Census 2000 Puerto Rico

U.S. Department of Commerce Bureau of the Census



This is the official form for all the people at this address. It is quick and easy, and your answers are protected by law. Complete the Census and help your community get what it needs — today and in the future!

Start Here Please use a black or blue pen.

How many people were living or staying in this house, apartment, or mobile home on April 1, 2000?

Number of people

INCLUDE in this number:

- foster children, roomers, or housemates
- people staying here on April 1, 2000 who have no other permanent place to stay
- people living here most of the time while
- working, even if they have another place to live

DO NOT INCLUDE in this number:

- college students living away while attending college
- people in a correctional facility, nursing home, or
- mental hospital on April 1, 2000
- Armed Forces personnel living somewhere else
- people who live or stay at another place most of the time

Refer to the address label on this page. If that address is NOT the MAILING address of this residence, print the mailing address below. House number

Development/condominium name; Street or road name, Rural route and box, or PO box

Apartment number
City
State
ZIP Code

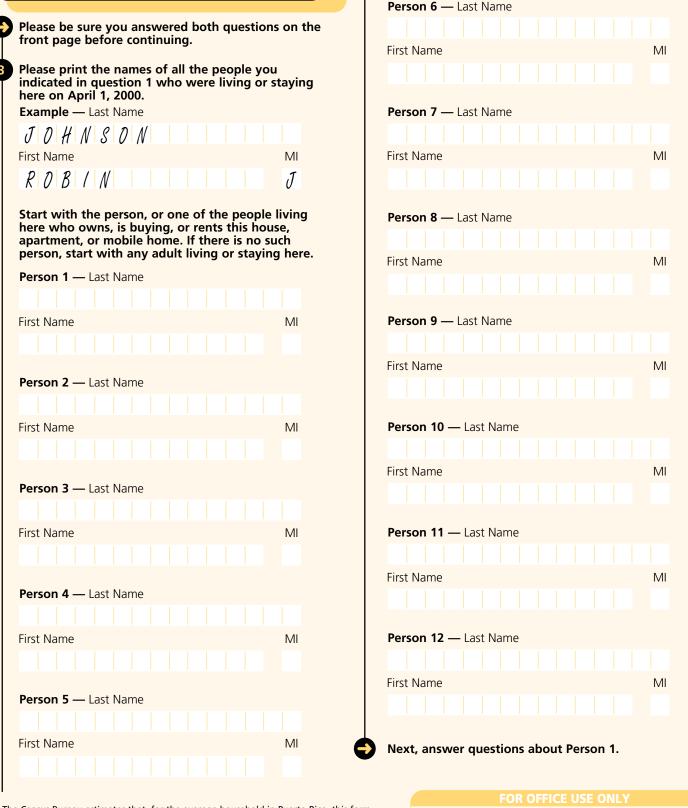
Please turn the page and print the names of all the people living or staying here on April 1, 2000.

If you need help completing this form, call 1–800–471–9424 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

TDD – Telephone display device for the hearing impaired. Call 1–800–582–8330 between 8:00 a.m. and 9:00 p.m., 7 days a week. The telephone call is free.

¿NECESITA AYUDA? Si usted necesita ayuda para completar este cuestionario llame al 1–800–471–8642 entre las 8:00 a.m. y las 9:00 p.m., 7 días a la semana. La llamada telefónica es gratis.

List of Persons



The Census Bureau estimates that, for the average household in Puerto Rico, this form will take about 48 minutes to complete, 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 0607-0858, Room 3104, Federal Building 3, Bureau of the Census, Washington, DC 20233.

A. JIC1 B. JIC2 C. JIC3 D. JIC4

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

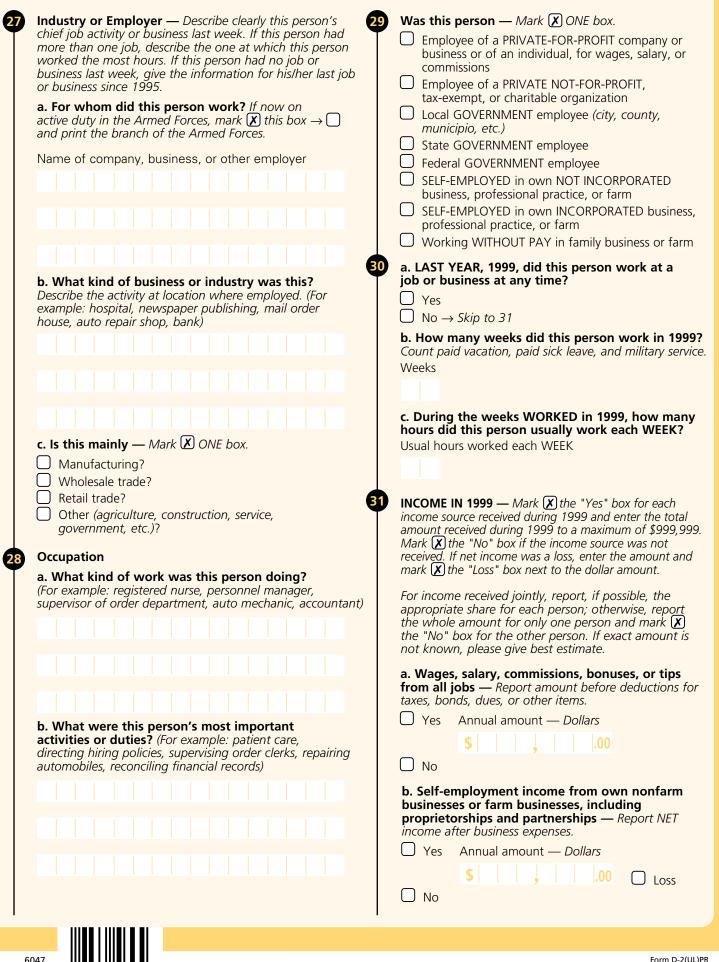
Person Vour answers are important! Every person in the Census counts.	 What is this person's race? Mark ∑ one or more races to indicate what this person considers himself/herself to be. White Black, African Am., or Negro American Indian or Alaska Native — Print name of enrolled or principal tribe.
What is this person's name? Print the name of Person 1 from page 2. Last Name First Name MI	 Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian — Print race.
 What is this person's telephone number? We may contact this person if we don't understand an answer. Area Code + Number What is this person's sex? Mark ONE box. Male Female 	□ Some other race — Print race.
 What is this person's age and what is this person's date of birth? Age on April 1, 2000 Print numbers in boxes. Month Day Year of birth NOTE: Please answer BOTH Questions 5 and 6. Is this person Spanish /Hispanic /Latino? Mark X the "No" box if not Spanish /Hispanic /Latino. No, not Spanish /Hispanic/Latino Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, other Spanish /Hispanic/Latino — Print group. z 	 7 What is this person's marital status? Now married Widowed Divorced Separated Never married a. At any time since February 1, 2000, has this person attended regular school or college? Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree. No, has not attended since February 1 → Skip to Yes, public school, public college Yes, private school, private college

8	b. What grade or level was this person attending? Mark X ONE box.	a. Does this person speak a language other than English at home?
	Nursery school, preschool	Yes
	C Kindergarten	\square No \rightarrow Skip to 12
	Grade 1 to grade 4	b. What is this language?
	Grade 5 to grade 8	b. What is this language?
	Grade 9 to grade 12	
	College undergraduate years (freshman to senior)	(For example: Korean, Italian, Spanish, Vietnamese)
	Graduate or professional school (for example: medical, dental, or law school)	c. How well does this person speak English?
		Very well
9	What is the highest degree or level of school	Well
	this person has COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest	Not well
	degree received.	Not at all
	No schooling completed	
	Nursery school to 4th grade	Where was this person born?
	5th grade or 6th grade	In the United States — Print name of state.
	7th grade or 8th grade	
	9th grade	Outside the United States — Print Puerto Rico or name
	10th grade	of foreign country, U.S. Virgin Islands, Guam, etc.
	11th grade	
	12th grade, NO DIPLOMA	
	HIGH SCHOOL GRADUATE — high school DIPLOMA or the equivalent (for example: GED)	13 Is this person a CITIZEN of the United States?
	Some college credit, but less than 1 year	\bigcirc Yes, born in Puerto Rico \rightarrow <i>Skip to 15a</i>
	 1 or more years of college, no degree 	Yes, born in a U.S. state, District of Columbia, Guam,
	Associate degree (for example: AA, AS)	the U.S. Virgin Islands, or Northern Mariana Islands Yes, born abroad of American parent or parents
	Bachelor's degree (for example: BA, AB, BS)	Yes, a U.S. citizen by naturalization
	Master's degree (for example: MA, MS, MEng, MEd,	No, not a citizen of the United States
	MSW, MBA)	
	Professional degree (for example: MD, DDS, DVM, LLB, JD)	14 When did this person come to live in Puerto Rico? Print numbers in boxes.
	Doctorate degree (for example: PhD, EdD)	Year
10	What is this person's ancestry or ethnic origin?	
		15 a. Did this person live in this house or apartment
		5 years ago (on April 1, 1995)?
	(Ear avample: Italian Jamaican African Am Combedian	Person is under 5 years old \rightarrow <i>Skip to 33</i>
	(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian,	\Box Yes, this house \rightarrow <i>Skip to 16</i>
	Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)	No, outside Puerto Rico or the United States — Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then skip to 16.
		No, different house in Puerto Rico or the United States

