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I



P.O. 629
9th Street, Sinkor
Monrovia, Liberia

Income and Expenditure Questionnaire

(C W I Q)

A - INTERVIEW INFORMATION

Shade Circles Like This--> ●

Not Like This--> ⊗ ⊙

Q.1 INTERVIEWER'S NAME

Q.2 NAME OF HEAD OF HOUSEHOLD

Q.3 COUNTY NAME

Q.4 DISTRICT NAME

Q.5 CLAN/TOWNSHIP

Q.6 CITY/TOWN/VILLAGE

Q.7 CLUSTER (EA) NUMBER

Q.8 STRUCTURE NUMBER

A.1 CLUSTER

A.2 HOUSEHOLD

A.3 INTERVIEWER

A.4 DATE

A.5 TIME

A.6 RESPONDENT

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Day	Month	Year

Hour	Min.

☐ AM
☐ PM

Member No.

IMPORTANT

Create the reference number from the household number.

Write this number NOW in the reference number boxes printed in the upper right hand corner of all pages.

Comments

A.7 RESULT

- ☐ Complete
☐ Incomplete

A.8 INTERVIEW END

Hour	Min.

☐ AM
☐ PM

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J - DURABLE GOODS

	1	2	3	4	5	6
ITEM NAME	Does the household own any [.....]? Yes/No If no next item		How many of [.....] does the household own?	What is the age of the last in years?	How much did the household pay (in L\$) for the last one?	What price (in L\$) would you get if you resold the last today?
Table local	0 0 1	Yes <input type="radio"/> No <input type="radio"/>				
Table imported	0 0 2	Yes <input type="radio"/> No <input type="radio"/>				
Armchair/sofa	0 0 3	Yes <input type="radio"/> No <input type="radio"/>				
Chair local	0 0 4	Yes <input type="radio"/> No <input type="radio"/>				
Chair imported	0 0 5	Yes <input type="radio"/> No <input type="radio"/>				
Bed local	0 0 6	Yes <input type="radio"/> No <input type="radio"/>				
Bed imported	0 0 7	Yes <input type="radio"/> No <input type="radio"/>				
Cupboard, dresser	0 0 8	Yes <input type="radio"/> No <input type="radio"/>				
Carpet, fitted carpet	0 0 9	Yes <input type="radio"/> No <input type="radio"/>				
Refrigerator/freezer	0 1 0	Yes <input type="radio"/> No <input type="radio"/>				
Gas/electric cooker	0 1 1	Yes <input type="radio"/> No <input type="radio"/>				
Generator	0 1 2	Yes <input type="radio"/> No <input type="radio"/>				
Air conditioner	0 1 3	Yes <input type="radio"/> No <input type="radio"/>				
Water heater	0 1 4	Yes <input type="radio"/> No <input type="radio"/>				
Car	0 1 5	Yes <input type="radio"/> No <input type="radio"/>				
Motor cycle	0 1 6	Yes <input type="radio"/> No <input type="radio"/>				
Bicycle	0 1 7	Yes <input type="radio"/> No <input type="radio"/>				
Radio/car radio/cassette/CD player	0 1 8	Yes <input type="radio"/> No <input type="radio"/>				
Television/VCR/DVD	0 1 9	Yes <input type="radio"/> No <input type="radio"/>				
Satellite antenna	0 2 0	Yes <input type="radio"/> No <input type="radio"/>				
Camera	0 2 1	Yes <input type="radio"/> No <input type="radio"/>				
Video camera	0 2 2	Yes <input type="radio"/> No <input type="radio"/>				
Mobile telephone	0 2 3	Yes <input type="radio"/> No <input type="radio"/>				
Personal computer/printer	0 2 4	Yes <input type="radio"/> No <input type="radio"/>				

