

1. Atoll and Island (*Ward for Male*)

3. Name of house

2. Block Number

4. Serial number of housing unit

STRUCTURE INFORMATION

1. Type of dwelling unit

- 1. House (*Skip to Q.3*)
- 2. Flat/Apartment complex
- 3. Multi storeyed house

(III). Floor

- 1. Tiled
- 2. Wood
- 3. Concrete sheet
- 4. Cement floor
- 5. Sand
- 6. Other (Specify)

For use of calculation of Q 5

2. Number of levels in the building

3. Type of material used for construction of main part of the building

(I). Walls

- 1. Coral stone, plastered
- 2. Coral stone, unplastered
- 3. Cement blocks, plastered
- 4. Cement blocks, unplastered
- 5. Wood or plywood
- 6. Thatch
- 7. Concrete
- 8. Other (Specify)

(IV). Ceiling

- 1. With ceiling
- 2. Without ceiling

4. How old is the major part of the structure as it is now

5. How much is the built up area of the structure?

(in square feet)

SANITARY CONDITION

6. What type of sanitary system does the unit have:

- 1. Toilet connected to sea
- 2. Toilet connected to septic tank
- 3. Open area surrounded by walls (gifili) **(END)**
- 4. No toilet facilities **(END)**

7. How many toilets are there in the unit?

Name of the enumerators: (1) (2)

Signature:(1)(2)

Date:

HEALTH CONDITION

23. Do you get medicine when there is a necessity for it?

1. Yes 2. No

24. From where do you get medicine?

1. Male'
2. Regional Hospital
3. Atoll Health Centre
4. Community Health Worker
5. Family Health Worker
6. Pharmacies
7. Island shops
8. Health Post

25. Reason?

26. Did any of the household members die during the past 12 months?

1. Yes 2. No (skip to Q. 27)

Name of deceased	Female Male	Cause of death	Month of death	Age	
				In Years	In months <i>(for under 2 years only)</i>
1.	1 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	1 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	1 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	1 2	<input type="text"/>	<input type="text"/>	<input type="text"/>

DIVORCE

Applicable only to women

27. Does this household have any divorced women or widows?

1. Yes 2. No (skip to 29)

28. What is the suffering that the children had to undergo/sustain as a result of divorce or death of the father?

Suffering

1.	<input type="checkbox"/>
2.	<input type="checkbox"/>
3.	<input type="checkbox"/>
4.	<input type="checkbox"/>
5.	<input type="checkbox"/>

MIGRATION

29. Has any member of the household migrated elsewhere during the last 3 years?

1. Yes 2. No (skip to Q. 33)

Person Number						
30. Where did they migrate?	1	1	1	1	1	1
1. Male'	2	2	2	2	2	2
2. Another Atoll	3	3	3	3	3	3
3. Other island of the atoll	4	4	4	4	4	4
4. Abroad						
31. For what purpose?	1	1	1	1	1	1
1. Health reasons	2	2	2	2	2	2
2. For education	3	3	3	3	3	3
3. For employment	4	4	4	4	4	4
4. Other reasons						
32. How long has the person been out (in months)	<input type="text"/>					

CRISIS

33. Did the household face food crisis, shortage (of rice, flour, sugar) scarcity during the past 12 months?

1. Yes 2. No (skip to Q. 40)

34. How many times?

35. For how many days?

36. When

- | | | |
|-------------|-----------|--------------|
| 1. January | 5. May | 9. September |
| 2. February | 6. June | 10. October |
| 3. March | 7. July | 11. November |
| 4. April | 8. August | 12. December |

37. Reason for crisis

38. How long can your household survive on the food reserve you usually maintain?

months weeks days

39. How many meals are taken during the day?

- | | |
|---------------------------------|----------------------|
| 1. Adults | <input type="text"/> |
| 2. Children above 5 to 15 years | <input type="text"/> |
| 3. Children 1 to 5 years | <input type="text"/> |