1	 b. Where did this person live 5 years ago? Name of city, town, or post office Did this person live inside the limits of the city 			 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment? Yes No → Skip to 20a 			
	or town? Yes No, outside the city/town limits	ne city		b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?			
	Name of municipio or U.S. county			$ \bigcirc Yes \\ \bigcirc No \rightarrow Skip \text{ to } 20a $			
	Enter Puerto Rico or name of U.S. state			c. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer			
	ZIP Code			the question for the grandchild for whom the grandparent has been responsible for the longest period of time.			
				Less than 6 months			
16	Does this person have any of the follow long-lasting conditions:	-		 6 to 11 months 1 or 2 years 3 or 4 years 			
	a. Blindness, deafness, or a severe vision or hearing impairment?	Yes		 5 years or more a. Has this person ever served on active duty 			
	b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?			 in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War. Yes, now on active duty 			
17	Because of a physical, mental, or emotion condition lasting 6 months or more, does this person have any difficulty in doing a the following activities:	s		Yes, on active duty in past, but not now No, training for Reserves or National Guard only \rightarrow <i>Skip to 21</i>			
	-	Yes	No	\bigcup No, never served in the military \rightarrow <i>Skip to 21</i>			
	a. Learning, remembering, or concentrating?		in the U.S. Armed Forces? <i>N</i> EACH period in which this per	b. When did this person serve on active duty in the U.S. Armed Forces? <i>Mark</i> 🗶 a box for			
	b. Dressing, bathing, or getting around inside the home?			EACH period in which this person served.			
	c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home alone to shop or visit a doctor's office?			 August 1990 to March 1995 (including Persian Gulf War) September 1980 to July 1990 			
	d. (Answer if this person is 16 YEARS OLD OR OVER.) Working at a job or business?			 May 1975 to August 1980 Vietnam era (August 1964—April 1975) February 1955 to July 1964 			
18	Was this person under 15 years of age o April 1, 2000?	n		 Korean conflict (June 1950—January 1955) World War II (September 1940—July 1947) 			
	$\bigcirc Yes \rightarrow Skip \ to \ 33$			Some other time			
	U No			c. In total, how many years of active-duty military service has this person had?			
				Less than 2 years2 years or more			



21	LAST WEEK, did this person do ANY work for either pay or profit? Mark X the "Yes" box even if the person worked only 1 hour, or helped without pay in a	•	lf "Car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.
	family business or farm for 15 hours or more, or was on active duty in the Armed Forces.	23	b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?
	Yes		Drove alone
	\bigcirc No \rightarrow Skip to 25a		2 people
22	At what location did this person work LAST		3 people
4	WEEK? If this person worked at more than one location,		4 people
	print where he or she worked most last week.		5 or 6 people
	a. Development or condominium name; Number and street name		7 or more people
		24	a. What time did this person usually leave home to go to work LAST WEEK?
			a.m. p.m.
	(If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)		b. How many minutes did it usually take this person to get from home to work LAST WEEK?
	b. Name of city, town, or post office		Minutes
	c. Is the work location inside the limits of that city or town?	•	Answer questions 25–26 for persons who did not work for pay or profit last week. Others skip to 27.
	Yes	25	a. LAST WEEK, was this person on layoff from
	No, outside the city/town limits	Y	a job?
	d. Name of municipio or U.S. county		\Box Yes \rightarrow Skip to 25c
			No
	e. Enter Puerto Rico or name of U.S. state or foreign country		b. LAST WEEK, was this person TEMPORARILY absent from a job or business?
			Yes, on vacation, temporary illness, labor dispute, etc. \rightarrow <i>Skip to 26</i>
	f. ZIP Code		\square No \rightarrow Skip to 25d
			c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
2	a. How did this person usually get to work LAST		$\bigcirc \text{ Yes} \rightarrow Skip \text{ to 25e}$
T	WEEK? If this person usually used more than one method		$\bigcirc No$
	of transportation during the trip, mark (X) the box of the one used for most of the distance.		d. Has this person been looking for work during
	Car, truck, or van		the last 4 weeks?
	Bus or trolley bus		Yes
	Público		\bigcirc No \rightarrow Skip to 26
	Subway or elevated		e. LAST WEEK, could this person have started a
			job if offered one, or returned to work if recalled?
	Ferryboat		Yes, could have gone to work
	Taxicab		No, because of own temporary illness
	Motorcycle		No, because of all other reasons (in school, etc.)
	Bicycle		
	U Walked	26	When did this person last work, even for a few days?
	\Box Worked at home \rightarrow <i>Skip to 27</i>		1995 to 2000
	Other method		$\square 1995 \text{ to } 2000$ $\square 1994 \text{ or earlier, or never worked} \rightarrow Skip \text{ to } 31$



Yes Annual amount — Dollars S 00 Annual amount — Dollars S 00 Asocial Security or Railroad Retirement Owned by you or someone in this household with a montgage or loans? No Owned by you or someone in this household with a montgage or loan? No Owned by you or someone in this household free and cash rent? S 00 No Retrement, Statute or Loans S 00 Yes Annual amount — Dollars S 00 No A one-family house detached from any other house A building with 3 or 4 apartments A building with 20 to 9 apartments A building with 20 to 9 apartments A building with 20 to 19 apartments A building with 20 to 19 apartments Boat, RV, van, etc. S 00 No g. Retirement, survivor, or disability pensions — b NoT include Social Security. Yes Annual amount — Dollars S 00 No G g. Retirement, survivor, or disability pensions — b NoT include Social Security. Yes Annual amount — Dollars <th>31 c. Interest, dividends, net rental income, royalty income, or income from estates and trusts — <i>Report</i> even small amounts credited to an account.</th> <th>Now, please answer questions 33—53 about your household.</th>	31 c. Interest, dividends, net rental income, royalty income, or income from estates and trusts — <i>Report</i> even small amounts credited to an account.	Now, please answer questions 33—53 about your household.
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 32 What was this person's total income in 1999? Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark X the "Loss" box next to the dollar amount. Annual amount — Dollars None OR \$ 100 Loss 		
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 No What was this person's total income in 1999? Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark x the "Loss" box next to the dollar amount. Annual amount — Dollars None OR None OR Image: Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark and mark are the amount and mark are the dollar amount. Image: Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark are the amount and mark are the dollar amount. Image: Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark are the amount and mark are the dollar amount. Image: Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark are the amount and mark are the amount and mark are the dollar amount. Image: Add entries in questions and the dollar amount. Image: Add entries in questions are the amount and mark are the amount and mark are the amount and mark are the amount. Image: Add entries in questions are the amount and mark are the amount and the amount. Image: Add entries in questions are the amount and the amount and the amount are the amount are the amount and the amount are the amount ar	\$, .00	
 What was this person's total income in 1999? Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark x the "Loss" box next to the dollar amount. Annual amount — Dollars None OR None OR Income in the income in the income in the income in the income i	□ No	
 entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark x the "Loss" box next to the dollar amount. Annual amount — Dollars None OR None OR Image: Annual amount in the image: Annual amount image: A		1970 to 1979
 income was a loss, enter the amount and mark the "Loss" box next to the dollar amount. Annual amount — Dollars None OR None OR Image: Annual amount in the loss in the l		1969 or earlier
Annual amount — Dollars porches, balconies, foyers, halls, or half-rooms. None OR \$ 1 room 6 rooms 2 rooms 7 rooms 3 rooms 8 rooms	income was a loss, enter the amount and mark 🗶 the	
None OK OK OK OK	Annual amount — Dollars	
Image: Contraction of the contraction		1 room 6 rooms
3 rooms 8 rooms		
A rooms 9 or more rooms		4 rooms 9 or more rooms
5 rooms		5 rooms

38	 How many bedrooms do you have; that is, how many bedrooms would you list if this house, apartment, or mobile home were on the market for sale or rent? No bedroom 1 bedroom 2 bedrooms 3 bedrooms 4 bedrooms 	 Answer ONLY if this is a ONE-FAMILY HOUSE OR MOBILE HOME — All others skip to 45. a. Is there a business (such as a store or barber shop) or a medical office on this property? Yes No b. How many cuerdas is this house or mobile home on?
39	 4 bedrooms 5 or more bedrooms Do you have COMPLETE plumbing facilities in this house, apartment, or mobile home; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower? Yes, have all three facilities No 	□Less than 1 cuerda → Skip to 45□1 to 9.9 cuerdas□10 or more cuerdas c. In 1999, what were the actual sales of all agricultural products from this property? □None□\$2,500 to \$4,999□\$1 to \$999□\$1,000 to \$2,499□\$10,000 or more
40	Do you have COMPLETE kitchen facilities in this house, apartment, or mobile home; that is, 1) a sink with piped water, 2) a range or stove, and 3) a refrigerator? Yes, have all three facilities No	 What are the annual costs of utilities and fuels for this house, apartment, or mobile home? If you have lived here less than 1 year, estimate the annual cost. a. Electricity Annual cost — Dollars
41	Is there telephone service available in this house, apartment, or mobile home from which you can both make and receive calls? Yes No	 S
42	Which FUEL is used MOST for heating this house, apartment, or mobile home? Gas: from underground pipes serving the neighborhood Gas: bottled, tank, or LP Electricity Fuel oil, kerosene, etc. Coal or coke Wood Solar energy Other fuel No fuel used How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of your household? None 1 2 3 4 5 6 or more	Annual cost — Dollars S



