

60PH-7. — "Household Questionnaire" used for sample outside large cities (front)



U.S. DEPARTMENT OF COMMERCE
Bureau of the Census



**HOUSEHOLD QUESTIONNAIRE FOR THE
1960 CENSUS OF POPULATION AND HOUSING**

Dear Householder:

Thank you for your cooperation in providing the information you have already given the Census Taker. This questionnaire covers the additional items needed to complete the Census.

You will see that questions about your dwelling are on the next page and that questions concerning yourself and each other person in your household are on the following pages. Please study the enclosed example before you start to fill in the form.

Never skip a question just because it does not seem to apply. For instance, an answer of "No" to the question, "Did this person work at any time last week?" is just as important as an answer of "Yes." Whenever you do not know the exact answer (such as the cost of utilities or the amount of wages last year) make a reasonable estimate. After you complete the form, please check it over to make sure you have not missed anything.

Federal law states that Census employees must hold all information which you give them in *strictest confidence*. The statistics published from this Census will *not* reveal any individual information.

Please mail the completed questionnaire *within 3 days* in the addressed envelope which the Census Taker has left with you. It requires no postage. Your prompt attention to this request will be appreciated.

Sincerely yours,

Robert W. Burgess, *Director*
Bureau of the Census

This is an official document of
the United States Government.

CONFIDENTIAL—The Census is required by the United States Constitution and further authorized by 13 U.S.C. 5, 9, 141, 221-4. The law requires that the inquiries be answered completely and accurately, and guarantees that the information furnished will be accorded confidential treatment. The Census report cannot be used for purposes of taxation, investigation, or regulation.

60PH-7. — "Household Questionnaire" used for sample outside large cities (housing section, left)

PLEASE NOTE: These housing questions begin with number H17 because the Census Taker has already obtained the answers to questions H1 to H16.

The term "house" or "apartment" covers your **house** or **part of the house** you occupy, or the **apartment, flat,** or **rooms** in which you live. Most of these questions refer to your own house or apartment **but note** that questions H20, H32, and H33 are about the **whole building** in which you live. Questions H17 and H18 refer to the **whole place** on which you live; if your house is on land which is only part of a larger property, answer questions H17 and H18 about the **whole place**.

H17 and H18. Is this house:

On a city lot (or is this an apartment building)?

OR

On a place of less than 10 acres? → Last year (1959), did sales of crops, livestock, and other farm products from this place amount to \$250 or more?

\$250 or more

Less than \$250 or none

OR

On a place of 10 or more acres? → Last year (1959), did sales of crops, livestock, and other farm products from this place amount to \$50 or more?

\$50 or more

Less than \$50 or none

H19. How many bedrooms are in your house or apartment?

Count rooms whose main use is as bedrooms even if they are occasionally used for other purposes. If you live in a one-room apartment without a separate bedroom, check "No bedroom."

No bedroom

1 bedroom

2 bedrooms

3 bedrooms

4 bedrooms or more

H20. About when was this house originally built?

In 1959 or 1960

1955 to 1958

1950 to 1954

1940 to 1949

1930 to 1939

1929 or earlier

H21. How is your house or apartment heated?

Check **ONLY** the kind of heat you use the most

Heated by:

Steam or hot water

Warm air furnace with individual room registers

Floor, wall, or pipeless furnace

Built-in electric units

Room heater(s) connected to chimney or flue

Room heater(s) **not** connected to chimney or flue

Other method—Write in: _____

Not heated

H22. Here is a list of fuels. In the first column, check which one is used most for heating. In the second column, check the one used most for cooking. In the third column, check the fuel used most for heating water.

(Check one in each column)

List of fuels	A House heating fuel	B Cooking fuel	C Water heating fuel
Coal or coke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility gas from underground pipes serving the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottled, tank, or LP gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel oil, kerosene, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No fuel used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H23. Do you have a clothes washing machine?

Do **not** count machines shared with any other household in this building.

Machine with wringer or separate spinner

Automatic or semi-automatic machine

Washer-dryer combination (single unit)

No washing machine

H24. Do you have an electric or gas clothes dryer?

Do **not** count dryers shared with any other household in this building.

Electrically heated dryer

Gas heated dryer

No dryer

H25. Do you have any television sets?

Count only sets in working order. Count floor, table, and portable television sets as well as combinations.

1 set

2 sets or more

No television sets

H26. Do you have any radios?

Count only sets in working order. Count floor, table, and portable radios as well as radio combinations. Do **not** count automobile radios

1 radio

2 radios or more

No radios

H27. Do you have any air conditioning?

Count only equipment which cools the air by refrigeration.

Room unit—1 only

Room units—2 or more

Central air conditioning system

No air conditioning

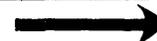
H28. Do you have a home food freezer which is separate from your refrigerator?

Yes

No

60PH-7. — "Household Questionnaire" used for sample outside large cities (housing section, right)