K - CONSUMPTION OF HOME PRODUCED FOOD AND GIFTS RECEIVED IN KIND

ITEM NAME	1	2	3	4			5
	Did the household consume any home produced [...] or receive [...] as gifts or food aid in the last 12 months? Yes/No If no next item		During how many months in the last 12 months did the household consume home produced [...] or receive [...] as gifts or food aid?	How much home produced [...] on average was consumed during each of these months?			What would you pay (in L\$ per unit) if you bought [...] in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units consumed from home production, gifts and food aid	Number of units consumed from food aid only	
Cereals							
Rice	1 0 1	Yes <input type="radio"/> No <input type="radio"/>					
Maize/corn	1 0 2	Yes <input type="radio"/> No <input type="radio"/>					
Other cereals	1 0 3	Yes <input type="radio"/> No <input type="radio"/>					
Maize/corn flour	1 0 4	Yes <input type="radio"/> No <input type="radio"/>					
Other flours	1 0 5	Yes <input type="radio"/> No <input type="radio"/>					
Bread	1 0 6	Yes <input type="radio"/> No <input type="radio"/>					
Pastry/fritters	1 0 7	Yes <input type="radio"/> No <input type="radio"/>					
Roots, tubers, bananas and plantain							
Cassava roots	1 0 8	Yes <input type="radio"/> No <input type="radio"/>					
Cassava flour (fufu, gari, etc.)	1 0 9	Yes <input type="radio"/> No <input type="radio"/>					
Cassava sticks	1 1 0	Yes <input type="radio"/> No <input type="radio"/>					
Other forms of cassava	1 1 1	Yes <input type="radio"/> No <input type="radio"/>					
Yams	1 1 2	Yes <input type="radio"/> No <input type="radio"/>					
Sweet potatoes	1 1 3	Yes <input type="radio"/> No <input type="radio"/>					
Bananas, plantain	1 1 4	Yes <input type="radio"/> No <input type="radio"/>					
Bitter balls	1 1 5	Yes <input type="radio"/> No <input type="radio"/>					
Eddoes	1 1 6	Yes <input type="radio"/> No <input type="radio"/>					
Other roots and tubers	1 1 7	Yes <input type="radio"/> No <input type="radio"/>					

K - CONSUMPTION OF HOME PRODUCED FOOD AND GIFTS RECEIVED IN KIND

ITEM NAME	1	2	3	4			5
	Did the household consume any home produced [...] or receive [...] as gifts or food aid in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume home produced [...] or receive [...] as gifts or food aid?	How much home produced [...] on average was consumed during each of these months?			What would you pay (in L\$ per unit) if you bought [...] in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units consumed from home production, gifts and food aid	Number of units consumed from food aid only	
Nuts and oils							
Groundnuts	1 1 8	Yes <input type="radio"/> Y No <input type="radio"/> N					
Palm nut	1 1 9	Yes <input type="radio"/> Y No <input type="radio"/> N					
Palm oil	1 2 0	Yes <input type="radio"/> Y No <input type="radio"/> N					
Groundnut oil	1 2 1	Yes <input type="radio"/> Y No <input type="radio"/> N					
Other vegetable oils	1 2 2	Yes <input type="radio"/> Y No <input type="radio"/> N					
Animal fats	1 2 3	Yes <input type="radio"/> Y No <input type="radio"/> N					
Fruits							
Sweet bananas	1 2 4	Yes <input type="radio"/> Y No <input type="radio"/> N					
Citrus fruit (oranges, lemons, etc)	1 2 5	Yes <input type="radio"/> Y No <input type="radio"/> N					
Mangoes	1 2 6	Yes <input type="radio"/> Y No <input type="radio"/> N					
Papayas	1 2 7	Yes <input type="radio"/> Y No <input type="radio"/> N					
Avocadoes	1 2 8	Yes <input type="radio"/> Y No <input type="radio"/> N					
Pineapple	1 2 9	Yes <input type="radio"/> Y No <input type="radio"/> N					
Coconuts	1 3 0	Yes <input type="radio"/> Y No <input type="radio"/> N					
Other fruits (guavas, apples, etc)	1 3 1	Yes <input type="radio"/> Y No <input type="radio"/> N					