6049

46	Answer ONLY if you PAY RENT for this house, apartment, or mobile home — All others skip to 47.	49	What were the real estate taxes on THIS property last year?
	a. What is the monthly rent?		Yearly amount — Dollars
	Monthly amount — <i>Dollars</i>		\$
	\$		OR
	b. Does the monthly rent include any meals?		□ None
	Yes	50	What was the annual payment for fire, hazard,
	No		and flood insurance on THIS property?
47	Answer questions 47a—53 if you or someone in this household owns or is buying this house, apartment, or mobile home; otherwise, skip to		Annual amount — Dollars
	questions for Person 2. a. Do you have a mortgage, deed of trust, contract		OR Difference Differen
	to purchase, or similar debt on THIS property?		William in the control of their more entry that is
	Yes, mortgage, deed of trust, or similar debt	51	What is the value of this property; that is, how much do you think this house and lot,
	Yes, contract to purchase		apartment, or mobile home and lot would sell
	\Box No \rightarrow Skip to 48a		for if it were for sale?
	b. How much is your regular monthly mortgage payment on THIS property? Include payment only on first mortgage or contract to purchase.		Less than \$10,000 \$90,000 to \$99,999 \$10,000 to \$14,999 \$100,000 to \$124,999 \$15,000 to \$19,999 \$125,000 to \$149,999
	Monthly amount — Dollars		□ \$20,000 to \$24,999 □ \$150,000 to \$174,999
	\$.00		□ \$25,000 to \$29,999 □ \$175,000 to \$199,999
	OR		\$30,000 to \$34,999 \$200,000 to \$249,999
	\Box No regular payment required \rightarrow <i>Skip to 48a</i>		\$35,000 to \$39,999 \$250,000 to \$299,999
	c. Does your regular monthly mortgage payment		\$40,000 to \$49,999 \$300,000 to \$399,999
	include payments for real estate taxes on THIS property?		\$50,000 to \$59,999 \$400,000 to \$499,999 \$60,000 to \$69,999 \$500,000 to \$749,999
	Yes, taxes included in mortgage payment		\$70,000 to \$79,999 \$750,000 to \$999,999
	No, taxes paid separately or taxes not required		\$80,000 to \$89,999 \$1,000,000 or more
	d. Does your regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?	52	Answer ONLY if this is a CONDOMINIUM — What is the monthly condominium fee?
	Yes, insurance included in mortgage payment		Monthly amount — Dollars
	No, insurance paid separately or no insurance		\$
48	a. Do you have a second mortgage or a home equity loan on THIS property? Mark 🗴 all boxes that apply.	53	Answer ONLY if this is a MOBILE HOME — a. Do you have an installment loan or contract on THIS mobile home?
	Yes, a second mortgage		
	Yes, a home equity loan		
	\square No \rightarrow Skip to 49		b. What was the total cost for installment loan
	b. How much is your regular monthly payment on all second or junior mortgages and all home equity loans on THIS property?		payments, personal property taxes, site rent, registration fees, and license fees on THIS mobile home and its site last year? Exclude real estate taxes.
	Monthly amount — Dollars		Yearly amount — Dollars
	\$		
	OR		\$
	No regular payment required	•	Are there more people living here? If yes, continue with Person 2.

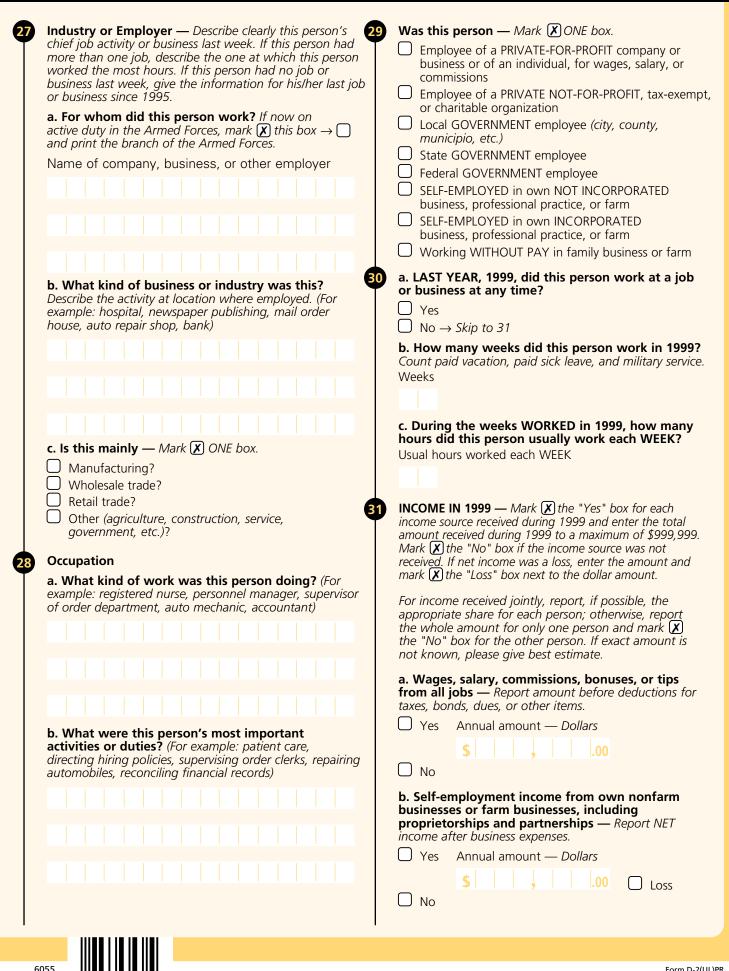
Form D-2(UL)PR

Census information helps your community get financial assistance for roads, hospitals, schools and more.	 Is this person Spanish/Hispanic/Latino? Mark () to "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.
What is this person's name? Print the name of Person 2 from page 2. Last Name First Name MI	6 What is this person's race? Mark 🕅 one or more races to indicate what this person considers himself/herself to be.
How is this person related to Person 1? Mark 🖉 ONE box. Husband/wife Natural-born son/daughter Adopted son/daughter Stepson/stepdaughter Brother/sister Father/mother Grandchild Parent-in-law Son-in-law/daughter-in-law Other relative — Print exact relationship.	 White Black, African Am., or Negro American Indian or Alaska Native — Print name or enrolled or principal tribe. <i>y</i> Asian Indian Chinese Guamanian or Chamorro Japanese Korean Vietnamese Other Asian — Print race. <i>y</i> Some other race — Print race. <i>y</i>
 What is this person's sex? Mark ONE box. Male Female What is this person's age and what is this person's date of birth? Age on April 1, 2000 Print numbers in boxes. Month Day Year of birth 	 What is this person's marital status? Now married Widowed Divorced Separated Never married

8 a. At any time since February 1, 2000, has this person attended regular school or college? Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.	 a. Does this person speak a language other than English at home? Yes No → Skip to 12
\Box No, has not attended since February 1 \rightarrow Skip to 9	b. What is this language?
Yes, public school, public college	
Yes, private school, private college	
b. What grade or level was this person attending?	(For example: Korean, Italian, Spanish, Vietnamese)
Mark 🖉 ONE box.	c. How well does this person speak English?
Nursery school, preschool	Very well
C Kindergarten	🗋 Well
Grade 1 to grade 4	Not well
Grade 5 to grade 8	🗋 Not at all
Grade 9 to grade 12	12 Where was this person born?
College undergraduate years (freshman to senior)	In the United States — Print name of state.
Graduate or professional school (for example:	In the onited states — Print name of state.
medical, dental, or law school)	
9 What is the highest degree or level of school this person has COMPLETED? Mark I ONE box. If currently enrolled, mark the previous grade or	Outside the United States — Print Puerto Rico or name of foreign country, U.S. Virgin Islands, Guam, etc.
highest degree received.	
No schooling completed	13 Is this person a CITIZEN of the United States?
Nursery school to 4th grade	Yes, born in Puerto Rico \rightarrow <i>Skip to 15a</i>
5th grade or 6th grade	Yes, born in a U.S. state, District of Columbia, Guam,
7th grade or 8th grade	the U.S. Virgin Islands, or Northern Mariana Islands
9th grade	Yes, born abroad of American parent or parents
🗌 10th grade	Yes, a U.S. citizen by naturalization
🗌 11th grade	No, not a citizen of the United States
 12th grade, NO DIPLOMA HIGH SCHOOL GRADUATE — high school DIPLOMA 	When did this person come to live in Puerto Rico?
or the equivalent (for example: GED)	
Some college credit, but less than 1 year	Year
1 or more years of college, no degree	
Associate degree (for example: AA, AS)	
Bachelor's degree (for example: BA, AB, BS)	15 a. Did this person live in this house or apartment 5 years ago (on April 1, 1995)?
Master's degree (for example: MA, MS, MEng,	Person is under 5 years old \rightarrow <i>Skip to 33</i>
MEd, MSW, MBA)	$\bigcirc \text{ Yes, this house} \rightarrow Skip to 16$
Professional degree (for example: MD, DDS, DVM,	\square No, outside Puerto Rico or the United States —
LLB, JD) Doctorate degree (for example: PhD, EdD)	Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then skip to 16.
10 What is this person's ancestry or ethnic origin?	
	No, different house in Puerto Rico or United States
(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)	

