OMB No. xxx-xxxx

U.S. DEPARTMENT OF COMMERCE

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		■ Bureau						ial Ce						
SCID:										Print Date/Time				
	4A:		County: .								Page	e of		
Line	Barcode ID	Do Not Interview	Action Code		Address	Address Type	Block No.	Map Spot No.	Lo		ation Address or Physical Location Description		FS	
No.			Code	(month/day)	Status				Address No.		Street Name and Type	Apt/Unit No.	Use Only	
				Date SC-Q Completed						<u> </u>	Physical Location Description	(15)	•	
				(month/day)							Physical Location Description (13) (13)	Zip Code		
(1)	(2)	(3)	(4)	(6)	(7)	(8)	(9)	(10)	(11)		GQ or TL Name/Facility Name	(16)	(17)	
(.,	(-)	(5)	(' /	(0)	(*)	(0)	(0)	(10)			(* ')	(10)	(17)	
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Action Codes - For entry in column (4):							Act	ion Codes -	- Do Not Inter	rview:	Address Type:	Address St	Address Status:	
	Verified		Nonresid	oritiai	CW - Car			Group Quarte			S – Single Unit T – Trailer/Mobile Home	HU - Housing U		
	Correction Uninhabita	-	E – Empty Mobile Home/Trailer Site DCL – Unable to Locate					Transitory Loc Questionnaire	ation (TL) Previously Con	nnleted	M – Multi Unit O – Other	GQ – Group Quantum TL – Transitory		
_	- minubitu	DC	- ∪nabl	t to Locate								i - Hariottory		

FORM **SC-920** (6-14-2022)

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

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	This listing of	ontains confident	ial information	on, including Title 13	and Personally Identifiable Information (PII), the	release of which is	prohibited	d by the Privacy Act of 197	74	
<u>C</u>	United States® ENSUS Bureau	U.S. DEPARTMENT OF COMMERCE U.S. CENSUS BUREAU ADD PAGE Special Census					SCID:		Address Status: HU - Housing Unit GQ - Group Quarters TL - Transitory Location	
Line	Case ID	Date Listed	Address		Location Address or Physical Location Description			GQ or TL Nan	ne/Facility Name	FS
No.	(from Form SC-Q)		Status	Address	Street or Road Name	Apt/Unit No.				_ Use
				No.	(8)	(10)			13)	
	DIOCK NO.	Completed			Physical Location Description	ZIP Cod	e — — —		Telephone Number	
(1)	(3)	(5)	(6)	(7)	(9)	(11)		(14)	(15)
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