K - CONSUMPTION OF HOME PRODUCED FOOD AND GIFTS RECEIVED IN KIND

ITEM NAME	1	2	3	4			5
	Did the household consume any home produced [...] or receive [...] as gifts or food aid in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume home produced [...] or receive [...] as gifts or food aid?	How much home produced [...] on average was consumed during each of these months?			What would you pay (in L\$ per unit) if you bought [...] in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units consumed from home production, gifts and food aid	Number of units consumed from food aid only	
Fresh vegetables							
Tomatoes	1 3 2	Yes <input type="radio"/> Y No <input type="radio"/> N					
Onions	1 3 3	Yes <input type="radio"/> Y No <input type="radio"/> N					
Cassava leaves	1 3 4	Yes <input type="radio"/> Y No <input type="radio"/> N					
Collard greens	1 3 5	Yes <input type="radio"/> Y No <input type="radio"/> N					
Sweet potato leaves	1 3 6	Yes <input type="radio"/> Y No <input type="radio"/> N					
Other leaves	1 3 7	Yes <input type="radio"/> Y No <input type="radio"/> N					
Lettuce, cabbage	1 3 8	Yes <input type="radio"/> Y No <input type="radio"/> N					
Okra	1 3 9	Yes <input type="radio"/> Y No <input type="radio"/> N					
Eggplant	1 4 0	Yes <input type="radio"/> Y No <input type="radio"/> N					
Carrots	1 4 1	Yes <input type="radio"/> Y No <input type="radio"/> N					
Green beans	1 4 2	Yes <input type="radio"/> Y No <input type="radio"/> N					
Other vegetables	1 4 3	Yes <input type="radio"/> Y No <input type="radio"/> N					
Condiments (peppers, ginger, etc)	1 4 4	Yes <input type="radio"/> Y No <input type="radio"/> N					
Green pepper	1 4 5	Yes <input type="radio"/> Y No <input type="radio"/> N					

K - CONSUMPTION OF HOME PRODUCED FOOD AND GIFTS RECEIVED IN KIND

ITEM NAME	1	2	3	4			5
	Did the household consume any home produced [...] or receive [...] as gifts or food aid in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume home produced [...] or receive [...] as gifts or food aid?	How much home produced [...] on average was consumed during each of these months?			What would you pay (in L\$ per unit) if you bought [...] in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units consumed from home production, gifts and food aid	Number of units consumed from food aid only	
Meat and fish							
Chicken	1 4 6	Yes (Y) No (N)					
Other domestic fowl	1 4 7	Yes (Y) No (N)					
Game birds	1 4 8	Yes (Y) No (N)					
Beef	1 4 9	Yes (Y) No (N)					
Lamb/goat	1 5 0	Yes (Y) No (N)					
Pork	1 5 1	Yes (Y) No (N)					
Meat from other domesticated animals	1 5 2	Yes (Y) No (N)					
Game (porcupine, gazelle, etc)	1 5 3	Yes (Y) No (N)					
Fresh fish	1 5 4	Yes (Y) No (N)					
Smoked fish (dried or salted)	1 5 5	Yes (Y) No (N)					
Shell fish and mollusks	1 5 6	Yes (Y) No (N)					
Insects (chenilles, palm worms, etc)	1 5 7	Yes (Y) No (N)					
Other aquatic products	1 5 8	Yes (Y) No (N)					

