

S. D. No. 16 E. D. No. 10-170-B
Enumerated by me on May 23, 1940.

[illegible]

Line No.	SUPPLEMENTARY QUESTIONS For Persons Enumerated on Lines 14 and 29	FOR PERSONS OF ALL AGES										FOR PERSONS 14 YEARS OLD AND OVER										FOR ALL WOMEN WHO ARE OR HAVE BEEN MARRIED	FOR OFFICE USE ONLY—DO NOT WRITE IN THESE COLUMNS																		Line No.																																																																																																																																													
		PLACE OF BIRTH OF FATHER AND MOTHER				MOTHER TONGUE (OR NATIVE LANGUAGE)	VETERANS	SOCIAL SECURITY	USUAL OCCUPATION, INDUSTRY, AND CLASS OF WORKER				Usual class of worker	CODE (Leave blank)	Ten (A)	Eleven (B)	Fm. res. and Soc. Sec. No. (C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)	Age (11)	Mar. st. (12)	Gr. cons. (13)	Ch. (14)		Wid. (15)	Hrs. wid. or Dur. un-emp. (16 or 17)	Occupation, industry, and class of worker (18)	Wages (19)	St. (20)	Ot. (21)																																																																																																																																																										
		FATHER	MOTHER	CODE (Leave blank)	In this person a veteran of the United States military forces; or the wife, widow, or under-18-year-old child of a veteran.				Does this person have a Federal Social Security Number?	When did he first enter service? (Year or Mo.)	Old-Age Insurance or Railroad Retirement benefits received by him during past year?	Usual occupation which the person regards as his usual occupation and at which he is physically able to work. If the person is unable to determine this, enter that occupation at which he has worked longest during the past 10 years and at which he is physically able to work. Enter also usual industry and usual class of worker.																																																																																																																																																																										
																													Language spoken at home in earliest childhood	CODE (Leave blank)	Usual occupation	Usual industry																																																																																																																																																						
NAME	If born in the United States, give State, Territory, or possession. If foreign born, give country in which birthplace was situated on January 1, 1907. Distinguish Canada-French from Canada-English and Irish Free State (Eire) from Northern Ireland.	Language spoken at home in earliest childhood	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)					CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)	CODE (Leave blank)

Col. 8. VALUE OF HOME, IF OWNED:		Col. 9. COLOR OR RACE:		Col. 10. AGE AT LAST BIRTHDAY:		Col. 11. HIGHEST GRADE OF SCHOOL COMPLETED:		Col. 12. CITIZENSHIP OF THE FOREIGN BORN		Col. 13. DID THIS PERSON HAVE A JOB?		Col. 14. AND, IF, CLASS OF WORKER:		Col. 15. WAR OR MILITARY SERVICE:					
What owner's household occupies only a part of a structure? Estimate value of portion occupied by owner's household. Thus the value of the unit completed by the owner of a two-family house might be approximately one-half the total value of the structure.		White _____ W Negro _____ Neg Indian _____ Hin Korean _____ Kor Chinese _____ Chi Japanese _____ Jp		Enter age of children born on or after April 1, 1930, as follows. Born in: April 1930 _____ 11/13 May 1930 _____ 10/13 June 1930 _____ 9/13 July 1930 _____ 8/13 August 1930 _____ 7/13 September 1930 _____ 6/13 (Do not include children born on or after April 1, 1940.)		None _____ Elementary school, 1st to 8th grade _____ 1, 2, etc., to 8 High school, 1st to 6th year _____ H-1, H-2, H-3, H-4 College, 1st to 4th year _____ C-1, C-2, C-3, C-4 College; 5th or subsequent year _____ C-5		None _____ Naturalized _____ Na Having first papers _____ Pa Alien _____ Al American citizen born abroad _____ Am Ch		Born _____ Naturalized _____ Na Having first papers _____ Pa Alien _____ Al American citizen born abroad _____ Am Ch		Enter "Yes" for persons at work for pay or profit in private or non Government Government work. Include unpaid family workers—that is, related members of the family working without money wages or salary on work (other than housework or seasonal work) which contributed to the family income.		Wages or salary worker in private work _____ PW Wages or salary worker in Government work _____ GW Employer _____ E Working on own account _____ OA Unpaid family worker _____ UF		Enter "Yes" for a person (not seeking work) who had a job, business, or profession insured by Government work during week of March 24-30 for any of the following reasons: Vacation; temporary illness; industrial dispute; layoff not exceeding 4 weeks with instructions to return to work at a specific date; layoff due to temporarily laid off weather conditions.		World War _____ W Spanish-American War _____ S Regular establishment (Army, Navy, or Marine Corps) _____ R Other war or military service _____ O	