HARDSHIP

Applicable only to female headed households

40. What other type of crisis did your household face during the last 3 years? None

	Type of crisis/ source of crisis	Frequency of crisis (number)	How much money did you spend to cope with it	Where did you get the money from (code @)	(For workers in the house- hold) Number of working days lost.
1.	Death of the breadwinner	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	Death of other HH member	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	Expenses due to diseases	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	Expenses due to injury/ accident	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	Being jobless	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	Damage caused by people such as fire (arson)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	Cutting trees/harassment (crop) damage done by others	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	Loss/damage of dhoani	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	Loss/damage of fishing equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	Divorce or separation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	Legal expenses	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12.	Marital Expenses	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13.	Other (specify)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

- @ code: 1. Saving
 2. Income
 3. Insurance
 4. State support
 5. Borrowing from relatives/friends
 6. Borrowing from banking and institutions
 7. Sale of assets
 8. Sale of goods
 9. Other (specify):

41. Type of household:

- De jure (No male over 18 years present at all)
- De facto (Male adult temporarily absent)
- Woman wants to be in-charge.

42. Why has the female taken the responsibility of heading the household?

- Death of husband
- Divorce
- Absence of adult males in the family
- Out migration of the husband of the current head of the household
- Out migration of the other male member of the household
- Invalid male member in the household
- Widow in-charge despite the presence of an adult male/sons
- Because the woman wants to be in charge

43. What hardship of problems does the female head under go to manage the household?

Problems	Rank
1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>
6. <input type="text"/>	<input type="text"/>

INVESTMENT

45. Household capital transaction during the past?

Type of investment	Amount	last year of transaction	Type of investment	Amount	last year of transaction
1. Borrowing	□□□□	□□□□	11. Lending	□□□□	□□□□
2. Repayment	□□□□	□□□□	12. Interest payment	□□□□	□□□□
3. Purchase machinery	□□□□	□□□□	13. Sale of machinery	□□□□	□□□□
4. Purchase transport equipment	□□□□	□□□□	14. Sale of transport equipment	□□□□	□□□□
5. Purchase/repair boats	□□□□	□□□□	15. Sale of boats	□□□□	□□□□
6. Construct/repair house	□□□□	□□□□	16. Other (specify) .	□□□□	□□□□
7. Construct/repair toilet	□□□□	□□□□			
8. Digging/repair of well	□□□□	□□□□			
9. Improve/reclaim land	□□□□	□□□□			
10. Other (specify)	□□□□	□□□□	Note: the two sides need not balance without saving		

PERCEPTION OF ECONOMIC STATUS AND WELL BEING

46. Household head's view of economic status of his/her household?

1. Over the last five years how did your household income changed?

1. Increased
2. Decreased
3. Remained same

2. Compare to other households in the community, how do you consider your household?

1. Well below average
2. Below average
3. Average
4. Well off
5. Very well off

3. On average how much do you spend on food per head, per month?

. in Rufiyaa

4. Does members of the household have any surplus income each month?

1. Yes
2. No

5. Do all earning members of the household pool income for food and other household expenses?

1. Yes
2. No

6. How would you spend surplus income of members of the household?

(prioritize according to spending pattern)

1. Better food
2. Repair/renovate/improve house
3. Medical treatment
4. Educate children
5. Buy TV/radio/VCR
6. Invest in income generating activity
7. Repay loan
8. Give on credit
9. Buy expensive gifts for members of family
10. Save
11. Spend on religious activities and charity
12. Other (specify) □

VOLUNTARY WORK OF HOUSEHOLD MEMBERS

47. What type of voluntary work did the household members engage during the past one year?

1. Construction and maintenance of jetty
2. Construction and maintenance of mosque
3. Construction and maintenance of school
4. Construction and maintenance of health post/clinic/hospital
5. Cleaning the island/reef
6. Cleaning the forest for housing plots/play ground etc.
7. Construction of other facilities required for development of the island
8. Working in community business, schools, clinic, etc. as volunteers
9. Others (specify) □
10. None (Skip to Q50)

48. How many members of this household were voluntarily engaged in community activities?

Females Males

49. How many days and hours did each member work on average per month

Member name	Person number	Sex		Days of work	Average hours of work
		1. Female	2. Male		
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
	<input type="text"/> <input type="text"/>	1	2	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

50. Some of the problems faced by the islanders are listed below , in different groups. We would like you to tell us which are the important ones in their life. Please give the most pressing problems first, and then the next most important , and so on , until all thirteen areas have been covered.