L - FREQUENTLY PURCHASED ITEMS

Reference Number

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ITEM NAME	1	2	3	4		5
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months?		What would you pay (in L\$ per unit) if you bought (item name) in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	
Cereals	●					
Local rice	2 0 1	Yes <input type="radio"/> No <input type="radio"/>				
Imported rice	2 0 2	Yes <input type="radio"/> No <input type="radio"/>				
Corn	2 0 3	Yes <input type="radio"/> No <input type="radio"/>				
Other cereals	2 0 4	Yes <input type="radio"/> No <input type="radio"/>				
Corn flour, semolina, wheat flour	2 0 5	Yes <input type="radio"/> No <input type="radio"/>				
Pasta products (macaroni, spaghetti)	2 0 6	Yes <input type="radio"/> No <input type="radio"/>				
Other flours	2 0 7	Yes <input type="radio"/> No <input type="radio"/>				
Bread	2 0 8	Yes <input type="radio"/> No <input type="radio"/>				
Pastries, cakes, biscuits	2 0 9	Yes <input type="radio"/> No <input type="radio"/>				
Fritters	2 1 0	Yes <input type="radio"/> No <input type="radio"/>				
Roots, tubers, bananas and plantain	●					
Cassava roots	2 1 1	Yes <input type="radio"/> No <input type="radio"/>				
Cassava flour (fufu)	2 1 2	Yes <input type="radio"/> No <input type="radio"/>				
Gari	2 1 3	Yes <input type="radio"/> No <input type="radio"/>				
Other forms of cassava (sticks, obamba)	2 1 4	Yes <input type="radio"/> No <input type="radio"/>				
Yams	2 1 5	Yes <input type="radio"/> No <input type="radio"/>				
Sweet potatoes	2 1 6	Yes <input type="radio"/> No <input type="radio"/>				
Potatoes	2 1 7	Yes <input type="radio"/> No <input type="radio"/>				
Bananas, plantain	2 1 8	Yes <input type="radio"/> No <input type="radio"/>				
Bitter balls	2 1 9	Yes <input type="radio"/> No <input type="radio"/>				
Eddoes	2 2 0	Yes <input type="radio"/> No <input type="radio"/>				

L - FREQUENTLY PURCHASED ITEMS

Reference Number

--	--

ITEM NAME	1	2	3	4		5
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months? Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other		What would you pay (in L\$ per unit) if you bought (item name) in the market today?
					Number of units	
Other roots and tubers	2 2 1	Yes <input type="radio"/> No <input type="radio"/>				
Dried vegetables, nuts and oils						
Dried beans	2 2 2	Yes <input type="radio"/> No <input type="radio"/>				
Dried peas	2 2 3	Yes <input type="radio"/> No <input type="radio"/>				
Other dried vegetables	2 2 4	Yes <input type="radio"/> No <input type="radio"/>				
Groundnuts	2 2 5	Yes <input type="radio"/> No <input type="radio"/>				
Other nuts	2 2 6	Yes <input type="radio"/> No <input type="radio"/>				
Palm nuts	2 2 7	Yes <input type="radio"/> No <input type="radio"/>				
Groundnut butter (paste)	2 2 8	Yes <input type="radio"/> No <input type="radio"/>				
Palm oil	2 2 9	Yes <input type="radio"/> No <input type="radio"/>				
Groundnut oil	2 3 0	Yes <input type="radio"/> No <input type="radio"/>				
Margarine	2 3 1	Yes <input type="radio"/> No <input type="radio"/>				
Other vegetable oils (cotton, soya)	2 3 2	Yes <input type="radio"/> No <input type="radio"/>				
Animal fats	2 3 3	Yes <input type="radio"/> No <input type="radio"/>				
Fruits						
Bananas	2 3 4	Yes <input type="radio"/> No <input type="radio"/>				
Citrus (oranges, lemons, mandarins, etc)	2 3 5	Yes <input type="radio"/> No <input type="radio"/>				
Mangoes	2 3 6	Yes <input type="radio"/> No <input type="radio"/>				
Papayas	2 3 7	Yes <input type="radio"/> No <input type="radio"/>				
Avocados	2 3 8	Yes <input type="radio"/> No <input type="radio"/>				
Pineapples	2 3 9	Yes <input type="radio"/> No <input type="radio"/>				
Coconuts	2 4 0	Yes <input type="radio"/> No <input type="radio"/>				

