

This form contains confidential information, including Title 13 and Personally Identifiable Information (PII), the release of which is prohibited by the Privacy Act of 1974.



## ADDRESS REGISTER COVER PAGE Special Census

U.S. DEPARTMENT OF COMMERCE  
U.S. CENSUS BUREAU

SCID:

AA:

### 1. ASSIGNMENT INFORMATION

	Name (1)	Employee ID (2)	Telephone Number (3)	Date (month/day) (4)		<b>Certification statement</b> – I certify that the information is true to the best of my knowledge and the work completed according to Census procedures.  <b>Signature</b> – The FR/Reassigned FR and DQC FS must sign when the assignment is completed.
				Assigned To	Accepted From	
(a) FS						
(b) FR						
(c) Reassigned FR						
(d) DQC FS						

### 2. DAILY PROGRESS RECORD

(a) Date (month/day)										
Number of Questionnaires Completed	(b) Today									
	(c) To Date									
(d) Callbacks Outstanding										

### 3. Remarks

**FS Certification statement** – I certify that I have reviewed the Address Register and all accompanying documents and that the work has been completed satisfactorily.

**Signature** – FS must sign when the Address Register is accepted from the FR/Reassigned FR.

#### 4. OFFICE USE ONLY

Date of Office Review

Initials

**The contents of this Address Register are confidential by law (Title 13, U.S. Code). It may be seen only by sworn persons with a need to know and used solely for statistical purposes.**



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## ADDRESS LIST PAGE Special Census

SCID: \_\_\_\_\_ State: \_\_\_\_\_

Print Date/Time \_\_\_\_\_

AA: \_\_\_\_\_ County: \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_

Line No. (1)	Barcode ID (2)	Do Not Interview (3)	Action Code (4)	Date Listed (month/day) (5)	Address Status (7)	Address Type (8)	Block No. (9)	Map Spot No. (10)	Location Address or Physical Location Description			FS Use Only (17)
				Date SC-Q Completed (month/day) (6)					Address No. (11)	Street Name and Type (12) Physical Location Description (13) GQ or TL Name/Facility Name (14)	Apt/Unit No. (15) Zip Code (16)	
<b>1</b>				-----						-----		
<b>2</b>				-----						-----		
<b>3</b>				-----						-----		
<b>4</b>				-----						-----		
<b>5</b>				-----						-----		
<b>6</b>				-----						-----		
<b>7</b>				-----						-----		

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**Action Codes - For entry in column (4):**

- |                          |   |                         |
|--------------------------|---|-------------------------|
| <b>V</b> – Verified      | <b>N</b> – Nonresidential                 | <b>CW</b> – Cannot Work |
| <b>C</b> – Correction    | <b>E</b> – Empty Mobile Home/Trailer Site | <b>D2</b> – Duplicate   |
| <b>U</b> – Uninhabitable | <b>DCL</b> – Unable to Locate             |                         |

**Action Codes - Do Not Interview:**

- Z** – Group Quarters (GQ)  
**T** – Transitory Location (TL)  
**X** – Questionnaire Previously Completed

**Address Type:**

- S** – Single Unit    **T** – Trailer/Mobile Home  
**M** – Multi Unit    **O** – Other

**Address Status:**

- HU** – Housing Unit  
**GQ** – Group Quarters  
**TL** – Transitory Location

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## ADD PAGE Special Census

U.S. DEPARTMENT OF COMMERCE  
U.S. CENSUS BUREAU

SCID: \_\_\_\_\_

AA: \_\_\_\_\_

**Address Status:**

- HU** – Housing Unit
- GQ** – Group Quarters
- TL** – Transitory Location

Line No.	Case ID <i>(from Form SC-Q)</i>	Date Listed	Address Status	Location Address or Physical Location Description			GQ or TL Name/Facility Name <small>(12)</small>	FS Use Only
				Address No. <small>(7)</small>	Street or Road Name <small>(8)</small> Physical Location Description <small>(9)</small>	Apt/Unit No. <small>(10)</small> ZIP Code <small>(11)</small>		
<small>(1)</small>	<small>(2)</small> Block No. <small>(3)</small>	<small>(4)</small> Date SC-Q Completed <small>(5)</small>	<small>(6)</small>	<small>(7)</small>	<small>(8)</small> <small>(9)</small>	<small>(10)</small> <small>(11)</small>	<small>(12)</small> <small>(13)</small> <small>(14)</small>	<small>(15)</small>

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## NOTES PAGE – (Continued) Special Census

Line No. (1)	Notes (2)