<p>H30. How many bathrooms are in your house or apartment? A complete bathroom has both flush toilet and bathing facilities (bathtub or shower) A partial bathroom has a flush toilet or bathing facilities, but not both.</p> <p>No bathroom, or only a partial bathroom <input type="checkbox"/> 1 complete bathroom <input type="checkbox"/> 1 complete bathroom, plus partial bathroom(s) <input checked="" type="checkbox"/> 2 or more complete bathrooms <input type="checkbox"/></p>	<p>ANSWER QUESTIONS H41 TO H46 IF YOU PAY RENT FOR YOUR HOUSE, APARTMENT, OR FLAT</p> <p>H41. If you pay your rent by the month— What is your monthly rent? \$ (Nearest dollar) .00</p> <p>OR If you pay your rent by the week or some other period of time— What is your rent and what period does it cover? \$ (Nearest dollar) .00 per (Week, year, etc.)</p>									
<p>H31. Do you get water from:</p> <p>a public system (or private company)? <input type="checkbox"/> an individual well? <input type="checkbox"/> some other source? <input type="checkbox"/></p>	<p>H42. Does your rent include any land used for farming (or ranching)? Yes <input type="checkbox"/> No <input type="checkbox"/></p>									
<p>H32. Is this house connected to a public sewer?</p> <p>Yes, connected to a public sewer <input type="checkbox"/> No, has septic tank or cesspool <input type="checkbox"/> No, has other means of sewage disposal <input type="checkbox"/></p>	<p>H43 and H44. In addition to rent, do you also pay for:</p> <p>Electricity? (Check one box) Yes <input type="checkbox"/> → What is the average monthly cost for electricity? \$.00 (See instructions below) No <input type="checkbox"/></p> <p>Gas? (Check one box) Yes <input type="checkbox"/> → What is the average monthly cost for gas? \$.00 (See instructions below) No <input type="checkbox"/></p> <p>Water? (Check one box) Yes <input type="checkbox"/> → What is the average monthly cost for water? \$.00 (See instructions below) No <input type="checkbox"/></p>									
<p>H33. Is this house built:</p> <p>with a basement? <input type="checkbox"/> on a concrete slab? <input type="checkbox"/> in another way? <input type="checkbox"/></p>	<p>H45 and H46. In addition to rent, do you also pay for oil, coal, kerosene, or wood?</p> <p>Yes <input type="checkbox"/> → About how much do you pay for such fuel per year? \$.00 (See instructions below) No <input type="checkbox"/></p>									
<p>H35. Is there a telephone on which people who live here can be called?</p> <p>Yes <input type="checkbox"/> → What is the telephone number? No <input type="checkbox"/></p>	<p style="text-align: center;">HOW TO FIGURE COST OF UTILITIES AND FUEL Enter the cost to the nearest dollar</p> <p>Utilities If you don't know exactly how much you have spent and if you don't have records, put down the approximate costs</p> <p>Fuels If you don't know how much fuels cost per year, one of the following methods may help you figure the approximate costs.</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fuel used</th> <th style="text-align: left;">Method</th> <th rowspan="4" style="font-size: small; vertical-align: middle;"> NOTE: If you buy fuel in small quantities (such as kerosene by the can or coal by the bag), it may be easier to figure about how much you spend for fuel per week, and multiply by the number of weeks during which it is used </th> </tr> </thead> <tbody> <tr> <td>Coal</td> <td>Multiply number of tons used per year by the cost per ton.</td> </tr> <tr> <td>Oil or kerosene</td> <td>Multiply number of gallons used per year by the cost per gallon; OR multiply number of deliveries by average cost per delivery</td> </tr> <tr> <td>Wood</td> <td>Multiply number of cords (or loads) used per year by cost per cord (or load)</td> </tr> </tbody> </table>	Fuel used	Method	NOTE: If you buy fuel in small quantities (such as kerosene by the can or coal by the bag), it may be easier to figure about how much you spend for fuel per week, and multiply by the number of weeks during which it is used	Coal	Multiply number of tons used per year by the cost per ton.	Oil or kerosene	Multiply number of gallons used per year by the cost per gallon; OR multiply number of deliveries by average cost per delivery	Wood	Multiply number of cords (or loads) used per year by cost per cord (or load)
Fuel used	Method	NOTE: If you buy fuel in small quantities (such as kerosene by the can or coal by the bag), it may be easier to figure about how much you spend for fuel per week, and multiply by the number of weeks during which it is used								
Coal	Multiply number of tons used per year by the cost per ton.									
Oil or kerosene	Multiply number of gallons used per year by the cost per gallon; OR multiply number of deliveries by average cost per delivery									
Wood	Multiply number of cords (or loads) used per year by cost per cord (or load)									
<p>H36. How many passenger automobiles are owned or regularly used by people who live here?</p> <p>Count company cars kept at home</p> <p>No automobile <input type="checkbox"/> 1 automobile <input type="checkbox"/> 2 automobiles <input type="checkbox"/> 3 automobiles or more <input type="checkbox"/></p>	<p>ANSWER H40 IF YOU OWN OR ARE BUYING THIS HOME</p> <p>H40. About how much do you think this property would sell for on today's market?</p> <p>Less than \$5,000 <input type="checkbox"/> \$5,000 to \$7,400 <input type="checkbox"/> \$7,500 to \$9,900 <input type="checkbox"/> \$10,000 to \$12,400 <input type="checkbox"/> \$12,500 to \$14,900 <input type="checkbox"/> \$15,000 to \$17,400 <input type="checkbox"/> \$17,500 to \$19,900 <input type="checkbox"/> \$20,000 to \$24,400 <input type="checkbox"/> \$25,000 to \$34,900 <input type="checkbox"/> \$35,000 or more <input type="checkbox"/></p> <p style="font-size: small;">Do not answer if your home is on a place of 10 or more acres</p>									
<p>H37. If you live in a trailer, is it:</p> <p>mobile (on wheels, or can easily be put on wheels)? <input type="checkbox"/> on a permanent foundation? <input type="checkbox"/></p>	<p>AFTER YOU FINISH THE HOUSING QUESTIONS—</p> <ul style="list-style-type: none"> • FILL THE FOLLOWING PAGES FOR PERSONS WHOSE NAMES HAVE BEEN WRITTEN IN BY THE CENSUS TAKER • MAKE SURE THAT EACH "EXTRA PERSON" QUESTIONNAIRE LEFT BY THE CENSUS TAKER IS FILLED • INCLUDE THE COMPLETED "EXTRA PERSON" QUESTIONNAIRES IN THE FAMILY'S ENVELOPE WHEN THIS FORM IS MAILED TO THE CENSUS OFFICE Sheets filled by household members not related to the head may first be enclosed in the special smaller envelopes left for these persons 									



1960 CENSUSES OF POPULATION AND HOUSING

60PH-7. — "Household Questionnaire" used for sample outside large cities (population section, left)
 (The population questions were repeated on succeeding pages of this form, for two more persons)