15	 b. Where did this person live 5 years ago? Name of city, town, or post office Did this person live inside the limits of the city or town? Yes No, outside the city/town limits 				 a. Does this person have any of his/her own grandchildren under the age of 18 living in this nouse or apartment? Yes No → Skip to 20a b. Is this grandparent currently responsible for nost of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?
	Name of municipio or U.S. county Enter Puerto Rico or name of U.S. state ZIP Code			((f	Yes No \rightarrow Skip to 20a How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is inancially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent
					Less than 6 months 6 to 11 months
16	Does this person have any of the follow long-lasting conditions:	ving Yes	No		1 or 2 years 3 or 4 years
	a. Blindness, deafness, or a severe vision or hearing impairment?b. A condition that substantially limits			T t	 5 years or more a. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or
	one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?			f a	National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
17	Because of a physical, mental, or emoti condition lasting 6 months or more, do this person have any difficulty in doing the following activities:	es			 Yes, now on active duty Yes, on active duty in past, but not now No, training for Reserves or National Guard only → <i>Skip to 21</i>
	a. Learning, remembering, or	Yes	No	k	\square No, never served in the military \rightarrow <i>Skip to 21</i> b. When did this person serve on active duty
	concentrating? b. Dressing, bathing, or getting around			E	n the U.S. Armed Forces? Mark 🗶 a box for EACH period in which this person served.
	inside the home? c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home alone to shop or visit a doctor's office?				 April 1995 or later August 1990 to March 1995 (including Persian Gulf War) September 1980 to July 1990 May 1975 to August 1980
	d. (Answer if this person is 16 YEARS OLD OR OVER.) Working at a job or business?				May 1975 to August 1980 Vietnam era (August 1964—April 1975) February 1955 to July 1964
18	Was this person under 15 years of age April 1, 2000? \bigcirc Yes \rightarrow Skip to 33 \bigcirc No	on			 Korean conflict (June 1950—January 1955) World War II (September 1940—July 1947) Some other time In total, how many years of active-duty military
				s ((Exervice has this person had?
				I	Form D-2(UL)F

21 LAST WEEK, did this person do ANY work for either pay or profit? <i>Mark</i> (2) the "Yes" box even if the pay in a set of the set o	If "Car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.
active duty in the Armed Forces.	b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?
Pes No → Skip to 25a At what location did this person work LAST	Drove alone 2 people
WEEK? If this person worked at more than one location, print where he or she worked most last week.	 3 people 4 people 5 or 6 people
a. Development or condominium name; Number and street name	7 or more people
	a. What time did this person usually leave home to go to work LAST WEEK?
	a.m. D p.m.
(If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)	b. How many minutes did it usually take this person to get from home to work LAST WEEK?
b. Name of city, town, or post office	Minutes
c. Is the work location inside the limits of that city or town?	Answer questions 25–26 for persons who did not work for pay or profit last week. Others skip to 27.
Yes 2 No, outside the city/town limits	a. LAST WEEK, was this person on layoff from a job?
d. Name of municipio or U.S. county	
e. Enter Puerto Rico or name of U.S. state or foreign country	b. LAST WEEK, was this person TEMPORARILY absent from a job or business?
	Yes, on vacation, temporary illness, labor dispute, etc. \rightarrow <i>Skip to 26</i>
f. ZIP Code	\bigcirc No \rightarrow Skip to 25d
	c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
23 a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the trip, mark is the box of the	$ \begin{array}{ c c } \hline & Yes \rightarrow Skip \ to \ 25e \\ \hline & No \end{array} $
one used for most of the distance.	d. Has this person been looking for work during the last 4 weeks?
Bus or trolley bus	
Público Subway or elevated	\square No \rightarrow Skip to 26
Railroad	e. LAST WEEK, could this person have started a job if offered one, or returned to work if recalled?
Erryboat	Yes, could have gone to work
Taxicab	No, because of own temporary illness
	No, because of all other reasons (in school, etc.)
Bicycle 2 Walked	6 When did this person last work, even for a
□ Walked \square Worked at home \rightarrow <i>Skip to 27</i>	few days?
Other method	1995 to 2000
	\bigcup 1994 or earlier, or never worked \rightarrow <i>Skip to 31</i>



income, even sma Yes	est, dividends, net rental income, royalty or income from estates and trusts — Report all amounts credited to an account. Annual amount — Dollars \$	Person 1+1=2 Image: Description of the state of the sta
 Yes No f. Any p from the Yes No g. Retire Do NOT Yes No h. Any c such as compeninclude la inheritan Yes No No What w entries in income v "Loss" box None 33 Are there 	 a b b b b c b c c c c c c c c c c	 What is this person's name? Print the name of Person 3 from page 2. Last Name First Name MI How is this person related to Person 1? Mark (*) ONE box. Husband/wife Natural-born son/daughter Adopted son/daughter Stepson/stepdaughter Brother/sister Brather/mother Grandchild Parent-in-law Other relative — Print exact relationship. 7 Mor RELATED to Person 1: Roomer, boarder Housemate, roommate Other nonrelative What is this person's sex? Mark (*) ONE box. Male Female What is this person's age and what is this person's date of birth? Age on April 1, 2000 Print numbers in boxes. Mont Day Year of birth

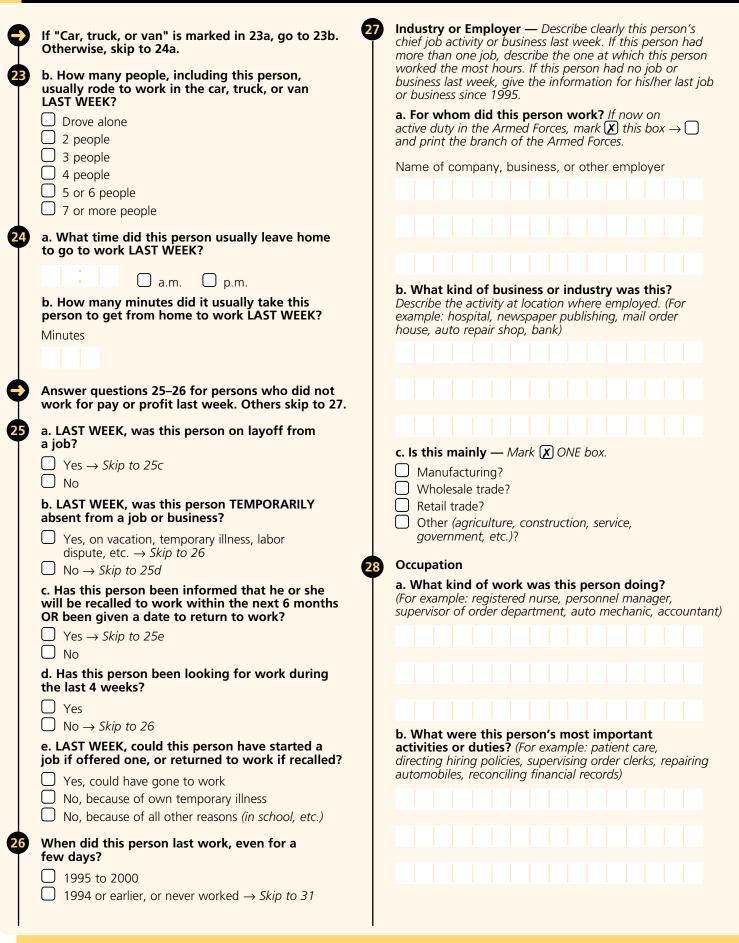
5	 NOTE: Please answer BOTH Questions 5 and 6. Is this person Spanish / Hispanic / Latino? Mark	 a. At any time since February 1, 2000, has this person attended regular school or college? Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree. No, has not attended since February 1 → Skip to 9 Yes, public school, public college Yes, private school, private college b. What grade or level was this person attending? Mark () ONE box. Nursery school, preschool Kindergarten
6	What is this person's race? Mark () one or more races to indicate what this person considers himself/herself to be. White Black, African Am., or Negro American Indian or Alaska Native — Print name of enrolled or principal tribe. ↓ Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian — Print race. ↓	 Grade 1 to grade 4 Grade 5 to grade 8 Grade 9 to grade 12 College undergraduate years (freshman to senior) Graduate or professional school (for example: medical, dental, or law school) What is the highest degree or level of school this person has COMPLETED? Mark 🗴 ONE box. If currently enrolled, mark the previous grade or highest degree received. No schooling completed Nursery school to 4th grade 5th grade or 6th grade 9th grade 10th grade 12th grade, NO DIPLOMA
7	What is this person's marital status? Now married Vidowed Divorced Separated Never married	 HIGH SCHOOL GRADUATE — high school DIPLOMA or the equivalent (for example: GED) Some college credit, but less than 1 year 1 or more years of college, no degree Associate degree (for example: AA, AS) Bachelor's degree (for example: BA, AB, BS) Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA) Professional degree (for example: MD, DDS, DVM, LLB, JD) Doctorate degree (for example: PhD, EdD)



1		15	b. Where did this person live 5 years ago	?	
	English at home?	Ĩ	Name of city, town, or post office		
	$\bigcirc \text{ Yes} \\ \bigcirc \text{ No} \rightarrow Skip \text{ to } 12 \\ \hline \end{aligned}$				
	,		Did this newson live inside the limits of th		
	b. What is this language?		Did this person live inside the limits of th or town?	ie city	
			🗋 Yes		
	(For example: Korean, Italian, Spanish, Vietnamese)		No, outside the city/town limits		
	c. How well does this person speak English?		Name of municipio or U.S. county		
	O Very well				
			Enter Puerto Rico or name of U.S. state		
	 Not well Not at all 				
	Where was this person born?		ZIP Code		
Y	In the United States — Print name of state.				
		16	Does this person have any of the followi	ng	
	Outside the United States — Print Puerto Rico or name of foreign country, U.S. Virgin Islands, Guam, etc.		long-lasting conditions:	Yes	No
			a. Blindness, deafness, or a severe vision or hearing impairment?		
1	 Is this person a CITIZEN of the United States? Yes, born in Puerto Rico → Skip to 15a Yes, born in a U.S. state, District of Columbia, Guam, the U.S. Virgin Islands, or Northern Mariana Islands Yes, born abroad of American parent or parents Yes, a U.S. citizen by naturalization No, not a citizen of the United States 	17	 b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying? Because of a physical, mental, or emotion condition lasting 6 months or more, does this person have any difficulty in doing a the following activities: 	5	
1			-	Yes	No
T	Print numbers in boxes.		a. Learning, remembering, or concentrating?		
	Year		b. Dressing, bathing, or getting around inside the home?		
1	a. Did this person live in this house or apartment 5 years ago (on April 1, 1995)?		c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home alone to shop or visit a doctor's office?		
	$\bigcirc Person is under 5 years old \rightarrow Skip to 33$		d. (Answer if this person is 16 YEARS OLD	\square	
	\bigcirc Yes, this house \rightarrow <i>Skip to 16</i>		OR OVER.) Working at a job or business?	\Box	\Box
	No, outside Puerto Rico or the United States — Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then skip to 16.	18	Was this person under 15 years of age or April 1, 2000?	n	
			$\bigcirc Yes \rightarrow Skip \text{ to } 33$		
	No, different house in Puerto Rico or the United States		U No		