S1	Problems	Ranking by Woman	Ranking by Man
1.	The quality of housing	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
2.	Availability of transport service	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
3.	Availability of electricity	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
4.	Communication facilities / TV	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
5.	Employment opportunities	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
6.	Possibilities to earn a good income	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
7.	Food security all year around	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
8.	Environmental security / land availability	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
9.	Availability of drinking water	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
10.	Access to consumer goods	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
11.	Access to health services / improvements	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
12.	Access to education for children	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
13.	Community participation	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
14.	TV / Entertainment facilities	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
15.	Availability of recreational facilities	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

IDENTIFICATION	Number of forms filled for the household <input type="text"/> of <input type="text"/>
1. Atoll and Island (<i>Ward for Male'</i>) <input type="text"/>	4. Serial number of household <input type="text"/>
2. Block Number(For Male' only) <input type="text"/>	5. Person No. <input type="text"/>
3. Name of the house	

EMPLOYMENT	FOR PERSONS 12 YEARS AND OVER
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* What are the economic activities you were engaged in during the past month?
(List the activities giving priority to the amount of time spent)

1. 2.

<p>1. Primary occupation</p> <p>1. What was your employment status of the primary occupation ?</p> <p>1. Employer (<i>with employees</i>)</p> <p>2. Employee</p> <p>3. Own account worker</p> <p>4. Unpaid family worker] <i>Skip to Q. 3</i></p> <p>2. Name of the place of work?</p> <p>3. What kind of activity were you engaged in the establishment? (<i>Industry</i>) <input type="text"/></p> <p>4. Describe the specific type of job or designation of this job? (<i>Occupation</i>) <input type="text"/></p> <p>5. What type of establishment was that</p> <p>1. Government office</p> <p>2. Public enterprise</p> <p>3. Private enterprise</p> <p>4. National Security Services (NSS)</p> <p>5. Private house/own home</p> <p>6. No permanent location</p> <p>6. No of hours worked per week? <input type="text"/></p>	<p>2. Secondary occupation</p> <p>1. What was your employment status of the primary occupation ?</p> <p>1. Employer (<i>with employees</i>)</p> <p>2. Employee</p> <p>3. Own account worker</p> <p>4. Unpaid family worker] <i>Skip to Q. 3</i></p> <p>2. Name of the place of work?</p> <p>3. What kind of activity were you engaged in the establishment? (<i>Industry</i>) <input type="text"/></p> <p>4. Describe the specific type of job or designation of this job? (<i>Occupation</i>) <input type="text"/></p> <p>5. What type of establishment was that</p> <p>1. Government office</p> <p>2. Public enterprise</p> <p>3. Private enterprise</p> <p>4. National Security Services (NSS)</p> <p>5. Private house/own home</p> <p>6. No permanent location</p> <p>6. No of hours worked per week? <input type="text"/></p>
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7. How many months of the year do you work?

1. January	7. July
2. February	8. August
3. March	9. September
4. April	10. October
5. May	11. November
6. June	12. December

8. If additional work is available would you work more hours per week?

1. Yes

2. No (skip to Q11)

9. Are you looking for more work?

1. Yes

2. No

FOR EMPLOYERS AND OWN ACCOUNT WORKERS ONLY

FOR OTHERS PLEASE GO TO Q15

10. Commodities produced			
Item	Quantity	Sales value	Code
1.....	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.....	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.....	<input type="text"/>	<input type="text"/>	<input type="text"/>

10. Commodities produced			
Item	Quantity	Sales value	Code
1.....	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.....	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.....	<input type="text"/>	<input type="text"/>	<input type="text"/>

17. How many months of the year do you work?
- 1. January
 - 2. February
 - 3. March
 - 4. April
 - 5. May
 - 6. June
 - 7. July
 - 8. August
 - 9. September
 - 10. October
 - 11. November
 - 12. December

11. Production cost per month

1 Input materials	<input type="text"/>	Rf
2 Repairs/maintenance	<input type="text"/>	Rf
3 Hired labour	<input type="text"/>	Rf
4 Total	<input type="text"/>	Rf

12. Is the production sold in retail or wholesale?

- 1. Retail
- 2. Wholesale

13. How much do you pay for transportation per month?

Rf

14. How much do you pay to dealer per month?

Rf

15. Where do you sell the products to

- 1. To Male
- 2. To Resort Islands
- 3. To residents of the islands
- 4. To other Atoll/Islands

16. Do you have marketing problems?

- 1. Yes
- 2. No

(If yes, give detail:)

.....