<p>P2. Name of this person (Enter last name first)</p>	<p>← QUESTIONS FOR</p>
<p>P3. What is the relationship of this person to the head of this household?</p> <p>Head <input type="checkbox"/></p> <p>Wife of head <input type="checkbox"/></p> <p>Son or daughter of head <input type="checkbox"/></p> <p>Other—Write in (For example Son-in-law, mother, uncle, cousin, etc.)</p>	<p>P14. What is the highest grade (or year) of regular school this person has ever attended? (Check one box) If now attending a regular school or college, check the grade (or year) he is in. If it is in junior high school, check the box that stands for that grade (or year)</p> <p>Never attended school... <input type="checkbox"/></p> <p>Kindergarten <input type="checkbox"/></p> <p>Elementary school (Grade) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8</p> <p>High school (Year) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4</p> <p>College (Year) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 or more</p>
<p>P8. Where was this person born? (If born in hospital, give residence of mother, not location of hospital)</p> <p>If born in the United States, write name of State. If born outside the United States, write name of country, U S possession, etc. Use international boundaries as now recognized by the U S. Distinguish Northern Ireland from Ireland (Eire).</p> <p>(State, foreign country, U S possession, etc.)</p>	<p>P15. Did he finish the highest grade (or year) he attended?</p> <p>Finished this grade... <input type="checkbox"/> Did not finish this grade... <input type="checkbox"/> Never attended school... <input type="checkbox"/></p>
<p>P9. If this person was born outside the U S — What language was spoken in his home before he came to the United States?</p>	<p>P16. Has he attended regular school or college at any time since February 1, 1960? If he has attended only nursery school, business or trade school, or adult education classes, check "No".</p> <p>Yes... <input type="checkbox"/> No... <input type="checkbox"/></p>
<p>P10. What country was his father born in?</p> <p>United States... <input type="checkbox"/> OR (Name of foreign country, or Puerto Rico, Guam, etc.)</p>	<p>P17. Is it a public school or a private school?</p> <p>Public school... <input type="checkbox"/></p> <p>Private or parochial school... <input type="checkbox"/></p>
<p>P11. What country was his mother born in?</p> <p>United States... <input type="checkbox"/> OR (Name of foreign country, or Puerto Rico, Guam, etc.)</p>	<p>P18. If this person has ever been married— Has this person been married more than once?</p> <p>Once <input type="checkbox"/> More than once <input type="checkbox"/></p>
<p>P12. When did this person move into this house (or apartment)? (Check date of last move)</p> <p>In 1959 or 1960... <input type="checkbox"/> Jan 1954 to March 1955... <input type="checkbox"/></p> <p>In 1958... <input type="checkbox"/> 1950 to 1953... <input type="checkbox"/></p> <p>In 1957... <input type="checkbox"/> 1940 to 1949... <input type="checkbox"/></p> <p>April 1955 to Dec. 1956... <input type="checkbox"/> 1939 or earlier... <input type="checkbox"/></p> <p>Always lived here... <input type="checkbox"/></p>	<p>P19. When did he get married? When did he get married for the first time?</p> <p>Month Year Month Year</p>
<p>P13. Did he live in this house on April 1, 1955? (Answer 1, 2, or 3)</p> <p>1. Born April 1955 or later... <input type="checkbox"/></p> <p>OR</p> <p>2. Yes, this house... <input type="checkbox"/></p> <p>OR</p> <p>3. No, different house... <input type="checkbox"/></p> <p>Where did he live on April 1, 1955?</p> <p>a. City or town</p> <p>b. If city or town—Did he live inside the city limits? — { Yes... <input type="checkbox"/> No... <input type="checkbox"/></p> <p>c. County AND State, foreign country, U S possession, etc</p>	<p>P20. If this is a woman who has ever been married— How many babies has she ever had, not counting stillbirths? Do not count her stepchildren or adopted children</p> <p>(Number) OR None... <input type="checkbox"/></p>
<p>P21. When was this person born?</p> <p>Born before April 1946 <input type="checkbox"/> Born April 1946 or later <input type="checkbox"/></p> <p>Please go on with questions P22 to P35 Answer the questions regardless of whether the person is a housewife, student, or retired person, or a part-time or full-time worker.</p> <p>Please omit questions P22 to P35 and turn the page to the next person.</p>	
<p>Space for any notes about the entries for this person</p>	

60PH-7. — "Household Questionnaire" used for sample outside large cities
 (population section, right)
 (The population questions were repeated on succeeding pages of this form, for two more persons)

THIS PERSON	
<p>P22. Did this person work at any time last week? Include part-time work such as a Saturday job, delivering papers, or helping without pay in a family business or farm. Do not count own household work.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>P23. How many hours did he work last week (at all jobs)? (If exact figure not known, give best estimate)</p> <p>1 to 14 hours <input type="checkbox"/> 40 hours <input type="checkbox"/> 15 to 29 hours <input type="checkbox"/> 41 to 48 hours <input type="checkbox"/> 30 to 34 hours <input type="checkbox"/> 49 to 59 hours <input type="checkbox"/> 35 to 39 hours <input type="checkbox"/> 60 hours or more <input type="checkbox"/></p> <p>P24. Was this person looking for work, or on layoff from a job?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>P25. Does he have a job or business from which he was temporarily absent all last week because of illness, vacation, or other reasons?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>P26. When did he last work at all, even for a few days? (Check one box)</p> <p>Working now <input type="checkbox"/> 1949 or earlier <input type="checkbox"/> In 1960 <input type="checkbox"/> In 1959 <input type="checkbox"/> Never worked <input type="checkbox"/> 1955 to 1958 <input type="checkbox"/> 1950 to 1954 <input type="checkbox"/></p> <p>P27. Occupation (Answer 1, 2, or 3)</p> <p>1. This person last worked in 1949 or earlier <input type="checkbox"/> This person has never worked <input type="checkbox"/></p> <p>OR</p> <p>2. On active duty in the Armed Forces now <input type="checkbox"/></p> <p>OR</p> <p>3. Worked in 1950 or later <input type="checkbox"/> Answer a to e, below.</p> <p>Describe this person's job or business last week, if any, and write in name of employer. If this person had no job or business last week, give information for last job or business since 1950.</p> <p>a. For whom did he work?</p> <p>(Name of company, business, organization, or other employer)</p> <p>b. What kind of business or industry was this? Describe activity at location where employed.</p> <p>(For example: County junior high school, auto assembly plant, TV and radio service, retail supermarket, road construction, farm)</p> <p>c. Is this primarily: (Check one box)</p> <p>Manufacturing <input type="checkbox"/> Wholesale trade <input type="checkbox"/> Retail trade <input type="checkbox"/> Other (services, agriculture, government, construction, etc) <input type="checkbox"/></p> <p>d. What kind of work was he doing?</p> <p>(For example: 8th grade English teacher, paint sprayer, repairs TV sets, grocery checker, civil engineer, farmer, farm hand)</p> <p>e. Was this person: (Check one box)</p> <p>Employee of private company, business, or individual, for wages, salary, or commissions <input type="checkbox"/> Government employee (Federal, State, county, or local) <input type="checkbox"/> Self-employed in own business, professional practice, or farm <input type="checkbox"/> Working without pay in a family business or farm <input type="checkbox"/></p>	<p>If this person worked last week, answer questions P28 and P29</p> <p>P28. What city and county did he work in last week? If he worked in more than one city or county, give place where he worked most last week</p> <p>a. City or town</p> <p>b. If city or town—Did he work inside the city limits? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>c. County State</p> <p>P29. How did he get to work last week? (Check one box for principal means used last week)</p> <p>Railroad <input type="checkbox"/> Taxicab <input type="checkbox"/> Walk only <input type="checkbox"/> Subway or elevated <input type="checkbox"/> Private auto or car pool <input type="checkbox"/> Worked at home <input type="checkbox"/> Bus or streetcar <input type="checkbox"/> Other means—Write in</p> <p>P30. Last year (1959), did this person work at all, even for a few days?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>P31. How many weeks did he work in 1959, either full-time or part-time? Count paid vacation, paid sick leave, and military service as weeks worked. (If exact figure not known, give best estimate)</p> <p>13 weeks or less <input type="checkbox"/> 40 to 47 weeks <input type="checkbox"/> 14 to 26 weeks <input type="checkbox"/> 48 to 49 weeks <input type="checkbox"/> 27 to 39 weeks <input type="checkbox"/> 50 to 52 weeks <input type="checkbox"/></p> <p>P32. How much did this person earn in 1959 in wages, salary, commissions, or tips from all jobs? Before deductions for taxes, bonds, dues, or other items. (Enter amount or check "None" If exact figure not known, give best estimate.)</p> <p>\$.00 OR None <input type="checkbox"/> (Dollars only)</p> <p>P33. How much did he earn in 1959 in profits or fees from working in his own business, professional practice, partnership, or farm? Net income after business expenses (Enter amount or check "None" If exact figure not known, give best estimate. If business or farm lost money, write "Loss" after amount.)</p> <p>\$.00 OR None <input type="checkbox"/> (Dollars only)</p> <p>P34. Last year (1959), did this person receive any income from:</p> <p>Social security Pensions Veteran's payments Rent (minus expenses) Interest or dividends Unemployment insurance Welfare payments Any other source not already entered</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>What is the amount he received from these sources in 1959? (If exact figure not known, give best estimate)</p> <p>\$.00 (Dollars only)</p> <p>P35. If this is a man—</p> <p>Has he ever served in the Army, Navy, or other Armed Forces of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> (Check one box on each line)</p> <p>Was it during:</p> <p>Korean War (June 1950 to Jan 1955) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> World War II (Sept 1940 to July 1947) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> World War I (April 1917 to Nov 1918) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Any other time, including present service <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/></p>

