OMB No. xxx-xxxx

U.S. DEPARTMENT OF COMMERCE

IInited Ctatog®

| | Lens | States Bureau | | | | AD | DRES | S LIS | T PAGE | E | | U.S. CENS | US BUREAL |
|---------------|-------------|---------------|---------|--|---------|--------------|---|-------------|---|--|--|-------------------------|-------------|
| 90 | CID: | | State | | | ; | Spec i | ial Ce | nsus | | Print Data/Time | | |
| | AA: | | | | | | | | | | | of | |
| | | Do Not | Action | Date Listed | Address | Address | Block No. | Map Spot | Location Address or Physical Location Description | | | | FS |
| No. | ID | Interview | Code | (month/day) (5) Date SC-Q Completed (month/day) | Status | Type | | No. | Address No. | | Street Name and Type (12) Physical Location Description (13) GO or T. Name/Facility Name | Apt/Unit No(15)Zip Code | Use Only |
| (1) | (2) | (3) | (4) | (6) | (7) | (8) | (9) | (10) | (11) | | GQ or TL Name/Facility Name | (16) | (17) |
| 1 | | | | | | | | | | | | _ <u>_</u> | |
| 2 | | | | | | | | | | | | | |
| 3 | | | | | | | | Y | | | | | |
| 4 | | | | | | | X | | | | | | |
| 5 | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | |
| | l | Action | n Codes | - For entry in column | (4): | | Act | ion Codes - | - Do Not Inter | view: | Address Type: | Address St | atus: |
| Nonicolacitia | | | | CW – Can D2 – Dupl | | Z – (| Z - Group Quarters (GQ) T - Transitory Location (TL) X - Questionnaire Previously Completed | | | S – Single Unit T – Trailer/Mobile Home M – Multi Unit O – Other | HU - Housing Unit GQ - Group Quarters TL - Transitory Location | | |

| FORM SC-921 (8-12-2022) | Page of | OMB No.xxxx-xxxx Approval Expires xx/xx/xxx |
|--------------------------------|---------|---|
| | | |

| | | | | | | | | | - '' | |
|----------|-----------------------------|---|----------------|------------------------|--|-----------------------|--------------|---------------------------|---|-----------|
| | This listing c | ontains confident | tial informati | on, including Title 13 | and Personally Identifiable Information (PII), the | e release of which is | prohibited | by the Privacy Act of 197 | 7 4 | |
| <u>C</u> | United States® ENSUS Bureau | U.S. DEPARTMENT OF COMMERCION U.S. CENSUS BUREAU Special Census | | | | | SCID: AA: | | Address Status: HU - Housing Unit GQ - Group Quarters TL - Transitory Location | |
| Line | Case ID | Date Listed | Address | | | | GQ or TL Nan | | ne/Facility Name | |
| No. | (from Form SC-Q) | | Status | Address | Street or Road Name | Apt/Unit N | No. | | 12) | Us Onl |
| | | - (4) | | No. | (8) | (10) | | | 13) | |
| | BIOCK INO. | Date SC-Q Completed | | | Physical Location Description | ZIP Cod | e — — — | | Telephone Number | - |
| (1) | (3) | (5) | (6) | (7) | (9) | (11) | | (| 14) | (15) |
| | | | | | | | | | | |
| | | | | | | | | | | _ |
| | | | | | | | | | | |