

Form 6

To be filled by Facilitator's Assistant

1. Province	12. Sumatra Utara 33. Jawa Tengah 73. Sulawesi Selatan			
2. District	_____			
3. Subdistrict	_____			
4. Village	_____			
5. Hamlet/Neighborhood/RW/RT	1. Hamlet/Neighborhood/RW: _____			
	3. RT: A.RT: _____ B.:RW _____			
	C.Hamlet: _____			
6. Enumeration Area				
7. Nama/Kode Fasilitator	_____			
8. Nama Asisten Fasilitator	_____			
9. Tanggal Pengisian	/ / (Tanggal / Bulan/Tahun)			

10 HH WITH LOWEST LEVEL OF WELFARE FORM

No	Name of 10 HH Head with lowest welfare level (1)	HHID (2)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		