60PH-7. — "Household Questionnaire" used for sample outside large cities (back)

PLEASE ANSWER THESE TWO QUESTIONS	
Name of person(s) who filled this form.	If it is necessary for the Census Taker to get in touch with you, the best time usually is: <div style="text-align: right; margin-top: 5px;">(Check one box)</div> <div style="margin-top: 10px;"> 8 to 12 a.m. <input type="checkbox"/> </div> <div style="margin-top: 10px;"> 12 to 6 p.m. <input type="checkbox"/> </div> <div style="margin-top: 10px;"> 6 to 9 p.m. <input type="checkbox"/> </div>
Date filled:	

PLEASE BE SURE THAT—

- the housing questions have been filled,
- the population pages have been filled for all persons whose names have been written in by the Census Taker,
- each "extra person" questionnaire has been filled.

Include the "extra person" questionnaires in the family's envelope when you mail this form back to the Census Office.

TO BE FILLED BY CENSUS TAKER	
E.D. No.	Page No from PH-1 or PH-2
H29. Number of units in structure	
1, detached ... <input type="checkbox"/>	
1, attached ... <input type="checkbox"/>	
2 <input type="checkbox"/>	
3-4 <input type="checkbox"/>	
5-9 <input type="checkbox"/>	
10-19 <input type="checkbox"/>	If 5 or more— Fill items H20, H21, H22A, and H22C in Questionnaire
20-49 <input type="checkbox"/>	
50 or more .. <input type="checkbox"/>	
H39. If PH-1— Descr. prop. (for owner occ.)	
1 nb <input type="checkbox"/>	
1 wb <input type="checkbox"/>	
2 <input type="checkbox"/>	

60PH-8. — "Household Questionnaire" used for sample in large cities
(housing section, left)

(The front page and population section of this form were the same as 60PH-7)

PLEASE NOTE: These housing questions begin with number H19 because the Census Taker has already obtained the answers to the earlier questions

The term "house or apartment" covers your **house** or **part of the house** you occupy, or the **apartment, flat, or rooms** in which you live. Most of these questions refer to your own house or apartment **but note** that questions H20, H33, and H34 are about the **whole building** in which you live

H19. How many bedrooms are in your house or apartment?
Count rooms whose main use is as bedrooms even if they are occasionally used for other purposes
If you live in a one-room apartment without a separate bedroom, check "No bedroom"

No bedroom
1 bedroom
2 bedrooms
3 bedrooms
4 bedrooms or more

H20. About when was this house originally built?

In 1959 or 1960
1955 to 1958
1950 to 1954
1940 to 1949
1930 to 1939
1929 or earlier

H21. How is your house or apartment heated?
Check **ONLY** the kind of heat you use the most

Heated by:

Steam or hot water
Warm air furnace with individual room registers
Floor, wall, or pipeless furnace
Built-in electric units
Room heater(s) connected to chimney or flue
Room heater(s) **not** connected to chimney or flue
Other method—Write in _____

Not heated

H22. Here is a list of fuels. In the first column, check which one is used most for heating. In the second column, check the one used most for cooking. In the third column, check the fuel used most for heating water.

(Check one in each column)

List of fuels	A House heating fuel	B Cooking fuel	C Water heating fuel
Coal or coke	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility gas from underground pipes serving the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottled, tank, or LP gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel oil, kerosene, etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No fuel used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H23. Do you have a clothes washing machine?
Do **not** count machines shared with any other household in this building.

Machine with wringer or separate spinner
Automatic or semi-automatic machine
Washer-dryer combination (single unit)
No washing machine

H24. Do you have an electric or gas clothes dryer?
Do **not** count dryers shared with any other household in this building

Electrically heated dryer
Gas heated dryer
No dryer

H25. Do you have any television sets?
Count only sets in working order. Count floor, table, and portable television sets as well as combinations

1 set
2 sets or more
No television sets

H26. Do you have any radios?
Count only sets in working order. Count floor, table, and portable radios as well as radio combinations. Do **not** count automobile radios

1 radio
2 radios or more
No radios

H27. Do you have any air conditioning?
Count only equipment which cools the air by refrigeration.

Room unit—1 only
Room units—2 or more
Central air conditioning system
No air conditioning

H28. Do you have a home food freezer which is separate from your refrigerator?

Yes
No

H30. How many bathrooms are in your house or apartment?
A **complete** bathroom has **both** flush toilet and bathing facilities (bathtub or shower)
A **partial** bathroom has a flush toilet **or** bathing facilities, but not both

No bathroom, or only a partial bathroom
1 complete bathroom
1 complete bathroom, plus partial bathroom(s)
2 or more complete bathrooms

H33. Is this house built:

with a basement?
on a concrete slab?
in another way?

H34. Does this building have:

3 stories or less
4 stories or more—
with elevator?
walk-up?