L - FREQUENTLY PURCHASED ITEMS

Reference Number

--	--

ITEM NAME	1	2	3	4		5														
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item	During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months? Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	What would you pay (in L\$ per unit) if you bought (item name) in the market today?															
Other fruits (guava, apples, watermelon, etc)	<table border="1"><tr><td>2</td><td>4</td><td>1</td></tr></table>	2	4	1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	1																		
Fresh vegetables																				
Fresh tomatoes	<table border="1"><tr><td>2</td><td>4</td><td>2</td></tr></table>	2	4	2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	2																		
Onions	<table border="1"><tr><td>2</td><td>4</td><td>3</td></tr></table>	2	4	3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	3																		
Cassava leaves	<table border="1"><tr><td>2</td><td>4</td><td>4</td></tr></table>	2	4	4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	4																		
Other leaves (folong, oseille)	<table border="1"><tr><td>2</td><td>4</td><td>5</td></tr></table>	2	4	5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	5																		
Cabbage	<table border="1"><tr><td>2</td><td>4</td><td>6</td></tr></table>	2	4	6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	6																		
Okra	<table border="1"><tr><td>2</td><td>4</td><td>7</td></tr></table>	2	4	7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	7																		
Eggplant	<table border="1"><tr><td>2</td><td>4</td><td>8</td></tr></table>	2	4	8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	8																		
Carrots	<table border="1"><tr><td>2</td><td>4</td><td>9</td></tr></table>	2	4	9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	4	9																		
Green beans	<table border="1"><tr><td>2</td><td>5</td><td>0</td></tr></table>	2	5	0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	0																		
Green pepper	<table border="1"><tr><td>2</td><td>5</td><td>1</td></tr></table>	2	5	1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	1																		
Other vegetables	<table border="1"><tr><td>2</td><td>5</td><td>2</td></tr></table>	2	5	2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	2																		
Meat and fish																				
Chicken	<table border="1"><tr><td>2</td><td>5</td><td>3</td></tr></table>	2	5	3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	3																		
Other domestic fowl	<table border="1"><tr><td>2</td><td>5</td><td>4</td></tr></table>	2	5	4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	4																		
Game birds	<table border="1"><tr><td>2</td><td>5</td><td>5</td></tr></table>	2	5	5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	5																		
Beef	<table border="1"><tr><td>2</td><td>5</td><td>6</td></tr></table>	2	5	6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	6																		
Lamb/goat	<table border="1"><tr><td>2</td><td>5</td><td>7</td></tr></table>	2	5	7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	7																		
Pork	<table border="1"><tr><td>2</td><td>5</td><td>8</td></tr></table>	2	5	8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	8																		
Meat from other domesticated animals	<table border="1"><tr><td>2</td><td>5</td><td>9</td></tr></table>	2	5	9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	5	9																		
Game and insects (porcupine gazelle)	<table border="1"><tr><td>2</td><td>6</td><td>0</td></tr></table>	2	6	0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	6	0																		

L - FREQUENTLY PURCHASED ITEMS

Reference Number

--	--

ITEM NAME	1	2	3	4		5
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months? Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	What would you pay (in L\$ per unit) if you bought (item name) in the market today?
Meat products (sausage, ham)	2 6 1 Yes <input type="radio"/> No <input type="radio"/>					
Preserved meat (paté, corned beef, etc)	2 6 2 Yes <input type="radio"/> No <input type="radio"/>					
Fresh or frozen fish	2 6 3 Yes <input type="radio"/> No <input type="radio"/>					
Smoked fish (dried or salted)	2 6 4 Yes <input type="radio"/> No <input type="radio"/>					
Crustaceans and mollusks (crab, etc)	2 6 5 Yes <input type="radio"/> No <input type="radio"/>					
Canned fish (sardines, tuna)	2 6 6 Yes <input type="radio"/> No <input type="radio"/>					
Shrimp and other crustaceans	2 6 7 Yes <input type="radio"/> No <input type="radio"/>					
Other aquatic products	2 6 8 Yes <input type="radio"/> No <input type="radio"/>					
Milk and dairy products						
Eggs	2 6 9 Yes <input type="radio"/> No <input type="radio"/>					
Fresh milk	2 7 0 Yes <input type="radio"/> No <input type="radio"/>					
Powdered milk	2 7 1 Yes <input type="radio"/> No <input type="radio"/>					
Cheese	2 7 2 Yes <input type="radio"/> No <input type="radio"/>					
Condensed milk	2 7 3 Yes <input type="radio"/> No <input type="radio"/>					
Butter	2 7 4 Yes <input type="radio"/> No <input type="radio"/>					
Yogurt	2 7 5 Yes <input type="radio"/> No <input type="radio"/>					
Other dairy products	2 7 6 Yes <input type="radio"/> No <input type="radio"/>					
Condiments and spices						
Hot/sweet pepper (fresh or dry)	2 7 7 Yes <input type="radio"/> No <input type="radio"/>					
Salt	2 7 8 Yes <input type="radio"/> No <input type="radio"/>					