.....

11. Production cost per month

1 Input materials	<input type="text"/>	Rf
2 Repairs/maintenance	<input type="text"/>	Rf
3 Hired labour	<input type="text"/>	Rf
4 Total	<input type="text"/>	Rf

12. Is the production sold in retail or wholesale?

- 1. Retail
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13. How much do you pay for transportation per month?

Rf

14. How much do you pay to dealer per month?

Rf

15. Where do you sell the products to

- 1. To Male
- 2. To Resort Islands
- 3. To residents of the islands
- 4. To other Atoll/Islands

16. Do you have marketing problems?

- 1. Yes
- 2. No

(If yes, give detail:)

.....

.....

18. How much did you receive from paid employment during the past month? (..... Rufiyaa)			
<ul style="list-style-type: none"> Income earned during the past month from the primary and other occupations? 	Primary occupation	Other occupation	Total
19.1 Wages and salaries including medical allowances	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	<input type="text"/> Rf
19.2 Overtime, bonus, commission, living allowances	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
19.3 Uniform, laundry allowance and the like	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
19.4 Travel (<i>on official purposes</i>)	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
19.5 Services in kind (<i>medical care, accommodation</i>)	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
19.6 Goods in kind (<i>clothing, food, other goods</i>)	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
Total	<input type="text"/> Rufiyaa	<input type="text"/> Rufiyaa	
<ul style="list-style-type: none"> Specify the goods and services received in kind from primary occupation: Specify the goods and services received in kind from secondary occupation: 			
19. Out of the income he/she received last month, how much did you contributed for household use? <input type="text"/> Rf	21. How much income did you receive as profits from own - account of family business during the past month? <input type="text"/> Rf		<input type="text"/> Rf
20. During the past month did you spend any money for your personal use? If yes how much? <input type="text"/> Rf (A)	22. How much did you receive as property income during the past month? 1. Dividends <input type="text"/> Rf 2. Renting of goods <input type="text"/> Rf 3. Rent of building <input type="text"/> Rf 4. Rent of land <input type="text"/> Rf • Specify types of goods and places rented		<input type="text"/> Rf
REMARKS	23. How much did you receive as current transfers and other benefits during the past month? 1. Assistance from government <input type="text"/> Rf 2. Pension <input type="text"/> Rf 3. Assistance from family or friends in Maldives, outside the household <input type="text"/> Rf 4. Assistance from family or friends abroad <input type="text"/> Rf 5. Other sources <input type="text"/> Rf		<input type="text"/> Rf
	Total Income		

1. Atoll and Island (<i>Ward for Male</i>) <input style="width:40px; height:15px;" type="text"/>	2. Block No. <input style="width:30px; height:15px;" type="text"/>
3. Household No. <input style="width:30px; height:15px;" type="text"/>	4. Form serial No. <input style="width:30px; height:15px;" type="text"/>

FOOD AND BEVERAGES - Part 1a

Date	CPC code	Product										Quantity	Value in		Manufactured	
			Kilo	Gram	Litre / Laahi	Mili Litre	Pieces	Paid & consumed	Own product & consumed	Salaries in kind	Received as gifts		Rufiyaa	Laari	1. Locally	2. Imported
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2
<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>		1	2	3	4	5	1	2	3	4	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	<input style="width:40px; height:15px;" type="text"/>	1	2

EXPENSES ON HOUSING, WATER, FUEL AND POWER - Part 3

Date	CPC code	Product excluding house rent	Value in		Manufactured	
			Rufiyaa	Laari	1. Locally	2. Imported
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
	_____		_____	____	1	2
Weekly Total			_____	____		

EXPENSES ON FURNITURE, FURNISHINGS, HOUSEHOLD EQUIPMENT & OPERATIONS - Part 4

Date	CPC code	Product	New		Purchased	Own product & consumed		Salaries in kind	Received as gifts	Value in		Manufactured	
			1	2		1	2			3	4	Rufiyaa	Laari
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
	_____		1	2	1	2	3	4	_____	____	1	2	
Weekly Total										_____	____		