60PH-8. — "Household Questionnaire" used for sample in large cities (housing section, right)

<p>H35. Is there a telephone on which people who live here can be called?</p> <p>Yes <input type="checkbox"/> → What is the telephone number?</p> <p>No <input type="checkbox"/></p>	<p>Space for any notes about the housing entries</p>								
<p>H36. How many passenger automobiles are owned or regularly used by people who live here?</p> <p>Count company cars kept at home</p> <p>No automobile <input type="checkbox"/></p> <p>1 automobile <input type="checkbox"/></p> <p>2 automobiles <input type="checkbox"/></p> <p>3 automobiles or more <input type="checkbox"/></p>									
<p>H37. If you live in a trailer, is it:</p> <p>mobile (on wheels, or can easily be put on wheels)? <input type="checkbox"/></p> <p>on a permanent foundation? <input type="checkbox"/></p>									
<p>ANSWER QUESTIONS H43 TO H46 IF YOU PAY RENT FOR YOUR HOUSE, APARTMENT, OR FLAT</p>									
<p>H43 and H44. In addition to rent, do you also pay for:</p> <p>Electricity? (Check one box)</p> <p>Yes <input type="checkbox"/> → What is the average monthly cost for electricity? \$.00 <small>(See instructions below)</small></p> <p>No <input type="checkbox"/></p> <p>Gas? (Check one box)</p> <p>Yes <input type="checkbox"/> → What is the average monthly cost for gas? \$.00 <small>(See instructions below)</small></p> <p>No <input type="checkbox"/></p> <p>Water? (Check one box)</p> <p>Yes <input type="checkbox"/> → What is the average monthly cost for water? \$.00 <small>(See instructions below)</small></p> <p>No <input type="checkbox"/></p>									
<p>H45 and H46. In addition to rent, do you also pay for oil, coal, kerosene, or wood?</p> <p>Yes <input type="checkbox"/> → About how much do you pay for such fuel per year? \$.00 <small>(See instructions below)</small></p> <p>No <input type="checkbox"/></p>									
<p style="text-align: center;">HOW TO FIGURE COST OF UTILITIES AND FUEL</p> <p style="text-align: center;"><i>Enter the cost to the nearest dollar</i></p> <p>Utilities If you don't know exactly how much you have spent and if you don't have records, put down the approximate costs</p> <p>Fuels If you don't know how much fuels cost per year, one of the following methods may help you figure the approximate costs:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fuel used</th> <th style="text-align: left;">Method</th> </tr> </thead> <tbody> <tr> <td>Coal</td> <td>Multiply number of tons used per year by the cost per ton</td> </tr> <tr> <td>Oil or kerosene</td> <td>Multiply number of gallons used per year by the cost per gallon, OR multiply number of deliveries by average cost per delivery</td> </tr> <tr> <td>Wood</td> <td>Multiply number of cords (or loads) used per year by cost per cord (or load)</td> </tr> </tbody> </table> <p style="font-size: small; margin-top: 10px;">NOTE: If you buy fuel in small quantities (such as kerosene by the can or coal by the bag), it may be easier to figure about how much you spend for fuel per week, and multiply by the number of weeks during which it is used</p>		Fuel used	Method	Coal	Multiply number of tons used per year by the cost per ton	Oil or kerosene	Multiply number of gallons used per year by the cost per gallon, OR multiply number of deliveries by average cost per delivery	Wood	Multiply number of cords (or loads) used per year by cost per cord (or load)
Fuel used	Method								
Coal	Multiply number of tons used per year by the cost per ton								
Oil or kerosene	Multiply number of gallons used per year by the cost per gallon, OR multiply number of deliveries by average cost per delivery								
Wood	Multiply number of cords (or loads) used per year by cost per cord (or load)								
<p>AFTER YOU FINISH THE HOUSING QUESTIONS—</p> <ul style="list-style-type: none"> • FILL THE FOLLOWING PAGES FOR PERSONS WHOSE NAMES HAVE BEEN WRITTEN IN BY THE CENSUS TAKER • MAKE SURE THAT EACH "EXTRA PERSON" QUESTIONNAIRE LEFT BY THE CENSUS TAKER IS FILLED • INCLUDE THE COMPLETED "EXTRA PERSON" QUESTIONNAIRES IN THE FAMILY'S ENVELOPE WHEN THIS FORM IS MAILED TO THE CENSUS OFFICE Sheets filled by household members not related to the head may first be enclosed in the special smaller envelopes left for these persons 									

60PH-8. — "Household Questionnaire" used for sample in large cities (back)

PLEASE ANSWER THESE TWO QUESTIONS	
Name of person(s) who filled this form	If it is necessary for the Census Taker to get in touch with you, the best time usually is
Date filled:	(Check one box)
	8 to 12 a m <input type="checkbox"/>
	12 to 6 p m . <input type="checkbox"/>
	6 to 9 p m <input type="checkbox"/>

PLEASE BE SURE THAT—

- the housing questions have been filled.
- the population pages have been filled for all persons whose names have been written in by the Census Taker.
- each "extra person" questionnaire has been filled.

Include the "extra person" questionnaires in the family's envelope when you mail this form back to the Census Office.

TO BE FILLED BY CENSUS TAKER	
E D No	Page No from PH-2
H29. Number of units in structure	
1, detached <input type="checkbox"/>	
1, attached <input type="checkbox"/>	
2 <input type="checkbox"/>	
3-4 <input type="checkbox"/>	
5-9 <input type="checkbox"/>	} If 5 or more— Fill items H20, H21, H22A, and H22C in Questionnaire
10-19 <input type="checkbox"/>	
20-49 <input type="checkbox"/>	
50 or more <input type="checkbox"/>	

PC(3)
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UNITED STATES CENSUS

POPULATION

1960

Americans Overseas



U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

XVI

PC (3)

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MIDWAY, WAKE, CANVON, etc. (MIDWAY, WAKE, CANVON, etc.)
JOHNSON (SEAN) and SHAW (SEAN), SEAN (SEAN)
OVERSEAS CENSUS REPORT, FORM 60PH-15
(From)



UNITED STATES OF AMERICA
1960 Census of Population



OVERSEAS CENSUS REPORT



This form is for Americans living outside the United States, Puerto Rico, American Samoa, Canal Zone, Guam, and the Virgin Islands on Census Day -- April 1, 1960.

Dear Fellow American:

Please fill this official 1960 Population Census report form on April 1, 1960 (Census Day) or as soon as possible thereafter. Our Nation has taken a Population Census every ten years since 1790. Facts about the numbers of Americans, their location, ages, education, occupation, etc. are very important to all of us.

If any members of your family are living with you overseas, please be sure to include them on this form. If there are more than four persons in your family group, list them on an additional form or sheet of paper. Fold the extra form or sheet inside this form before sealing.

Please fill out this form completely and correctly. It will take only a few minutes of your time. First, fill out the identification information on the back of this form. Then, answer the questions on the inside for yourself and each member of your family group. Your answers to these questions will be kept strictly confidential, as provided by law.

Members of the Armed Forces should return the completed form to the appropriate person on the post, in accordance with local arrangements. Civilians should return the completed form (in person or by mail) to the nearest U.S. Embassy or Consular Office in the country in which they are living. Thank you for your cooperation.