 a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment? Yes No → Skip to 20a b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment? Yes No → Skip to 20a 	 LAST WEEK, did this person do ANY work for either pay or profit? Mark the "Yes" box even if the person worked only 1 hour, or helped without pay in a family business or farm for 15 hours or more, or was on active duty in the Armed Forces. Yes No → Skip to 25a At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week. a. Development or condominium name; Number and street name
 c. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time. Less than 6 months 6 to 11 months 1 or 2 years 3 or 4 years 5 years or more 	 (If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.) b. Name of city, town, or post office c. Is the work location inside the limits of that
 a. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War. Yes, now on active duty Yes, on active duty in past, but not now No, training for Reserves or National Guard only → <i>Skip to 21</i> b. When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for <i>EACH period in which this person served</i>. April 1995 or later August 1990 to March 1995 (including Persian Gulf War) September 1980 to July 1990 May 1975 to August 1964 Korean conflict (June 1950—January 1955) World War II (September 1940—July 1947) Some other time c. In total, how many years of active-duty military service has this person had? Less than 2 years 2 years or more 	 city or town? Yes No, outside the city/town limits d. Name of municipio or U.S. county e. Enter Puerto Rico or name of U.S. state or foreign country f. ZIP Code





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29	 Was this person — Mark ONE box. Employee of a PRIVATE-FOR-PROFIT company or business or of an individual, for wages, salary, or commissions Employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization Local GOVERNMENT employee (<i>city, county, municipio, etc.</i>) State GOVERNMENT employee Federal GOVERNMENT employee SELF-EMPLOYED in own NOT INCORPORATED 	 c. Interest, dividends, net rental income, royalty income, or income from estates and trusts — Report even small amounts credited to an account. Yes Annual amount — Dollars No d. Social Security or Railroad Retirement Yes Annual amount — Dollars
30	 business, professional practice, or farm SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm Working WITHOUT PAY in family business or farm a. LAST YEAR, 1999, did this person work at a job or business at any time? Yes 	 Supplemental Security Income (SSI) Yes Annual amount — Dollars .00
	 No → Skip to 31 b. How many weeks did this person work in 1999? Count paid vacation, paid sick leave, and military service. Weeks 	 No f. Any public assistance or welfare payments from the state or local welfare office Yes Annual amount — Dollars
31	 c. During the weeks WORKED in 1999, how many hours did this person usually work each WEEK? Usual hours worked each WEEK INCOME IN 1999 — Mark X the "Yes" box for each income source received during 1999 and enter the total amount received during 1999 to a maximum of \$999,999. Mark X the "No" box if the income source was not received. If net income was a loss, enter the amount and mark X the "Loss" box next to the dollar amount. For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person and mark X the "No" box for the other person. If exact amount is not known, please give best estimate. 	 No g. Retirement, survivor, or disability pensions — Do NOT include Social Security. Yes Annual amount — Dollars Yes Annual amount — 000 No h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony — Do NOT include lump-sum payments such as money from an inheritance or sale of a home. Yes Annual amount — Dollars
	 a. Wages, salary, commissions, bonuses, or tips from all jobs — Report amount before deductions for taxes, bonds, dues, or other items. Yes Annual amount — Dollars No b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships — Report NET income after business expenses. Yes Annual amount — Dollars Yes Annual amount — Dollars Loss 	 No What was this person's total income in 1999? Add entries in questions 31a—31h; subtract any losses. If net income was a loss, enter the amount and mark the "Loss" box next to the dollar amount. Annual amount — Dollars None OR Are there more people living here? If yes, continue with Person 4.
(Form D-2(UL)F

Person	 NOTE: Please answer BOTH Questions 5 and 6. Is this person Spanish/Hispanic/Latino? Mark the "No" box if not Spanish/Hispanic/Latino.
Knowing about age, race, and sex helps your community better meet the needs of everyone.	 No, not Spanish/Hispanic/Latino Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban
	\Box Yes, other Spanish/Hispanic/Latino — Print group. \mathbf{z}
What is this person's name? Print the name of Person 4 from page 2. Last Name First Name MI	What is this person's race? Mark 🖉 one or more races to indicate what this person considers himself/herself to be.
 How is this person related to Person 1? Mark () ONE box. Husband/wife Natural-born son/daughter Adopted son/daughter Stepson/stepdaughter Brother/sister Father/mother Grandchild Parent-in-law Son-in-law/daughter-in-law Other relative — Print exact relationship. r If NOT RELATED to Person 1: Roomer, boarder Housemate, roommate Unmarried partner Foster child Other nonrelative 	 Black, African Am., or Negro American Indian or Alaska Native — Print name of enrolled or principal tribe. <i>x</i> Asian Indian Asian Indian Chinese Guamanian or Chamorro Japanese Korean Vietnamese Other Pacific Islander — Print race. <i>x</i> Other Asian — Print race. <i>x</i> Some other race — Print race. <i>x</i>
 What is this person's sex? Mark ONE box. Male Female 	What is this person's marital status?
 What is this person's age and what is this person's date of birth? Age on April 1, 2000. Print numbers in boxes. Month Day Year of birth 	 Widowed Divorced Separated Never married

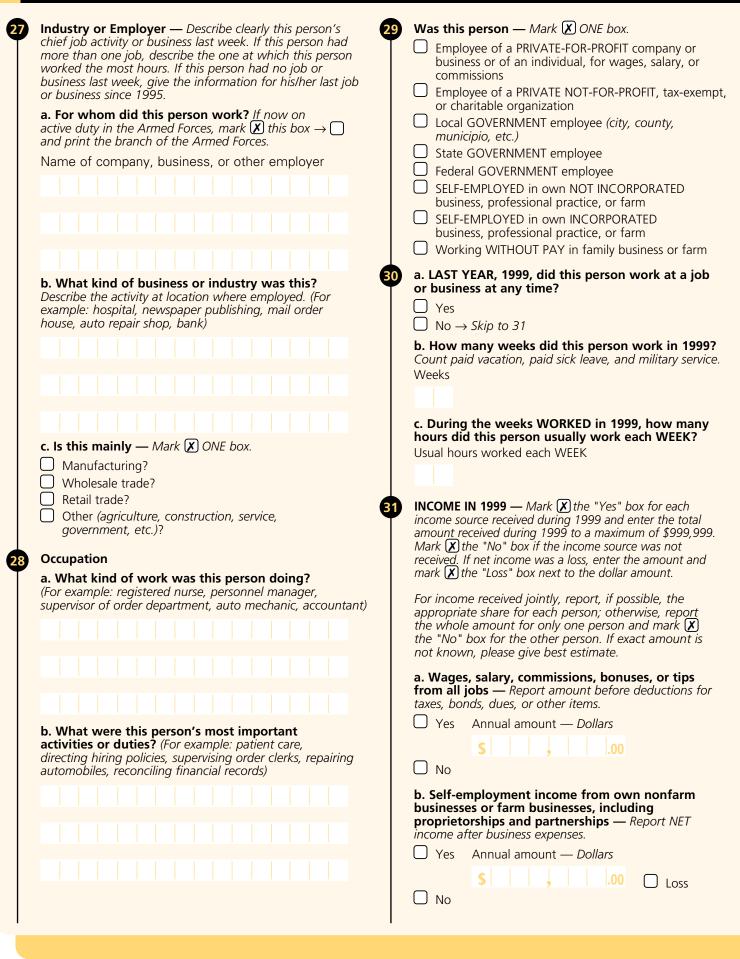
 a. At any time since February 1, 2000, has this person attended regular school or college? Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree. No, has not attended since February 1 → Skip to 9 Yes, public school, public college Yes, private school, private college b. What grade or level was this person attending? Mark X ONE box. Nursery school, preschool Kindergarten Grade 1 to grade 4 Grade 5 to grade 8 Grade 9 to grade 12 College undergraduate years (freshman to senior) Graduate or professional school (for example: medical, dental, or law school) 	 a. Does this person speak a language other than English at home? Yes No → Skip to 12 b. What is this language? (For example: Korean, Italian, Spanish, Vietnamese) c. How well does this person speak English? Very well Well Not well Not at all Where was this person born? In the United States — Print name of state.
 What is the highest degree or level of school this person has COMPLETED? Mark (2) ONE box. If currently enrolled, mark the previous grade or highest degree received. No schooling completed Nursery school to 4th grade 5th grade or 6th grade 7th grade or 8th grade 9th grade 10th grade 11th grade 12th grade, NO DIPLOMA HIGH SCHOOL GRADUATE — high school DIPLOMA or the equivalent (for example: GED) Some college credit, but less than 1 year 1 or more years of college, no degree Associate degree (for example: AA, AS) Bachelor's degree (for example: MA, MS, MEng, MEd, MSW, MBA) Professional degree (for example: MD, DDS, DVM, LB, JD) Doctorate degree (for example: PhD, EdD) What is this person's ancestry or ethnic origin? (For example: Italian, Jamaican, African Am., Cambodian, Gape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.) 	 Outside the United States — Print Puerto Rico or name of foreign country, U.S. Virgin Islands, Guam, etc. Is this person a CITIZEN of the United States? Yes, born in Puerto Rico → Skip to 15a Yes, born a U.S. state, District of Columbia, Guam, the U.S. Virgin Islands, or Northern Mariana Islands Yes, born abroad of American parent or parents Yes, a U.S. citizen by naturalization No, not a citizen of the United States When did this person come to live in Puerto Rico? Print numbers in boxes. Year a. Did this person live in this house or apartment 5 years ago (on April 1, 1995)? Person is under 5 years old → Skip to 33 Yes, this house → Skip to 16 No, outside Puerto Rico or the United States — Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then skip to 16. No, different house in Puerto Rico or the United States