MEDICAL CARE AND HEALTH EXPENSES - Part 5

Date	CPC code	Product	Purchased	Own product & consumed		Salaries in kind	Received as gifts	Value in		Manufactured	
				1	2			3	4	Rufiyaa	Laari
	_____		1	2	3	4	_____	____	1	2	
	_____		1	2	3	4	_____	____	1	2	
	_____		1	2	3	4	_____	____	1	2	
	_____		1	2	3	4	_____	____	1	2	
	_____		1	2	3	4	_____	____	1	2	
	_____		1	2	3	4	_____	____	1	2	
Weekly Total								_____	____		
Page total								_____	____		

TRANSPORT AND COMMUNICATION - Part 6

Date	CPC code	Product	New		Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported	
			1	2					Rufiyaa	Laari		
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
	_____		1	2	1	2	3	4	_____	_____	1	2
Weekly Total									_____	_____		

EDUCATION - Part 7

Date	CPC code	Product	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported	
							1	2		Rufiyaa
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
Weekly Total							_____	_____		

RECREATION, ENTERTAINMENT, RELIGIOUS AND CULTURAL SERVICES - Part 8

Date	CPC code	Product	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported	
							1	2		Rufiyaa
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
	_____		1	2	3	4	_____	_____	1	2
Weekly Total							_____	_____		
Page total							_____	_____		

1. Atoll and Island (<i>Ward for Male</i>)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	2. Block No. <input type="text"/> <input type="text"/> <input type="text"/>
3. Household No. <input type="text"/> <input type="text"/>	4. Person No. <input type="text"/> <input type="text"/>	5. Form serial No. <input type="text"/> <input type="text"/>

FOOD AND BEVERAGES - Part 1a

Date	CPC code	Product	Units					Consumption				Quantity	Value in		Manufactured	
			Kilo	Gram	Litre / Laahi	Mili Litre	Pieces	Paid & consumed	Own product & consumed	Salaries in kind	Received as gifts		Rufiyaa	Laari	1. Locally	2. Imported
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
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<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
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<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
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<input type="text"/>	<input type="text"/>		1	2	3	4	5	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	1	2
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EXPENSES ON HOUSING, WATER, FUEL AND POWER - Part 3

Date	CPC code	Product excluding house rent	Value in		Manufactured	
			Rufiyaa	Laari	1. Locally	2. Imported
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
	_____		_____	__	1	2
Weekly Total			_____	__		

EXPENSES ON FURNITURE, FURNISHINGS, HOUSEHOLD EQUIPMENT & OPERATIONS - Part 4

Date	CPC code	Product	New		Purchased				Value in		Manufactured	
			1	2	Own product & consumed	Salaries in kind	Received as gifts	Rufiyaa	Laari	1. Locally	2. Imported	
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
Weekly Total									_____	__		

MEDICAL CARE AND HEALTH EXPENSES - Part 5

Date	CPC code	Product	Purchased				Value in		Manufactured	
			Own product & consumed	Salaries in kind	Received as gifts	Rufiyaa	Laari	1. Locally	2. Imported	
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
Weekly Total							_____	__		
Page total							_____	__		

TRANSPORT AND COMMUNICATION - Part 6

Date	CPC code	Product	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported
							Rufiyaa	Laari	
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
Weekly Total							_____	_____	

EDUCATION - Part 7

Date	CPC code	Product	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported
							Rufiyaa	Laari	
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
Weekly Total							_____	_____	

RECREATION, ENTERTAINMENT, RELIGIOUS AND CULTURAL SERVICES - Part 8

Date	CPC code	Product	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Value in		Manufactured 1. Locally 2. Imported
							Rufiyaa	Laari	
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
	_____		1	2	3	4	_____	_____	1 2
Weekly Total							_____	_____	
Page total							_____	_____	

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3. Household No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	4. Form serial No.	<input type="text"/> <input type="text"/> <input type="text"/>