Sincerely yours,

Robert W. Burgess

Robert W. Burgess, Director
Bureau of the Census

FILL ITEMS BELOW

FOLD THIS
FLAP IN
BEFORE

Form 60PH-15

Bureau No. 11-5512
Approval Expires 12-31-60

FOLD THIS
FLAP IN
BEFORE

Note only complete count data on age, sex, color or race, and marital status via tabulation in Home area.
(Using paper D-16) UScc C878/ changes 12-3-62)
(State Tables and Series B - (immediate) or via file of the census)

FILL ITEMS BELOW



FOLD THIS
FLAP IN
BEFORE

Form 60PH-15

Budget Bureau No. 41-59124
Approval Expires 12-31-60

FOLD THIS
FLAP IN
BEFORE
SEALING

NOTE: This form is being distributed through several sources to enable the greatest number possible of Americans overseas to be counted in the 1960 Census. If you receive more than one copy, please do not fill the duplicates.

1. What is the name of the head of this family group?
2. If the head is in the Armed Forces:
 - a. Name of installation at which stationed
 - b. Country
3. If the head is a civilian:

Name of country in which now living

FILL
QUESTIONS
INSIDE



The Census is required by the United States Constitution and further authorized by 13 U.S.C. 5, 9, 141, 221-4. The law guarantees that the information furnished will be accorded CONFIDENTIAL treatment. The Census report cannot be used for purposes of taxation, investigation, or regulation. A 1960 Census report must be filed by members of the Armed Forces and by civilian American citizens employed by the U.S. Government who are living abroad; filing is discretionary for other Americans living abroad.

USE A SEPARATE COLUMN FOR EACH PERSON

1. NAME <i>Fill a separate column for the head and for each member of his family group living with him here (including babies). Exclude foreign nationals working for the family group.</i>	Last name: First name & initial:	Last name: First name & initial:	Last name: First name & initial:
2. WHAT IS THIS PERSON'S RELATIONSHIP TO THE HEAD OF THIS FAMILY GROUP? <i>(For example, head, wife, son, mother-in-law, etc.)</i>	Relationship to head:	Relationship to head:	Relationship to head:
3. SEX	Male - <input type="checkbox"/> Female - <input type="checkbox"/>	Male - <input type="checkbox"/> Female - <input type="checkbox"/>	Male - <input type="checkbox"/> Female - <input type="checkbox"/>
4. COLOR OR RACE <i>Check one box or write in Japanese, Chinese, Filipino, etc.</i>	White - <input type="checkbox"/> } Negro - <input type="checkbox"/> } OR <i>Specify other</i>	White - <input type="checkbox"/> } Negro - <input type="checkbox"/> } OR <i>Specify other</i>	White - <input type="checkbox"/> } Negro - <input type="checkbox"/> } OR <i>Specify other</i>
5. WHEN WAS THIS PERSON BORN?	Month born Year born	Month born Year born	Month born Year born
6. MARITAL STATUS -- IS THIS PERSON NOW -- <i>Check one box.</i>	Married - <input type="checkbox"/> Separated - <input type="checkbox"/> Widowed - <input type="checkbox"/> Single (never married) - <input type="checkbox"/> Divorced - <input type="checkbox"/>	Married - <input type="checkbox"/> Separated - <input type="checkbox"/> Widowed - <input type="checkbox"/> Single (never married) - <input type="checkbox"/> Divorced - <input type="checkbox"/>	Married - <input type="checkbox"/> Separated - <input type="checkbox"/> Widowed - <input type="checkbox"/> Single (never married) - <input type="checkbox"/> Divorced - <input type="checkbox"/>
7. WHERE WAS THIS PERSON BORN? <i>(Check U. S. or write in name of foreign country, U. S. possession, etc.)</i>	Birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>	Birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>	Birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>
8. If this person was born outside the United States -- IS HE A UNITED STATES CITIZEN?	Yes, he is a U. S. citizen <input type="checkbox"/> No, he is not a U. S. citizen <input type="checkbox"/>	Yes, he is a U. S. citizen <input type="checkbox"/> No, he is not a U. S. citizen <input type="checkbox"/>	Yes, he is a U. S. citizen <input type="checkbox"/> No, he is not a U. S. citizen <input type="checkbox"/>
9. WHERE WERE THIS PERSON'S FATHER AND MOTHER BORN?	Father's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i> Mother's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>	Father's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i> Mother's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>	Father's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i> Mother's birthplace: U.S. - <input type="checkbox"/> or <i>Name of foreign country, etc.</i>
10. WHEN DID THIS PERSON (LAST) LEAVE THE UNITED STATES? <i>Exclude vacations, home leave, or temporary visits in the United States.</i> * If this person (last) left the U.S. in 1960 -- DOES HE EXPECT TO BE ABROAD AT LEAST 3 MONTHS?	Left the U.S. in (year) OR Left before 1940 --- <input type="checkbox"/> OR Never lived in U.S. - <input type="checkbox"/> Expects to be abroad 3 months or more ---- <input type="checkbox"/> Expects to be abroad less than 3 months ---- <input type="checkbox"/>	Left the U.S. in (year) OR Left before 1940 --- <input type="checkbox"/> OR Never lived in U.S. - <input type="checkbox"/> Expects to be abroad 3 months or more ---- <input type="checkbox"/> Expects to be abroad less than 3 months ---- <input type="checkbox"/>	Left the U.S. in (year) OR Left before 1940 --- <input type="checkbox"/> OR Never lived in U.S. - <input type="checkbox"/> Expects to be abroad 3 months or more ---- <input type="checkbox"/> Expects to be abroad less than 3 months ---- <input type="checkbox"/>
11. WHAT IS THE HIGHEST GRADE (OR YEAR) OF SCHOOL THIS PERSON HAS EVER ATTENDED? <i>Check one box. If the grade (or year) was in a school outside the U.S., check the box that stands for that grade (or year).</i>	None - <input type="checkbox"/> Kindergarten - <input type="checkbox"/> Elementary school (grade) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 High or secondary school (year) --- <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 College or university (year) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 OR MORE	None - <input type="checkbox"/> Kindergarten - <input type="checkbox"/> Elementary school (grade) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 High or secondary school (year) --- <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 College or university (year) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 OR MORE	None - <input type="checkbox"/> Kindergarten - <input type="checkbox"/> Elementary school (grade) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High or secondary school (year) --- <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 College or university (year) - <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6
* DID HE FINISH THE HIGHEST GRADE (OR YEAR) HE ATTENDED?	Finish this grade (or year)? Yes - <input type="checkbox"/> No - <input type="checkbox"/>	Finish this grade (or year)? Yes - <input type="checkbox"/> No - <input type="checkbox"/>	Finish this grade (or year)? Yes - <input type="checkbox"/> No - <input type="checkbox"/>
12. IS HE NOW ENROLLED IN A SCHOOL/ COLLEGE/ OR UNIVERSITY? <i>If this person is taking correspondence courses</i>	Yes, enrolled in school, college, or university <input type="checkbox"/>	Yes, enrolled in school, college, or university <input type="checkbox"/>	Yes, enrolled in school, college, or university <input type="checkbox"/>

