



Start Here

Please use a black or blue pen.

→ **NOTE:** Please answer **BOTH** Questions 5 and 6.

1 Please print your name —
Last Name

First Name

MI

2 a. Do you live here or stay here **MOST OF THE TIME?**

- Yes → *Skip to 2d*
 No

b. Do you have a place where you live or stay **MOST OF THE TIME?**

- Yes
 No → *Skip to 2d*

c. What is your telephone number? We may call you if we don't understand an answer.

Area Code + Number

d. **ANSWER ONLY IF THIS PLACE IS A SHELTER — Including tonight, how many nights during the past 7 nights did you stay in a SHELTER?**

- 7 nights
 6 nights
 5 nights
 4 nights
 3 nights
 2 nights
 1 night

3 What is your sex? Mark **ONE** box.

- Male Female

4 What is your age and what is your date of birth?
Print numbers in boxes.

Age on April 1, 2000 Month Day Year of birth

5 Are you Spanish/Hispanic/Latino? Mark the "No" box if **not** Spanish/Hispanic/Latino.

- No, not Spanish/Hispanic/Latino
 Yes, Mexican, Mexican Am., Chicano
 Yes, Puerto Rican
 Yes, Cuban
 Yes, other Spanish/Hispanic/Latino — *Print group.*

6 What is your race? Mark **one or more races** to indicate what you consider yourself to be.

- White
 Black, African Am., or Negro
 American Indian or Alaska Native — *Print name of enrolled or principal tribe.*

- Asian Indian Native Hawaiian
 Chinese Guamanian or Chamorro
 Filipino Samoan
 Japanese Other Pacific Islander — *Print race.*
 Korean
 Vietnamese
 Other Asian — *Print race.*

- Some other race — *Print race.*

7 If you live here or stay here **MOST OF THE TIME** → *Skip to 10 on the reverse side.*



8 What is the address of the place where you live or stay MOST OF THE TIME?

House number

Street name, Rural route and box, or PO box

Apartment number

City

County

State or foreign country

ZIP Code

9 If the address in question 8 is a rural route/box or PO box, and the place you live or stay MOST OF THE TIME has a house number/street address, print it below.

House number

Street or road name

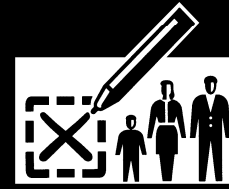
Apartment number

City

County

State or foreign country

ZIP Code



Your answers are important! Every person in the Census counts.

10 Please check this form to be sure you have answered all the required questions completely.

To return your form, please follow the instructions on the envelope that the form came in.

Thank you for completing this official U.S. Census 2000 form.

The Census Bureau estimates that, on average, each respondent will take 5 minutes to complete this form, including the time for reviewing the instructions and answers. Comments about the estimate should be directed to the Associate Director for Finance and Administration, Attn: Paperwork Reduction Project 0607-0856, Room 3104, Federal Building 3, Bureau of the Census, Washington, DC 20233.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget.

FOR OFFICE USE ONLY

A. GQ ID

B. PN

C. JIC1

D. JIC2

E. JIC3

F. JIC4