1.1 PURCHASED FOOD DURING THE PAST 3 MONTHS

Date	CPC code	Item	Purchased				Quantity purchased (1)	Unit of Quantity (2)	Price paid (3)	Number of days supply (4)	Quantity used per day (5)=(1/4)	Value per day (6)=(3/4)
			Island	Atoll Centre	Male	Other						
	[01140]	Rice	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	[23110]	Flour	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	[01820]	Sugar	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	[22910]	Milk powder	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
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	<input type="text"/>		1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>		1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>		1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>		1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>		1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Daily total											<input type="text"/>	
*30 = Monthly total (A)											<input type="text"/>	

1.2 OWN PRODUCED / PURCHASED FOOD (Purchased or Produced during the last week)

Date	CPC code	Item	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Quantity purchased past week	Purchased				Unit of Quantity	Price in the market	Value
								Island	Atoll Centre	Male	Other			
	[01310]	Coconut-drinking	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[21670]	Coconut-cooking	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01240]	Taro	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01240]	Cassava	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01310]	Bread fruit	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01310]	Screw pine	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01310]	Banana	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01310]	Papaya	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	[01310]	Mango	1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>		1	2	3	4	<input type="text"/>	1	2	3	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
weekly total														<input type="text"/>
weekly total *52/12 = monthly total (B)														<input type="text"/>
Page total (A+B)														<input type="text"/>

FISH

Date	CPC code	Item	Purchased				Quantity purchased past week	Value
			Own product & consumed	Salaries in kind	Received as gifts			
	[04110]	Skipjack	1	2	3	4	[] [] [] []	[] [] [] []
	[0]	Yellowfin tuna	1	2	3	4	[] [] [] []	[] [] [] []
	[0]	Dogtooth tuna	1	2	3	4	[] [] [] []	[] [] [] []
	[0]	Little tuna	1	2	3	4	[] [] [] []	[] [] [] []
	[0]	Frigate tuna	1	2	3	4	[] [] [] []	[] [] [] []
	[04110]	Other marine fish	1	2	3	4	[] [] [] []	[] [] [] []
	[04110]	Other seafood	1	2	3	4	[] [] [] []	[] [] [] []
weekly total							[] [] [] []	[] [] [] []
weekly total *52/12 = monthly total							[] [] [] []	[] [] [] []

PURCHASED FOOD AND OTHER ITEMS OF REGULAR USE

Date	CPC code	Item	Purchased				Quantity purchased past week	Unit of Quantity	Price in the market	Purchased				Value
			Island	Atoll Centre	Male	Other				Own product & consumed	Salaries in kind	Received as gifts		
	[21630]	Cooking oil	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[22910]	Curry	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[33340]	Kerosine oil	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[38998]	Matches	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[35321]	Soap	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[35310]	Washing powder	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[] [] [] []		1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
weekly total											[] [] [] []	[] [] [] []		
weekly total *52/12 = monthly total											[] [] [] []	[] [] [] []		

SMOKING AND CHEWING

Date	CPC code	Item	Purchased				Quantity purchased past week	Unit of Quantity	Price in the market	Purchased				Value
			Island	Atoll Centre	Male	Other				Own product & consumed	Salaries in kind	Received as gifts		
	[04110]	Cigarettes	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[04110]	Tobacco	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[04110]	Aracanut	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[04110]	Betel leaves	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
	[04110]	Other chewing materials	1	2	3	4	[] [] [] []	[] [] [] []	1	2	3	4	[] [] [] []	
weekly total											[] [] [] []	[] [] [] []		
weekly total *52/12 = monthly total											[] [] [] []	[] [] [] []		
Page total											[] [] [] []	[] [] [] []		

TRANSPORT AND COMMUNICATION

Date	CPC code	Product	New		Second hand				Value in		Manufactured 1. Locally 2. Imported	
			1	2	Purchased	Own product & consumed	Salaries in kind	Received as gifts	Rufiyaa	Laari		
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
	_____		1	2	1	2	3	4	_____	__	1	2
monthly total									_____	__		

EDUCATION

Date	CPC code	Product	Paid & consumed				Value in		Manufactured 1. Locally 2. Imported	
			Own product & consumed	Salaries in kind	Received as gifts	Rufiyaa	Laari			
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
monthly total							_____	__		