15		jo?	19	a. Does this person have any of his/her own grandchildren under the age of 18 living in this
	Name of city, town, or post office			house or apartment?
				O Yes
	Did this person live inside the limits of	the city	/	\Box No \rightarrow Skip to 20a
	or town? Yes No, outside the city/town limits			b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?
	Name of municipio or U.S. county			Yes
				\Box No \rightarrow Skip to 20a
	Enter Puerto Rico or name of U.S. state			c. How long has this grandparent been responsible
	ZIP Code			for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.
				Less than 6 months
				6 to 11 months
16	Does this person have any of the follow	wing		1 or 2 years
T	long-lasting conditions:	Yes	No	3 or 4 years
	a. Blindness, deafness, or a severe			5 years or more
	vision or hearing impairment?	\cup	20	a. Has this person ever served on active duty in
	b. A condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?			the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
				Yes, now on active duty
17	Because of a physical, mental, or emoti condition lasting 6 months or more, do this person have any difficulty in doing the following activities:	es		 Yes, on active duty in past, but not now No, training for Reserves or National Guard only → Skip to 21
	the following activities.	Yes	No	\Box No, never served in the military \rightarrow <i>Skip to 21</i>
	a. Learning, remembering, or concentrating?			b. When did this person serve on active duty in the U.S. Armed Forces? Mark 🗶 a box for
	b. Dressing, bathing, or getting around inside the home?			EACH period in which this person served.
	c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home			 August 1990 to March 1995 (including Persian Gulf War) September 1980 to July 1990
	alone to shop or visit a doctor's office?	\bigcirc		May 1975 to August 1980
	d. (Answer if this person is 16 YEARS OLD OR OVER.) Working at a job or business?			Vietnam era (August 1964—April 1975)
			_	February 1955 to July 1964
	Was this person under 15 years of age	on		Korean conflict (June 1950—January 1955)
Ψ	April 1, 2000?	on		🔘 World War II (September 1940—July 1947)
	$\bigcirc \text{Yes} \rightarrow Skip \text{ to } 33$			Some other time
	No			c. In total, how many years of active-duty military service has this person had?
				Less than 2 years
				2 years or more

21	LAST WEEK, did this person do ANY work for either pay or profit? Mark (X) the "Yes" box even if the person worked only 1 hour, or helped without pay in a	If "Car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.
	family business or farm for 15 hours or more, or was on active duty in the Armed Forces.	 b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?
	$\bigcirc \text{ Yes} \\ \bigcirc \text{ No} \rightarrow Skip \text{ to } 25a \\ \bigcirc \text{ No} \rightarrow Skip to $	Drove alone
22	At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week. a. Development or condominium name;	 2 people 3 people 4 people 5 or 6 people
	Number and street name	7 or more people
		a. What time did this person usually leave home to go to work LAST WEEK?
		a.m p.m.
	(If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)	b. How many minutes did it usually take this person to get from home to work LAST WEEK?
	b. Name of city, town, or post office	Minutes
	c. Is the work location inside the limits of that city or town?	Answer questions 25–26 for persons who did not work for pay or profit last week. Others skip to 27.
	Yes	25 a. LAST WEEK, was this person on layoff from
	No, outside the city/town limits	a job?
	d. Name of municipio or U.S. county	$ \bigcirc \text{Yes} \to Skip \text{ to } 25c \\ \bigcirc \text{No} $
		b. LAST WEEK, was this person TEMPORARILY
	e. Enter Puerto Rico or name of U.S. state or foreign country	absent from a job or business?
		\bigcup Yes, on vacation, temporary illness, labor dispute, etc. \rightarrow <i>Skip to 26</i>
	f. ZIP Code	\Box No \rightarrow Skip to 25d
		c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
23	a. How did this person usually get to work LAST WEEK? If this person usually used more than one method	$\bigcirc \text{ Yes} \rightarrow Skip \text{ to } 25e$
	of transportation during the trip, mark (\mathbf{X}) the box of the	No No
	one used for most of the distance.	d. Has this person been looking for work during the last 4 weeks?
	Bus or trolley bus	Yes
	Público	\bigcirc No \rightarrow Skip to 26
	 Subway or elevated Railroad 	e. LAST WEEK, could this person have started a job if offered one, or returned to work if recalled?
	Erryboat	Yes, could have gone to work
	Taxicab	No, because of own temporary illness
	Motorcycle	No, because of all other reasons (in school, etc.)
	Bicycle Walked	26 When did this person last work, even for a
	Worked at home \rightarrow <i>Skip to 27</i>	few days?
	Other method	$\bigcup_{i=1}^{n} 1995 \text{ to } 2000$
		\bigcirc 1994 or earlier, or never worked \rightarrow <i>Skip to 31</i>





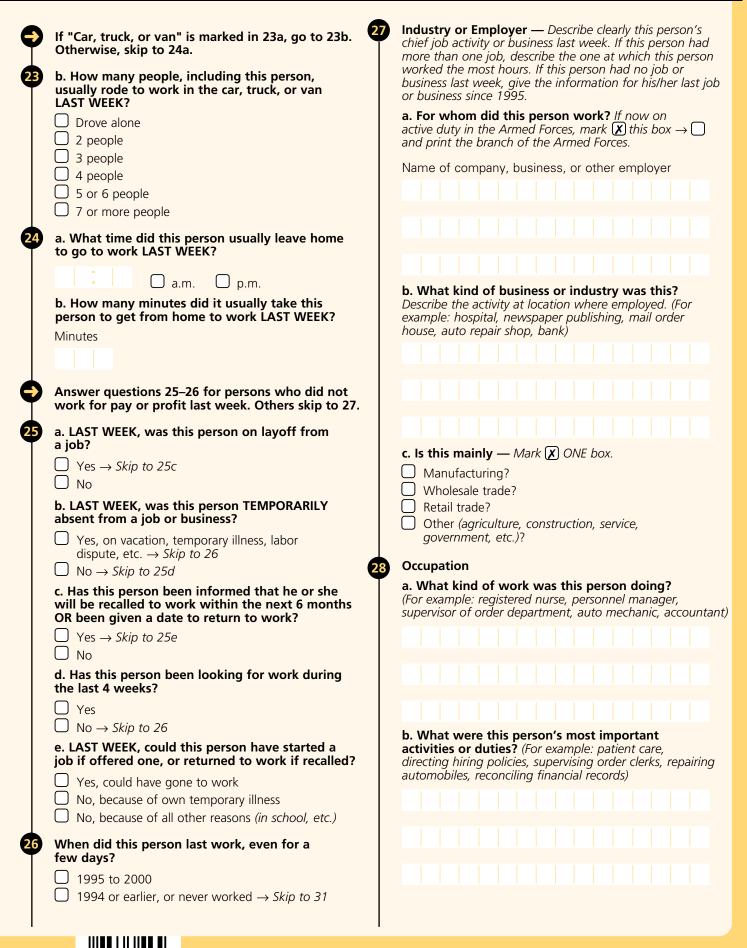
Yes Annual amount — Dollars Yes Annual amount — Dollars Sight amount — Dollars Sight amount — Dollars Sight amount — Dollars Yes Annual amount — Dollars Sight amount — Dollars No	ncome, or income from estates and trusts — Report even small amounts credited to an account.	
No No Vest Annual amount - Dollars Si Si Si No		
<pre>index definition of the future interview is this person's name? Print the name of Person 5 from page 2. Last Name</pre>		
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Continue with Person 5. Age on April 1, 2000 Print numbers in boxes.	Are there more people living here? If yes,	What is this person's age and what is this person's date of birth?
Print numbers in boxes.	continue with Person 5.	Age on April 1, 2000
		vionun Day Year of birth

•	NOTE: Please answer BOTH Questions 5 and 6.	a. At any time since February 1, 2000, has this person attended regular school or college? <i>Include</i>
5	Is this person Spanish/Hispanic/Latino? Mark 🗴 the "No" box if not Spanish/Hispanic/Latino.	only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.
	No , not Spanish/Hispanic/Latino	
	Yes, Mexican, Mexican Am., Chicano	No, has not attended since February 1 \rightarrow <i>Skip to 9</i>
	Yes, Puerto Rican	Yes, public school, public college
	Yes, Cuban	Yes, private school, private college
	U Yes, other Spanish/Hispanic/Latino — Print group. ₽	b. What grade or level was this person attending? Mark X ONE box.
		Nursery school, preschool
		C Kindergarten
		Grade 1 to grade 4
6	What is this person's race? <i>Mark</i> 🗶 one or more	Grade 5 to grade 8
Τ	races to indicate what this person considers	Grade 9 to grade 12
	himself/herself to be.	College undergraduate years (freshman to senior)
	U White	Graduate or professional school (for example: medical,
	🔲 Black, African Am., or Negro	dental, or law school)
	American Indian or Alaska Native — Print name	
	of enrolled or principal tribe. $ arrow$	9 What is the highest degree or level of school
		this person has COMPLETED? Mark X ONE box. If currently enrolled, mark the previous grade or highest
		degree received.
		No schooling completed
	Asian Indian Native Hawaiian	Nursery school to 4th grade
	Chinese Guamanian or	5th grade or 6th grade
	🗌 Filipino 🦳 Chamorro	7th grade or 8th grade
	Japanese Japanese Samoan	9th grade
	Korean U Other Pacific	10th grade
	Vietnamese Print race. 7	11th grade
	Other Asian — Print race. \mathbf{z}	12th grade, NO DIPLOMA
		HIGH SCHOOL GRADUATE — high school DIPLOMA or the equivalent (for example: GED)
		Some college credit, but less than 1 year
		1 or more years of college, no degree
	🗍 Some other race — Print race. 🍞	Associate degree (for example: AA, AS)
		Bachelor's degree (for example: BA, AB, BS)
		Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
		Professional degree (for example: MD, DDS, DVM, LLB, JD)
Ý	What is this person's marital status?	Doctorate degree (for example: PhD, EdD)
	U Now married	
	Widowed	10 What is this person's ancestry or ethnic origin?
	Divorced	
	Separated	
	Never married	
		(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