Did he finish the highest grade (or year) he attended?		College or university (year) - 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> OR MORE	College or university (year) - 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> OR MORE	College or university (year) - 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> OR MORE
12. IS HE NOW ENROLLED IN A SCHOOL, COLLEGE, OR UNIVERSITY? If this person is taking correspondence courses (given by USAFI, a university, etc.) for high school, college, or university credit, check "YES".		Yes, enrolled in school, college, or university <input type="checkbox"/> No, not enrolled <input type="checkbox"/>	Yes, enrolled in school, college, or university <input type="checkbox"/> No, not enrolled <input type="checkbox"/>	Yes, enrolled in school, college, or university <input type="checkbox"/> No, not enrolled <input type="checkbox"/>
ANSWER QUESTIONS 13 TO 18 ONLY FOR PERSONS 14 YEARS OLD AND OVER				
13. If this person has received a degree from a college, university, or technical institute -- WHAT DEGREE(S) HAS HE RECEIVED, AND IN WHAT MAJOR FIELD(S) ?		Degree: _____ Major field: _____	Degree: _____ Major field: _____	Degree: _____ Major field: _____
14. If this person has attended a technical institute without receiving a degree -- HOW MANY YEARS DID HE ATTEND THE TECHNICAL INSTITUTE, AND WHAT FIELD DID HE STUDY? Do NOT report school work covered by degrees reported in question 13.		Technical institute work (without degree) No. of years _____ Field of study _____	Technical institute work (without degree) No. of years _____ Field of study _____	Technical institute work (without degree) No. of years _____ Field of study _____
15. DOES THIS PERSON SPEAK ANY LOCAL LANGUAGE? If he knows only a few words of the language, check "NO". Do NOT count English, unless it is the only local language.		Speak local language? Yes - <input type="checkbox"/> -> What language? _____ No - <input type="checkbox"/>	Speak local language? Yes - <input type="checkbox"/> -> What language? _____ No - <input type="checkbox"/>	Speak local language? Yes - <input type="checkbox"/> -> What language? _____ No - <input type="checkbox"/>
16. IS THIS PERSON NOW ON ACTIVE DUTY IN THE UNITED STATES ARMED FORCES?		Yes, now in U. S. Armed Forces <input type="checkbox"/> No, he is a civilian <input type="checkbox"/>	Yes, now in U. S. Armed Forces <input type="checkbox"/> No, he is a civilian <input type="checkbox"/>	Yes, now in U. S. Armed Forces <input type="checkbox"/> No, he is a civilian <input type="checkbox"/>
17. FOR CIVILIANS ONLY -- DID THIS PERSON WORK AT ANY TIME LAST WEEK? Do NOT count own housework.		Yes, worked full-time or part-time <input type="checkbox"/> No, but has a job or business from which he was temporarily absent <input type="checkbox"/> No, and has no job or business <input type="checkbox"/>	Yes, worked full-time or part-time <input type="checkbox"/> No, but has a job or business from which he was temporarily absent <input type="checkbox"/> No, and has no job or business <input type="checkbox"/>	Yes, worked full-time or part-time <input type="checkbox"/> No, but has a job or business from which he was temporarily absent <input type="checkbox"/> No, and has no job or business <input type="checkbox"/>
● If he has no job or business -- WHEN DID HE LAST WORK AT ALL, EVEN FOR A FEW DAYS?		Last worked: In 1955-60 -- <input type="checkbox"/> 1949 or earlier <input type="checkbox"/> In 1950-54 -- <input type="checkbox"/> Never worked <input type="checkbox"/>	Last worked: In 1955-60 -- <input type="checkbox"/> 1949 or earlier <input type="checkbox"/> In 1950-54 -- <input type="checkbox"/> Never worked <input type="checkbox"/>	Last worked: In 1955-60 -- <input type="checkbox"/> 1949 or earlier <input type="checkbox"/> In 1950-54 -- <input type="checkbox"/> Never worked <input type="checkbox"/>
18. FOR CIVILIANS ONLY -- OCCUPATION ● Describe the person's job or business last week. ● If he had no job or business last week, describe his last job or business since 1950. ● If the person last worked in 1949 or earlier, or has never worked, leave this item blank.	18a. WHAT KIND OF WORK WAS HE DOING? Give exact title or description, as civil engineer, chemist, oil well shooter, dental technician, professor of English literature, registered nurse, etc.	Kind of work this person did: _____	Kind of work this person did: _____	Kind of work this person did: _____
	18b. FOR WHOM DID THIS PERSON WORK? Check GOVERNMENT or PRIVATE. If GOVERNMENT, also write in name of Government and name of agency, as U.S. State Dept., U.S. Defense Dept., International Labor Office, UNESCO, Brazil Board of State Planning, etc. IF PRIVATE, also write in: ● Name of organization or company, as Acme Motor Co., Smythe Associates, Etallo S.A., CARE, etc. ● AND Description of kind of business, as automobile factory, engineering consultant, perfume exporter, retail organization, etc.	Worked for: GOVERNMENT agency - <input type="checkbox"/> <input type="checkbox"/> ● What agency? _____ OR PRIVATE company or organization - <input type="checkbox"/> <input type="checkbox"/> ● Name of company or organization? _____ and ● Kind of business? _____	Worked for: GOVERNMENT agency - <input type="checkbox"/> <input type="checkbox"/> ● What agency? _____ OR PRIVATE company or organization - <input type="checkbox"/> <input type="checkbox"/> ● Name of company or organization? _____ and ● Kind of business? _____	Worked for: GOVERNMENT agency - <input type="checkbox"/> <input type="checkbox"/> ● What agency? _____ OR PRIVATE company or organization - <input type="checkbox"/> <input type="checkbox"/> ● Name of company or organization? _____ and ● Kind of business? _____

P30. Last year (1959), did you work at all, even for a few days?
Yes-- No--

P31. How many weeks did you work in 1959, either full-time or part-time?
Count military service, paid vacation, and paid sick leave as weeks worked.
(If exact figure not known, give best estimate)
13 weeks or less-- 40 to 47 weeks--
14 to 26 weeks-- 48 to 49 weeks--
27 to 39 weeks-- 50 to 52 weeks--

P32. How much did you earn in 1959 in wages, salary, commissions, or tips from all jobs (including military service)?
Before deductions for taxes, bonds, dues, or other items.
(Enter amount or check "None." If exact figure not known, give best estimate.)
\$00 OR None--
(Dollars only)

P33. How much did you earn in 1959 in profits or fees from working in your own business, professional practice, partnership, or farm?
Net income after business expenses. (Enter amount or check "None." If exact figure not known, give best estimate. If business or farm lost money, write "Loss" after amount.)
\$00 OR None--
(Dollars only)