RECREATION, ENTERTAINMENT, RELIGIOUS AND CULTURAL SERVICES

Date	CPC code	Product	Paid & consumed				Value in		Manufactured 1. Locally 2. Imported	
			Own product & consumed	Salaries in kind	Received as gifts	Rufiyaa	Laari			
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
	_____		1	2	3	4	_____	__	1	2
monthly total							_____	__		
Page total							_____	__		

1. Atoll and Island (*Ward for Male*)

2. Name of house

3. Serial number of house

SUMMARY OF INCOME AND EXPENDITURE

Individual income and expenditure

Person Number	Personal expenditure (A)	Income (B)	Personal Expenditure Diary (C)	Multiplier (see note below)	Week 1	Week 2	Week 3	Week 4
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INTERISLAND /ATOLL TRANSPORTATION

21. Do the travellers of the other islands stop over in the night ?

1. yes 2. No

22. What is the frequency of travel to atoll capital from this island?

1. Daily
2. Times a week
3. Infrequent
4. Irregular

23. How frequently does a dhoni of this island travel to Male' ?

1. Daily
2. Times a week
3. Infrequent
4. Irregular

24. How much does it cost to travel to various major destinations (*regular service*)

1. Cost per trip to atoll capital
2. Cost per trip to the nearest health centre
3. Cost per trip to nearest regional hospital
4. Cost per trip to nearest atoll capital or island
5. Cost per trip to Male'

25. How much time does it take to travel to various major destinations by dhoni (in hours)

1. Time required to travel to atoll capital
2. Time required to travel to the nearest health centre
3. Time required to travel to the nearest regional hospital
4. Time required to travel to nearest atoll capital or island
5. Time required to travel to Male'

POSTAL AND COMMUNICATION NETWORK

26. What are the means of communication available in the island ?

1. Telephone/Fax
2. Radio telephone
3. Walkie Talkie (skip to Q 28)

27. (*If telephone is available*) How much does it cost (per minute) to call Male'?

 (*In Laari*)

28. (If no telephone is available in the island) What is the distance to the nearest telephone? (*travel time in hours*)

29. Is there a post office /agency post office in the island?

1. Yes
2. No (*go to 31*)

30. How much time does it take normally to send / receive a money order days

31. What kind of banking services available to the island?

1. Mobile banking service regular
2. Mobile banking service on request
3. Branch Office
4. None (*skip to Q 33*)

32. What is the frequency of mobile banking service? time / month

33. How is the quality of Radio reception?

1. Good
2. Not clear
3. Do not receive

34. How does the island receive Maldivian TV signals ?

1. Good
2. Not clear
3. Do not receive

35. Is Satellite TV available for public viewing (*In cafe',club,school,office etc...*)

1. Yes
2. No

36. Does this island produce / receive newspapers ?

1. Yes
2. No (*skip to 41*)

37. How often do you produce / receive Newspaper ?

- 1. Daily of same day
- 2. Daily Newspaper of previous day
- 3. Weekly delivery of previous week
- 4. Monthly delivery of previous week

38. How many newspapers are produced locally ?

- 1. None (*skip to Q.41*)
- 2.

39. Are the local newspapers widely circulated in the island ?

- 1. Yes
- 2. No

40. Are the local newspapers circulated to other islands ?

- 1. Yes
- 2. No

AVAILABILITY OF SPORTS AND RECREATION ACTIVITIES

41. How many public events were organised during last year?

- 1. None
- 2. Events

42. Is there enough space for recreational facilities

- 1. Yes
- 2. No

43. What are the facilities available?

- 1. Football ground
- 2. Badminton court
- 3. Volley court
- 4. Tennis court
- 5. Children's park
- 6. Bashi court
- 7. Other
- 8. None

AVAILABILITY OF FACILITIES IN THE EDUCATIONAL INSTITUTIONS

(Please answer questions marked with () by observation and the rest in consultation with heads of schools)*

*44. Are the class rooms enclosed?

- 1. Yes
- 2. No

*45. Is drinking water available in the school premises?

- 1. Yes
- 2. No

*46. Are toilet facilities available in the school premises?

