page Totals** CI - Completed Interview MOV - Moved in After April 1 UHE - Usual Home NV - Left Notice of Visit Apt - Apartment **S** – Single Unit **GQ** - Group Quarters **A** – Appointment **Pop.** – Population Elsewhere **M** – Multi-Unit **TL** - Transitory Locations **GC** – Gated Community RA - Restricted Access **BCU** - Basic Collection Unit QC - Quality Control **CO** – Pop Count Only NC - No Contact **UN** - Unsafe Vacant Occupied T - Trailer/Mobile NLQ - Non-Living Quarters IC - Interview Conducted RE - Refusal FFU - Field Followup Y/N/DK - Yes, No, **LB** - Language Barrier RA - Restricted Access GQs TLs HUs HUs VAC - Vacant Home Don't Know PI - Partial Interview REF - Refusal **LB** – Language Barrier UN - Unsafe No. - Number O - Other NC - No Contact OT - Other

OMB No. 0607-1006: Approval Expires 11/30/2021



ADDRESS LISTING PAGE FOR HOUSING UNITS

2020 Census of the U.S. Virgin Islands

County _

	Vizes of U.S. Virgin Islands														BCU _	
Line No.	Questionnaire ID		Date Listed	Map Spot	No. Dev	elopment/Building Nan Subdivision/Place Nan	ne OR ne	Address No.			Apt/Unit No.					arks
				Within Map S	pot ID			Address Type Code	Physical Lo	ocation Description	ZIP Code	Estate - U.S	. Virgin Islar	nds Only		
(1)	(2)		(3)	(5)		(6)		(8)		(10)	(12)		(14)		(15	5)
(1)	(2) < APPLY LABEL HERE		(3)	(5)	(6)			(8)	(9)		(11)	(13)			(15)	
	(16) Case Status Code – Enumeration		(17) Contac Enume	t Attempts – ration (Tally)	(18) Mailab (Y/N/D) ☐ Self ☐ Proxy	21) Pop. Count	(22) Final Interview Outcome Code (25)	3) QC Action (2-	4) Case Status Code – FFU	(25) Contact A FFU – Ta	lly	(26) JIC1 (27) JIC2	
1)	(2) <	>	(3)	(5)	(6)			(8)	(9)		(11)	(13)			(15)	
	(16) Case Status Code – Enumeration		(17) Contac Enume	et Attempts – ration (Tally)	(18) Mailab (Y/N/D	le? (19) Date Enumerate) (Self Proxy	21) Pop. Count	(22) Final Interview Outcome Code (23)	3) QC Action (2-	4) Case Status Code – FFU	(25) Contact A FFU – Ta	lly	(26) JIC1 (27) JIC2	
(1)	(2)	>	(3)	(5)	(6)			(8)	(9) (10)		(11)	(13)			(15)	
	(16) Case Status Code – Enumeration		(17) Contac Enume	et Attempts – ration (Tally)	(18) Mailab (Y/N/D	de? (19) Date Enumerate) Self Proxy	21) Pop. Count	(22) Final Interview Outcome Code (23)	3) QC Action (2-	4) Case Status Code – FFU	(25) Contact A FFU – Ta	lly	(26) JIC1 (27) JIC2	
S – Sir	Address Type Codes ngle Unit GQ – Group Quarters	se Status Codes NV – Left Notice of Visit			Apartment Abbreviation		opulation C	Final Interview Outco CI - Completed Interview MOV - Moved in				Usual Home Page		Totals		
	ailer/Mobile NLQ – Non-Living Quarters ome	GC - Gated Community IC - Interview Conducted B - Language Barrier IC - No Contact		afe	FFU -		I/ DK – Ye	es, No,	D – Pop Count C B – Language Ba II – Partial Interv	arrier RA – Restricte	d Access U	Elsewhere N - Unsafe C - Vacant	Occupied HUs	Vacant HUs	GQs	TLs