P34. Last year (1959), did you receive any income from:
Social security
Pensions
Veteran's payments
Rent (minus expenses)
Interest or dividends
Unemployment insurance
Welfare payments
Any other source not already entered
Yes-- No--
What is the amount you received from these sources in 1959? (If exact figure not known, give best estimate)
\$00
(Dollars only)

P35. Have you ever served in the Army, Navy, or other Armed Forces of the United States?
Yes-- No--
(Check one box on each line)
Was it during:
Korean War (June 1950 to Jan. 1953)----- Yes No
World War II (Sept. 1940 to July 1947)----- Yes No
World War I (April 1917 to Nov. 1918)----- Yes No
Any other time, including present service----- Yes No

Fill information on location on next page →

PLEASE FILL ONE OF THE TWO SECTIONS BELOW

→ If you are on a MILITARY INSTALLATION →

• Name of installation
• Location of installation:
City or town
County
State (or U.S. possession, etc.)

OR

→ If you are on a VESSEL →

• Name of vessel
• Name of operator of vessel (if U.S. Government, specify Navy, Coast Guard, etc.)
• On April 1, 1960, was this vessel berthed in a U.S. port (including Alaska, Hawaii, Puerto Rico, American Samoa, Canal Zone, Guam, and the Virgin Islands)?

Yes-- No--

Answer a to d, below

a. Name of pier or other designated anchorage
b. Name of port
c. City or town
d. State (or U.S. possession, etc.)

(This form may be reproduced if additional copies are needed.)



U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS



1960 POPULATION CENSUS REPORT FOR
MILITARY AND MARITIME PERSONNEL

→ This official form contains the 1960 Census report for:
Please write your name here →
.....
(Last name) (First name) (Middle initial)

Dear Fellow American:

This report form must be filled for you to be counted in the 1960 Census of the United States. As you know, our Nation has taken a Population Census every ten years since 1790. Facts about the numbers of Americans, their location, ages, education, occupations, etc., are very important to all of us.

Please fill out this form completely and correctly. It will take only a few minutes of your time. The form can be sealed with the gummed flap so that your answers are confidential.

Return the completed form to the person who gave it to you, in accordance with the arrangements on your post or ship. Thank you for your cooperation.

Sincerely yours,

Robert W. Burgess

Robert W. Burgess, Director
Bureau of the Census

DO NOT FILL UNTIL CENSUS DAY APRIL 1, 1960

CONFIDENTIAL—The Census is required by the United States Constitution and further authorized by 13 U.S.C. 5, 9, 141, 221-4. The law requires that the inquiries be answered completely and accurately, and guarantees that the information furnished will be accorded confidential treatment. The Census report cannot be used for purposes of taxation, investigation, or regulation.

(Back)

Fold along this line for sealing

P4. Sex: Male Female

P5. Color or race:
 White If other (for example, American Indian, Japanese, etc.), write in: _____
 Negro

P6. When were you born? Month Year

P7. Are you now—(Check one box)
 Married Divorced Single (never married)
 Widowed Separated

P8. Where were you born? (If born in hospital, give residence of mother, not location of hospital)
 If born in the United States, write name of State.
 If born outside the United States, write name of country, U.S. possession, etc. Use international boundaries as now recognized by the U.S. Distinguish Northern Ireland from Ireland (Eire).

(State, foreign country, U.S. possession, etc.)

P9. If you were born outside the U.S.—
 What language was spoken in your home before you came to the United States?

P10. What country was your father born in?
 United States OR _____
(Name of foreign country or Puerto Rico, Guam, etc.)

P11. What country was your mother born in?
 United States OR _____
(Name of foreign country or Puerto Rico, Guam, etc.)

P12. When did you move onto this post or ship?
 (Check date of last move)
 In 1959 or 1960 Jan. 1954 to March 1955
 In 1958 1950 to 1953
 In 1957 1940 to 1949
 April 1955 to Dec. 1956 1939 or earlier
 Always lived here

P13. Did you live on this post or ship on April 1, 1955? (Answer 1 or 2)
 1. Yes, this post or ship
 2. No, somewhere else
 Where did you live on April 1, 1955? If on board ship on April 1, 1955, check
 a. City or town _____
 b. If city or town—Did you live inside the city limits? Yes No
 c. County _____
 AND State, foreign country U.S. possession, etc. _____

P14. What is the highest grade (or year) of regular school you have ever attended? (Check one box)
 If now attending a regular school or college, check the grade (or year) you are in. If it is in junior high school, check the box that stands for that grade (or year).
 Never attended school
 Kindergarten
 Elementary school (Grade) 1 2 3 4 5 6 7 8
 High school (Year) 1 2 3 4
 College (Year) 1 2 3 4 5 6 or more

P15. Did you finish the highest grade (or year) you attended?
 Finished this grade Did not finish this grade Never attended school

P16. Have you attended regular school or college at any time since February 1, 1950?
 If you have attended only business or trade school, or adult education classes, check "No."
 If you are taking correspondence courses (given by USAFI, a university, etc.) for high school or college credit, check "Yes."
 Yes No

P17. Is it a public school or a private school?
 Public school
 Private or parochial school

P18. If you have ever been married—
 Have you been married more than once?
 Once More than once
 P19. When did you get married? When did you get married for the first time?
 Month Year
 Month Year

P20. How many hours did you work last week (at all jobs)?
 (Check one box. If exact figure not known, give best estimate)
 1 to 14 hours OR
 15 to 29 hours Did not work last week because you were:
 30 to 34 hours
 35 to 39 hours
 40 hours • looking for work or waiting to report for duty this week
 41 to 48 hours
 49 to 59 hours
 60 hours or more • on leave, sick, etc.

P21. Occupation (Answer 1 or 2)
 1. Now in the Army, Navy, Air Force, Marine Corps, or Coast Guard
 OR
 2. Now in the Merchant Marine Answer d and c, below
 d. What kind of work do you do?

For example: Able seaman, messman, water tender, officer, chief engineer, radio operator, second mate, stewardess.

AND
 e. Are you working? (Check one box)
 • as an employee of a private company
 • as a government employee (Federal, State, county, or local)
 • on a ship which you own

If you worked last week at military or civilian work, answer questions P28 and P29.

P22. What city and county did you work in last week?
 If you worked in more than one city or county, give place where you worked most last week.
 Answer a, b, and c, below OR check Worked on this post or on board ship

a. City or town _____
 b. If city or town—Did you work inside the city limits? Yes No
 c. County _____ State _____

P29. How did you get to work last week?
 Check one box for principal means used last week OR check Worked on this post or on board ship
 Railroad Taxicab Walk only
 Subway or elevated Private auto or car pool
 Bus or streetcar Other means—Write in: _____

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