11		5 b. Where did this person live 5 years ago?
Ī	English at home?	Name of city, town, or post office
	Yes	
	\bigcup No \rightarrow Skip to 12	
	b. What is this language?	Did this person live inside the limits of the city or town?
		Yes
	(For example: Korean, Italian, Spanish, Vietnamese)	No, outside the city/town limits
	c. How well does this person speak English?	Name of municipio or U.S. county
	Very well	
		Enter Puerto Rico or name of U.S. state
	Not well Not at all	
		ZIP Code
Y	Where was this person born?	
	In the onited states — Print name of state.	
	Outside the United States — Print Puerto Rico or name	Does this person have any of the following long-lasting conditions:
	of foreign country, U.S. Virgin Islands, Guam, etc.	Yes No
		a. Blindness, deafness, or a severe vision or hearing impairment?
1		b. A condition that substantially limits one or more basic physical activities
	\Box Yes, born in Puerto Rico \rightarrow <i>Skip to 15a</i>	such as walking, climbing stairs,
	Yes, born in a U.S. state, District of Columbia, Guam, the U.S. Virgin Islands, or Northern Mariana Islands	reaching, lifting, or carrying?
	Yes, born abroad of American parent or parents	7 Because of a physical, mental, or emotional
	Yes, a U.S. citizen by naturalization	condition lasting 6 months or more, does this person have any difficulty in doing any of
	No, not a citizen of the United States	the following activities:
14	When did this person come to live in Puerto Rico? Print numbers in boxes.	a. Learning, remembering, or
	Year	concentrating?
		b. Dressing, bathing, or getting around inside the home?
1	a. Did this person live in this house or apartment	c. (Answer if this person is 16 YEARS OLD
	5 years ago (on April 1, 1995)?	OR OVER.) Going outside the home alone to shop or visit a doctor's office?
	Person is under 5 years old \rightarrow <i>Skip to 33</i>	d. (Answer if this person is 16 YEARS OLD
	$\bigcup \text{ Yes, this house} \rightarrow Skip \text{ to } 16$	OR OVER.) Working at a job or business?
	No, outside Puerto Rico or the United States — Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then skip to 16.	8 Was this person under 15 years of age on April 1, 2000?
		$\Box \text{ Yes} \rightarrow Skip \text{ to } 33$
	No. different house in Buarte Pice or the United States	
	○ No, different house in Puerto Rico or the United States	

1

9	b. Is this grandparent currently responsible for	LAST WEEK, did this person do ANY work for either pay or profit? Mark 🗶 the "Yes" box even if the person worked only 1 hour, or helped without pay in a family business or farm for 15 hours or more, or was on active duty in the Armed Forces.
	<pre>most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment? Yes No → Skip to 20a C. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time. Less than 6 months 6 to 11 months 1 or 2 years 3 or 4 years 5 years or more a. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War. Yes, now on active duty Yes, on active duty in past, but not now No, training for Reserves or National Guard only → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No, never served in the military → Skip to 21 No may 1975 to August 1980 Vietnam era (August 1964—April 1975) February 1955 to July 1964 Korean conflict (June 1950—January 1955) World War II (September 1940—July 1947) Some other time </pre>	No → Skip to 25a At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week. a. Development or condominium name; Number and street name (If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.) b. Name of city, town, or post office . Is the work location inside the limits of that city or town? Yes No, outside the city/town limits d. Name of municipio or U.S. county f. ZIP Code a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the trip, mark the box of the one used for most of the distance. Car, truck, or van Bus or trolley bus Público Subway or elevated Railroad
	 c. In total, how many years of active-duty military service has this person had? Less than 2 years 2 years or more 	Ferryboat Taxicab Motorcycle Bicycle Walked Worked at home \rightarrow <i>Skip to 27</i> Other method



29	 Was this person — Mark ONE box. Employee of a PRIVATE-FOR-PROFIT company or business or of an individual, for wages, salary, or commissions Employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization Local GOVERNMENT employee (<i>city, county, municipio, etc.</i>) State GOVERNMENT employee Federal GOVERNMENT employee SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm SELF-EMPLOYED in own INCORPORATED business, 	 c. Interest, dividends, net rental income, royalty income, or income from estates and trusts — Report even small amounts credited to an account. Yes Annual amount — Dollars No d. Social Security or Railroad Retirement Yes Annual amount — Dollars S No
	professional practice, or farm Working WITHOUT PAY in family business or farm 	a Supplemental Society Income (SSI)
	с. , , , , , , , , , , , , , , , , , , ,	e. Supplemental Security Income (SSI) Yes Annual amount — Dollars
30	a. LAST YEAR, 1999, did this person work at a job or business at any time?	
	□ Yes	\$
	$\square \text{ No} \rightarrow Skip \text{ to } 31$	
	b. How many weeks did this person work in 1999? Count paid vacation, paid sick leave, and military service.	f. Any public assistance or welfare payments from the state or local welfare office
	Weeks	Yes Annual amount — <i>Dollars</i>
		\$
	c. During the weeks WORKED in 1999, how many	□ No
	hours did this person usually work each WEEK? Usual hours worked each WEEK	g. Retirement, survivor, or disability pensions — <i>Do NOT include Social Security.</i>
		Yes Annual amount — <i>Dollars</i>
31	INCOME IN 1999 — Mark 🗶 the "Yes" box for each income source received during 1999 and enter the total amount received during 1999 to a maximum of \$999,999. Mark 🗶 the "No" box if the income source was not received. If net income was a loss, enter the amount and mark 🔊 the "Loss" box next to the dollar amount.	 No h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment
	For income received jointly, report, if possible, the appropriate share for each person; otherwise, report the whole amount for only one person and mark 🗵 the "No" box for the other person. If exact amount is	compensation, child support, or alimony — Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
		Yes Annual amount — <i>Dollars</i>
	not known, please give best estimate.	\$, .00
	a. Wages, salary, commissions, bonuses, or tips from all jobs — Report amount before deductions for	□ No
	taxes, bonds, dues, or other items.	What was this person's total income in 1999? Add entries in questions 31a—31h; subtract any losses. If net
	Yes Annual amount — <i>Dollars</i>	income was a loss, enter the amount and mark 🗶 the
	\$, .00	"Loss" box next to the dollar amount. Annual amount — Dollars
	U No	
	b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships — <i>Report NET</i> income after business expenses.	 None OR Are there more people living here? If yes, continue with Person 6.
	Yes Annual amount — <i>Dollars</i>	
	\$, .00 D Loss	

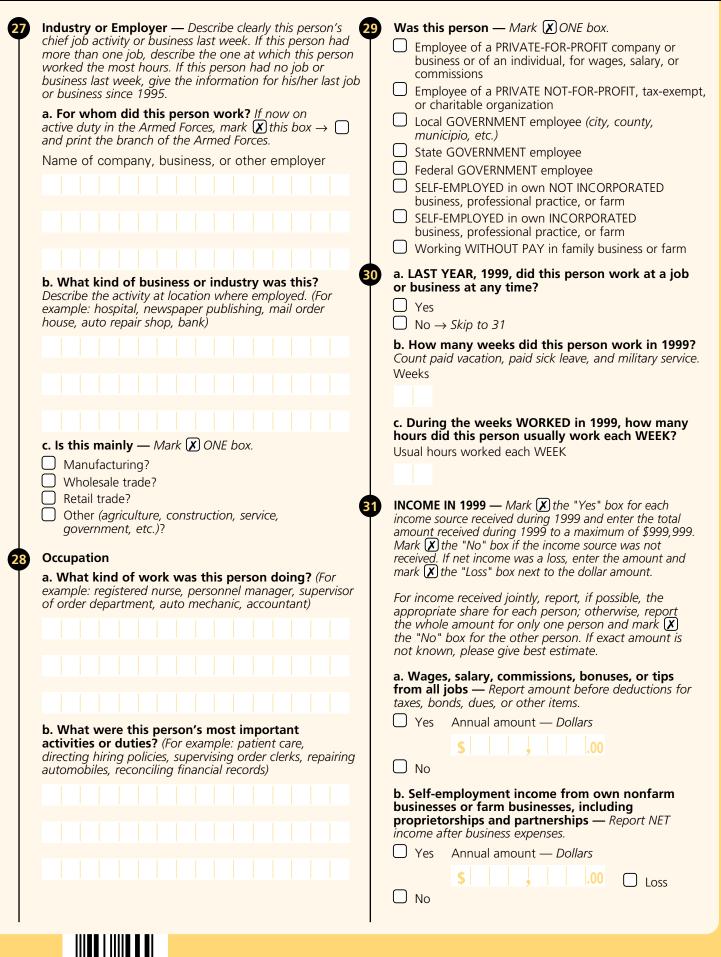
Housing information helps your community plan for police and fire protection.	 Is this person Spanish/Hispanic/Latino? Mark ("No" box if not Spanish/Hispanic/Latino. No, not Spanish/Hispanic/Latino Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban Yes, other Spanish/Hispanic/Latino — Print grout
What is this person's name? Print the name of Person 6 from page 2. Last Name First Name MI	6 What is this person's race? Mark (X) one or more races to indicate what this person considers himself/herself to be.
How is this person related to Person 1? Mark 🖉 ONE box. Husband/wife Natural-born son/daughter Adopted son/daughter Stepson/stepdaughter Brother/sister Father/mother Grandchild Parent-in-law Son-in-law/daughter-in-law Other relative — Print exact relationship. r If NOT RELATED to Person 1: Roomer, boarder Housemate, roommate Unmarried partner Foster child	White Black, African Am., or Negro American Indian or Alaska Native — Print name enrolled or principal tribe. <i>y</i> Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian — Print race. <i>y</i> Some other race — Print race. <i>y</i>
 Other nonrelative What is this person's sex? Mark ONE box. Male Female What is this person's age and what is this person's date of birth? Age on April 1, 2000. Print numbers in boxes. Month Day Year of birth Month Day Lear of birth 	 What is this person's marital status? Now married Widowed Divorced Separated Never married