- 1. Yes
- 2. No

47. Is library facilities available in the school?

- 1. Yes
- 2. No

48. What is the highest grade taught in schools?

Grade

49. How many students passed highest grade in last year?

- 1. Female students
- 2. Male students

50. In your opinion what are these young people doing at present?

- 1. Government service
- 2. Private job
- 3. Gone for higher education
- 4. Staying idle

ECONOMIC ACTIVITIES AVAILABLE IN THE ISLAND

51. Do you have land available for agricultural purposes?

- 1. Yes
- 2. No

52. Is the soil fertile enough for agriculture?

- 1. Yes
- 2. No

53. What are the traditional products that are available in the island? (*please tick in appropriate boxes*)

- 1. Breadfruit
- 2. Taro
- 3. Plantains
- 4. Cassava

54. Do the islanders keep a reserve stock of any of these products for emergency?

- 1. Yes
- 2. No

55. What is the major fishing related activity of the households?

- 1.
- 2.
- 3.
- 4.
- 5.

56. What are the fish products used?
 1. Own consumption
 2. For sale and own consumption

57. What are the main problems faced by fishery workers?

Problems	1. Seasonal	2. Regular
1. <input type="checkbox"/>	1	2
2. <input type="checkbox"/>	1	2
3. <input type="checkbox"/>	1	2
4. <input type="checkbox"/>	1	2
5. <input type="checkbox"/>	1	2
6. <input type="checkbox"/>	1	2
7. <input type="checkbox"/>	1	2

58. Seasonality of major economic activities on the island?

Activities	1. Jan	2. Feb	3. Mar	4. Apr	5. May	6. Jun	7. Jul	8. Aug	9. Sep	10. Oct	11. Nov	12. Dec
1. What is the good period for fishing	1	2	3	4	5	6	7	8	9	10	11	12
2. What is the bad period for fishing	1	2	3	4	5	6	7	8	9	10	11	12
3. What is the good period for agriculture	1	2	3	4	5	6	7	8	9	10	11	12
4. What is the bad period for agriculture	1	2	3	4	5	6	7	8	9	10	11	12
5. What is the good period for extra jobs	1	2	3	4	5	6	7	8	9	10	11	12
6. What is the bad period for extra jobs	1	2	3	4	5	6	7	8	9	10	11	12

PARTICIPATION IN VOLUNTARY ACTIVITIES

59. What are the income generating activities organized by the community?

1.

2.

3.

4.

60. What are the voluntary participatory activities under taken that has been long lasting?

Activities	Started in year	Successful 1. Yes 2. No	Approximate cost	
			Materials	Labour/day
1. Financing health personal	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
2. Construction of jetty	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
3. Construction of school	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
4. Financing school teachers	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
5. Construction of mosque	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
6. Community trade activities	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
7. Electrification project	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
8. Other infrastructure projects (road/storm wall/etc.)	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
9. Club buildings, play grounds	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>
10. Purchase and operation of vessels and vehicles	<input type="text"/>	1 2	<input type="text"/>	<input type="text"/>

ELECTRIFICATION IN THE ISLAND

61. What percentage of the household are electrified?

62. How much does it cost to get a connection for a household? Rf

63. When did the electricity generation commence? 1 9

MIGRATION

64. How many from those who are registered in this island are living in other atoll/island, Male' and foreign countries?

Place Living	Purpose			
	School children	Seamen	Resort/ industry	Other workers
Other atoll/island	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Male'	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other country	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PROBLEMS IN OUR DAILY LIFE

IDENTIFICATION

1. Atoll and Island (*Ward for Male*)

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2. Some of the problems faced by the islanders are listed below, in different groups. We would like to ask you to tell us which are the important ones in their life. Please give the most pressing problems first, and then the next most important, and so on, until all thirteen areas have been covered.

Sl.	Item	Ranking
1.	The quality of housing	□□
2.	Availability of transport services	□□
3.	Availability of electricity	□□
4.	Communication facilities / TV	□□
5.	Employment opportunities	□□
6.	Possibilities to earn a good income	□□
7.	Food security all year round	□□
8.	Environmental security / land availability	□□
9.	Availability of drinking water	□□
10.	Access to consumer goods	□□
11.	Access to health services / improvements	□□
12.	Access to education for the children	□□
13.	Community participation	□□
14.	TV/Entertainment facilities	□□
15.	Availability of recreational facilities	□□
16.	Crowdedness on the island	□□