



Transitory Locations Continuation Questionnaire

FOR NPC
USE ONLY

TL Control Number

ACO

State

County

Tract

Block

Map Spot

← *APPLY LABEL HERE* →

Questionnaire of questionnaire(s)

Address Number

Unit Designation

Street Name or Rural Route Address

City

State

ZIP Code

Location Description

CONTINUATION QUESTIONNAIRE FOR TRANSITORY LOCATIONS

1. What is the name of Person ?

Print name below and verify the spelling.

First Name MI

Last Name(s)

2. Please read the RELATIONSHIP section on the Information Sheet.

How is this person related to Person 1? Mark ONE box.

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3. Is this person male or female? Mark ONE box.

Male Female

4. What will this person's age be on April 1, 2020? What is this person's date of birth? If you don't know the exact age, please estimate. For babies less than 1 year old, do not report the age in months. Report 0 as the age.

Age on April 1, 2020 years, Print numbers in boxes. Month , Day , Year of birth

NOTE: Please answer BOTH the question about Hispanic origin and the question about race. For this census, Hispanic origin is not a race.

5. Please read the HISPANIC ORIGIN section on the Information Sheet.

Is this person of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin, Yes, Mexican, Mexican Am., Chicano, Yes, Puerto Rican, Yes, Cuban, Yes, another Hispanic, Latino, or Spanish origin - Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.

6. Please read the RACE section on the Information Sheet. What is this person's race?

Mark one or more boxes AND print origins.

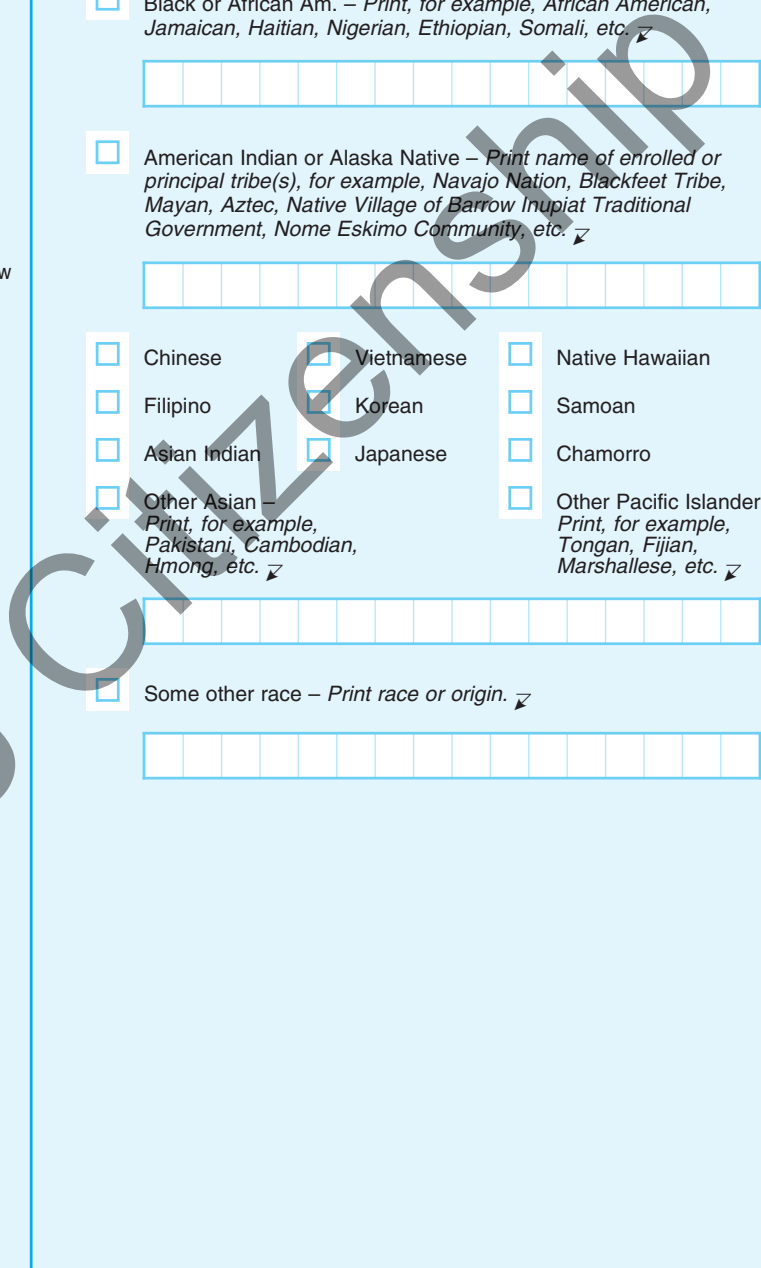
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- Some other race - Print race or origin.





8. Does this person usually live or stay somewhere else, other than this location?

- Yes
- No – Skip to the next person, if there is another person.

9. What is the full address of the place where this person lives or stays most of the time?

Address Number (For example: 5007)

Street Name (For example: N Maple Ave)

Apt/Unit (For example: Apt A or Lot 3)

Rural Route Address (if there is no street address)

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Draft: No Citizenship

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→ If needed, continue with the next person on another Continuation Questionnaire (D-CQ-TLRA) and update the number of continuation questionnaires on page 1 of both D-Q-TLRA and D-CQ-TLRA questionnaires.



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