8 a. At any time since February 1, 2000, has this person attended regular school or college? Include only nursery school or preschool, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.	 a. Does this person speak a language other than English at home? Yes No → Skip to 12
\bigcirc No, has not attended since February 1 \rightarrow <i>Skip to</i> 9	b. What is this language?
Yes, public school, public college	
Yes, private school, private college	
b. What grade or level was this person attending?	(For example: Korean, Italian, Spanish, Vietnamese)
Mark 🗶 ÖNE box.	c. How well does this person speak English?
Nursery school, preschool	Very well
🗌 🗍 Kindergarten	U Well
Grade 1 to grade 4	💭 Not well
Grade 5 to grade 8	🗋 Not at all
Grade 9 to grade 12	12 Where was this person born?
College undergraduate years (freshman to senior)	In the United States — Print name of state.
Graduate or professional school (for example:	In the United States — Print hame of state.
medical, dental, or law school)	
9 What is the highest degree or level of school	Outside the United States — Print Puerto Rico or name
this person has COMPLETED? Mark X ONE box.	of foreign country, U.S. Virgin Islands, Guam, etc.
If currently enrolled, mark the previous grade or highest degree received.	
No schooling completed	13 Is this person a CITIZEN of the United States?
Nursery school to 4th grade	Yes, born in Puerto Rico \rightarrow <i>Skip to 15a</i>
5th grade or 6th grade	$\bigcirc \text{ Yes, born in a U.S. state, District of Columbia, Guam,}$
7th grade or 8th grade	the U.S. Virgin Islands, or Northern Mariana Islands
9th grade	Yes, born abroad of American parent or parents
10th grade	Yes, a U.S. citizen by naturalization
11th grade	No, not a citizen of the United States
12th grade, NO DIPLOMA	
 HIGH SCHOOL GRADUATE — high school DIPLOMA or the equivalent (for example: GED) 	When did this person come to live in Puerto Rico? <i>Print numbers in boxes.</i>
	Year
Some college credit, but less than 1 year	
1 or more years of college, no degree	
Associate degree (for example: AA, AS)	15 a. Did this person live in this house or apartment
Bachelor's degree (for example: BA, AB, BS)	5 years ago (on April 1, 1995)?
Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)	\Box Person is under 5 years old \rightarrow <i>Skip to 33</i>
Professional degree (for example: MD, DDS, DVM,	\Box Yes, this house \rightarrow <i>Skip to 16</i>
LLB, JD) Doctorate degree (for example: PhD, EdD)	No, outside Puerto Rico or the United States — Print name of foreign country, or U.S. Virgin Islands,
	Guam, etc., below; then skip to 16.
What is this person's ancestry or ethnic origin?	
	No, different house in Puerto Rico or the United States
(For example: Italian, Jamaican, African Am., Cambodian, Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)	

	b. Where did this person live 5 years ago? Name of city, town, or post office		19	a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?	
					Yes
	Did this person live inside the limits of the city				\square No \rightarrow Skip to 20a
	 or town? Yes No, outside the city/town limits Name of municipio or U.S. county 				b. Is this grandparent currently responsible for most of the basic needs of any grandchild(ren) under the age of 18 who live(s) in this house or apartment?
					Yes
					\bigcirc No \rightarrow Skip to 20a
	Enter Puerto Rico or name of U.S. state				c. How long has this grandparent been responsible for the(se) grandchild(ren)? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.
	ZIP Code				
					Less than 6 months
					6 to 11 months
16	Does this person have any of the follow	ving			1 or 2 years
	long-lasting conditions:	Yes	No		3 or 4 years
	a. Blindness, deafness, or a severe	_			5 years or more
	vision or hearing impairment? b. A condition that substantially limits	\bigcirc		20	a. Has this person ever served on active duty in the U.S. Armed Forces, military Reserves, or
	one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying?				National Guard? Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.
17					Yes, now on active duty
	Because of a physical, mental, or emotional condition lasting 6 months or more, does this person have any difficulty in doing any of				 Yes, on active duty in past, but not now No, training for Reserves or National Guard only → Skip to 21
	the following activities:	Yes	No		\square No, never served in the military \rightarrow <i>Skip to 21</i>
	a. Learning, remembering, or concentrating?				b. When did this person serve on active duty in the U.S. Armed Forces? <i>Mark</i> X a box for
	b. Dressing, bathing, or getting around inside the home?				EACH period in which this person served. April 1995 or later
	c. (Answer if this person is 16 YEARS OLD OR OVER.) Going outside the home alone to shop or visit a doctor's office?		\square		 August 1990 to March 1995 (including Persian Gulf War) September 1980 to July 1990
	d. (Answer if this person is 16 YEARS OLD	\bigcirc	\bigcirc		May 1975 to August 1980
	OR OVER.) Working at a job or business?				Vietnam era (August 1964—April 1975)
					February 1955 to July 1964
12	Was this person under 15 years of age	on			Korean conflict (June 1950—January 1955)
Ψ	April 1, 2000?	•			🔘 World War II (September 1940—July 1947)
	\Box Yes \rightarrow Skip to 33				Some other time
	No No				c. In total, how many years of active-duty military service has this person had?
					Less than 2 years
					2 years or more



21 LAST WEEK, did this person do ANY work for either pay or profit? <i>Mark</i> (<i>X</i>) the "Yes" box even if the	If "Car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.
active duty in the Armed Forces.	b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?
 Yes No → Skip to 25a At what location did this person work LAST WEEK? If this person worked at more than one location, 	 Drove alone 2 people 3 people
a. Development or condominium name; Number and street name	 4 people 5 or 6 people 7 or more people
	a. What time did this person usually leave home to go to work LAST WEEK?
(If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)	b. How many minutes did it usually take this person to get from home to work LAST WEEK?
b. Name of city, town, or post office	Minutes
c. Is the work location inside the limits of that	Answer questions 25–26 for persons who did not
city or town?	work for pay or profit last week. Others skip to 27.
No, outside the city/town limits	a. LAST WEEK, was this person on layoff from a job?
d. Name of municipio or U.S. county	$\bigcup Yes \rightarrow Skip \ to \ 25c$ $\bigcup No$
e. Enter Puerto Rico or name of U.S. state or foreign country	b. LAST WEEK, was this person TEMPORARILY absent from a job or business?
	 Yes, on vacation, temporary illness, labor dispute, etc. → Skip to 26 No → Skip to 25d
f. ZIP Code	c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the trip, mark (X) the box of the	$\Box Yes \rightarrow Skip \ to \ 25e$ $\Box No$
 one used for most of the distance. Car, truck, or van Bus or trolley bus 	d. Has this person been looking for work during the last 4 weeks?
Público	\square No \rightarrow Skip to 26
Subway or elevated Railroad	e. LAST WEEK, could this person have started a job if offered one, or returned to work if recalled?
Ferryboat Taxicab Motorcycle	 Yes, could have gone to work No, because of own temporary illness No, because of all other reasons <i>(in school, etc.)</i>
Bicycle 2 Walked	When did this person last work, even for a few days?
$\bigcup \text{ Worked at home} \rightarrow Skip \text{ to } 27$ $\bigcup \text{ Other method}$	□ 1995 to 2000 □ 1994 or earlier, or never worked \rightarrow <i>Skip to 31</i>



31	c. Interest, dividends, net rental income, royalty income, or income from estates and trusts — Report even small amounts credited to an account.
	Ses Annual amount — Dollars
	\$.00 Loss
	□ No
	d. Social Security or Railroad Retirement
	Yes Annual amount — Dollars
	\$.00
	No No
	e. Supplemental Security Income (SSI)
	Yes Annual amount — <i>Dollars</i>
	\$.00
	No No
	f. Any public assistance or welfare payments from the state or local welfare office
	Yes Annual amount — <i>Dollars</i>
	\$ 00
	□ No
	g. Retirement, survivor, or disability pensions — Do NOT include Social Security.
	Yes Annual amount — <i>Dollars</i>
	\$
	No No
	h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony — Do NOT include lump-sum payments such as money from an inheritance or sale of a home.
	Yes Annual amount — <i>Dollars</i>
	\$.00
32	
	Annual amount — <i>Dollars</i>
	None OR \$00 Los

Thank you for completing your official Census 2000 – Puerto Rico form. If there are more than six people at this address, the Census Bureau may contact you for the same information about these people.







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