L - FREQUENTLY PURCHASED ITEMS

Reference Number

--	--

ITEM NAME	1	2	3	4		5
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months? Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	What would you pay (in L\$ per unit) if you bought (item name) in the market today?
Tomato paste	2 7 9 Yes <input type="radio"/> No <input type="radio"/>					
Garlic	2 8 0 Yes <input type="radio"/> No <input type="radio"/>					
Bouillon cubes (maggi, jumbo, etc)	2 8 1 Yes <input type="radio"/> No <input type="radio"/>					
Other spices and condiments	2 8 2 Yes <input type="radio"/> No <input type="radio"/>					
Coffee, tea, chocolate						
Instant coffee	2 8 3 Yes <input type="radio"/> No <input type="radio"/>					
Chocolate drinks (ovaltine, etc)	2 8 4 Yes <input type="radio"/> No <input type="radio"/>					
Tea	2 8 5 Yes <input type="radio"/> No <input type="radio"/>					
Other herbal tea	2 8 6 Yes <input type="radio"/> No <input type="radio"/>					
Prepared food						
Breakfast outside of the household	2 8 7 Yes <input type="radio"/> No <input type="radio"/>					
Lunch/dinner outside of the household	2 8 8 Yes <input type="radio"/> No <input type="radio"/>					
Preparations for babies (cérélac, etc)	2 8 9 Yes <input type="radio"/> No <input type="radio"/>					
Other meals outside of the household	2 9 0 Yes <input type="radio"/> No <input type="radio"/>					
Other food products						
Sugar	2 9 1 Yes <input type="radio"/> No <input type="radio"/>					
Sweets (candies, etc)	2 9 2 Yes <input type="radio"/> No <input type="radio"/>					
Chocolate	2 9 3 Yes <input type="radio"/> No <input type="radio"/>					
Jams and jellies	2 9 4 Yes <input type="radio"/> No <input type="radio"/>					
Honey	2 9 5 Yes <input type="radio"/> No <input type="radio"/>					
Ice cream	2 9 6 Yes <input type="radio"/> No <input type="radio"/>					
Soft/carbonated drinks (coke, fanta, etc)	2 9 7 Yes <input type="radio"/> No <input type="radio"/>					

