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MI

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[illegible]

X

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

X

- ☐ Male ☐ Female

 years

[illegible][illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

2



Person

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MI

[illegible]

9

[illegible]

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

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

☐ Male ☐ Female

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years

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[illegible][illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

3



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.**

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

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

- ☐ Male ☐ Female

4. What was this person's age on (Special Census Day)? 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.**Print numbers in boxes.*

Age on (Special Census Day) Month Day Year of birth

years

→ 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.

- ☐ White – *Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc.* ↴

- ☐ Black or African Am. – *Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.* ↴

- ☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.* ↴

- | | | |
|---|--|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – <i>Print, for example, Pakistani, Cambodian, Hmong, etc.</i> ↴ | ☐ Other Pacific Islander – <i>Print, for example, Tongan, Fijian, Marshallese, etc.</i> ↴ | |

- ☐ Some other race – *Print race or origin.* ↴

→ If more people were counted in Question S4 on the SC-Q-TL, continue with the next person on the next page.

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.

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

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

- ☐ Male ☐ Female

4. What was this person's age on (Special Census Day)? 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.

Print numbers in boxes.

Age on (Special Census Day) Month Day Year of birth

 years

→ 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.

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- ☐ Yes, Cuban
- ☐ Yes, another Hispanic, Latino, or Spanish origin – Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc. ↘

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- | | | |
|--|---|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc. ↘ | ☐ Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc. ↘ | |

- ☐ Some other race – Print race or origin. ↘

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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.**

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

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

- ☐ Male ☐ Female

4. What was this person's age on (Special Census Day)? 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.**Print numbers in boxes.*

Age on (Special Census Day) Month Day Year of birth

years

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- | | | |
|---|--|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – <i>Print, for example, Pakistani, Cambodian, Hmong, etc.</i> ↴ | ☐ Other Pacific Islander – <i>Print, for example, Tongan, Fijian, Marshallese, etc.</i> ↴ | |

- ☐ Some other race – *Print race or origin.* ↴

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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.

- | | |
|---|--|
| ☐ Opposite-sex husband/wife/spouse | ☐ Father or mother |
| ☐ Opposite-sex unmarried partner | ☐ Grandchild |
| ☐ Same-sex husband/wife/spouse | ☐ Parent-in-law |
| ☐ Same-sex unmarried partner | ☐ Son-in-law or daughter-in-law |
| ☐ Biological son or daughter | ☐ Other relative |
| ☐ Adopted son or daughter | ☐ Roommate or housemate |
| ☐ Stepson or stepdaughter | ☐ Foster child |
| ☐ Brother or sister | ☐ Other nonrelative |

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Print numbers in boxes.

Age on (Special Census Day) Month Day Year of birth

 years

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- | | | |
|--|---|--|
| ☐ Chinese | ☐ Vietnamese | ☐ Native Hawaiian |
| ☐ Filipino | ☐ Korean | ☐ Samoan |
| ☐ Asian Indian | ☐ Japanese | ☐ Chamorro |
| ☐ Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc. ↘ | ☐ Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc. ↘ | |

- ☐ Some other race – Print race or origin. ↘

→ If needed, continue with the next person on another Continuation Questionnaire (SC-CQ-TL) and update the number of continuation questionnaires on page 8 of the SC-Q-TL and page 1 of the SC-CQ-TL questionnaires.



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