L - FREQUENTLY PURCHASED ITEMS

Reference Number

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ITEM NAME	1	2	3	4		5														
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months? Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	What would you pay (in L\$ per unit) if you bought (item name) in the market today?														
Fruit juice	<table border="1"><tr><td>2</td><td>9</td><td>8</td></tr></table>	2	9	8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	9	8																		
Mineral water	<table border="1"><tr><td>2</td><td>9</td><td>9</td></tr></table>	2	9	9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
2	9	9																		
Cola nut	<table border="1"><tr><td>3</td><td>0</td><td>0</td></tr></table>	3	0	0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	0																		
Other food expenditure	<table border="1"><tr><td>3</td><td>0</td><td>1</td></tr></table>	3	0	1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	1																		
Milling charges	<table border="1"><tr><td>3</td><td>0</td><td>2</td></tr></table>	3	0	2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	2																		
Alcoholic drinks and tobacco																				
Beer (local or imported)	<table border="1"><tr><td>3</td><td>0</td><td>3</td></tr></table>	3	0	3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	3																		
Industrial wines and apéritifs	<table border="1"><tr><td>3</td><td>0</td><td>4</td></tr></table>	3	0	4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	4																		
Palm wine	<table border="1"><tr><td>3</td><td>0</td><td>5</td></tr></table>	3	0	5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	5																		
Industrial liquors	<table border="1"><tr><td>3</td><td>0</td><td>6</td></tr></table>	3	0	6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	6																		
Local alcoholic drinks	<table border="1"><tr><td>3</td><td>0</td><td>7</td></tr></table>	3	0	7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	7																		
Cigarettes	<table border="1"><tr><td>3</td><td>0</td><td>8</td></tr></table>	3	0	8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	8																		
Tobacco leaves or snuff	<table border="1"><tr><td>3</td><td>0</td><td>9</td></tr></table>	3	0	9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	0	9																		
Other forms of tobacco	<table border="1"><tr><td>3</td><td>1</td><td>0</td></tr></table>	3	1	0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	0																		
Household fuels																				
Kerosene/paraffin	<table border="1"><tr><td>3</td><td>1</td><td>1</td></tr></table>	3	1	1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	1																		
Bottled gas/propane	<table border="1"><tr><td>3</td><td>1</td><td>2</td></tr></table>	3	1	2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	2																		
Charcoal	<table border="1"><tr><td>3</td><td>1</td><td>3</td></tr></table>	3	1	3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	3																		
Wood and other solid fuels	<table border="1"><tr><td>3</td><td>1</td><td>4</td></tr></table>	3	1	4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	4																		
Matches	<table border="1"><tr><td>3</td><td>1</td><td>5</td></tr></table>	3	1	5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	5																		
Candles	<table border="1"><tr><td>3</td><td>1</td><td>6</td></tr></table>	3	1	6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	6																		
Light bulbs	<table border="1"><tr><td>3</td><td>1</td><td>7</td></tr></table>	3	1	7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
3	1	7																		

L - FREQUENTLY PURCHASED ITEMS

Reference Number

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ITEM NAME	1	2	3	4		5
	Did the household consume any purchased [...] in the last 12 months ? Yes/No If no next item		During how many months in the last 12 months did the household consume purchased [...]?	How much purchased [...] on average was consumed during each of these months?		What would you pay (in L\$ per unit) if you bought (item name) in the market today?
				Unit 1.Kg 2.Litre 3.Number 4.Sack/bag 5.Can/package 6.Heap/pile 7.Cup 8.Bottle 9.Other	Number of units	
Other energy sources (batteries, etc)	3 1 8	Yes <input type="radio"/> No <input type="radio"/>				
Personal and household products						
Hand soap	3 1 9	Yes <input type="radio"/> No <input type="radio"/>				
Personal oils, creams and lotions	3 2 0	Yes <input type="radio"/> No <input type="radio"/>				
Tooth paste	3 2 1	Yes <input type="radio"/> No <input type="radio"/>				
Toilet paper	3 2 2	Yes <input type="radio"/> No <input type="radio"/>				
Personal services (coiffure, manicure)	3 2 3	Yes <input type="radio"/> No <input type="radio"/>				
Other personal articles	3 2 4	Yes <input type="radio"/> No <input type="radio"/>				
Beauty aids (nail polish, lipstick)	3 2 5	Yes <input type="radio"/> No <input type="radio"/>				
Laundry soap, detergent	3 2 6	Yes <input type="radio"/> No <input type="radio"/>				
Bleach	3 2 7	Yes <input type="radio"/> No <input type="radio"/>				
Other household products	3 2 8	Yes <input type="radio"/> No <input type="radio"/>				
Repair and maintenance services						
Clothing repairs	3 2 9	Yes <input type="radio"/> No <input type="radio"/>				
Shoe shine or repair	3 3 0	Yes <input type="radio"/> No <input type="radio"/>				
Furniture repair	3 3 1	Yes <input type="radio"/> No <input type="radio"/>				
Household appliance repairs	3 3 2	Yes <input type="radio"/> No <input type="radio"/>				
Other equipment repairs (camera, etc)	3 3 3	Yes <input type="radio"/> No <input type="radio"/>				
Laundry and dry cleaning services	3 3 4	Yes <input type="radio"/> No <input type="radio"/>				

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M - LESS FREQUENTLY PURCHASED ITEMS

	1	2	3										
ITEM NAME	During the reference period, did the household purchase [....]? Yes/No If no next product		Amount spent during the reference period (in L\$)										
Household maintenance expenses - last 3 months	●												
Rent	4 0 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Imputed rent for owned home	4 0 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Electricity	4 0 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Water	4 0 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Garbage collection	4 0 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Wages for household employees	4 0 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Transport and communications - last 3 months	●												
Postal fees	4 0 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Telecommunication charges (billed)	4 0 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Other communications charges	4 0 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Purchases of vehicle spare parts (tires, batteries, etc)	4 1 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Vehicle rental	4 1 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Moving and shipping expenses	4 1 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Travel expenses (other city or country, pilgrimage, etc)	4 1 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Other transport related expenses (vehicle inspection, driving school, etc.)	4 1 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Health expenditure - last 3 months	●												
Medical consultation	4 1 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Medical treatment (injection, bandages, rehabilitation, etc)	4 1 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Purchase of drugs	4 1 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Consultation and treatment by a traditional practitioner	4 1 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										
Purchase of traditional medications	4 1 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>										

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M - LESS FREQUENTLY PURCHASED ITEMS

	1	2	3								
ITEM NAME	During the reference period, did the household purchase [....]? Yes/No If no next product		Amount spent during the reference period (in L\$)								
Health expenditure - last 12 months	●										
Radiology, EKG, scanner, medical tests (urine, blood, etc)	4 2 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Therapeutic devices (prosthetic devices, glasses, wheel chairs, etc)	4 2 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Hospitalization	4 2 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Vaccination costs	4 2 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Household maintenance expenses - last 12 months	●										
Purchase of household cleaning materials	4 2 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Wages for household cleaners	4 2 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Fan	4 2 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Iron	4 2 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Small appliances and tools (lamps, hammers, pails, etc)	4 2 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Cooking utensils (casserole, marmite, frying pan, bucket, etc)	4 2 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Dishes (plates, glasses), silverware (knives, etc)	4 3 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Textiles (drapes, blankets, mosquito nets, etc)	4 3 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Other small appliances (hot plate, oven, small water heater, etc)	4 3 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Clothing and shoes - last 12 months	●										
Men's clothing	4 3 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Women's clothing	4 3 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Children's clothing	4 3 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Cloth wraps and fabrics	4 3 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Underwear	4 3 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Sewing costs	4 3 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								

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M - LESS FREQUENTLY PURCHASED ITEMS

	1	2	3								
ITEM NAME	During the reference period, did the household purchase (product name)? Yes/No If no next product		Amount spent during the reference period (in \$units)								
Men's shoes	4 3 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Women's shoes	4 4 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Children's shoes	4 4 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Accessories (handkerchiefs, belts, hats, ties, etc)	4 4 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Other clothing articles (buttons, thread, etc)	4 4 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Jewelry	4 4 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Leisure activities - last 12 months	●										
Photographic matériel/services (film, developing, etc)	4 4 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Recording devices (cassettes, CD, etc)	4 4 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Games and toys (chess, cards, dolls, etc)	4 4 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Books and magazines	4 4 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Writing and drawing materials (notebooks, envelopes, etc)	4 4 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Sports clothing and shoes	4 5 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Sports equipment (football, racquet, ping pong tables, etc)	4 5 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Plants and flowers	4 5 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Pets (purchase of cats, dogs, etc)/ veterinary and other services)	4 5 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Admission charges (stadium, swimming pool, cinema, concert, etc)	4 5 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Television subscription charges	4 5 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Games of chance (lottery, horse races, etc)	4 5 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Musical instruments (piano, guitar, etc)	4 5 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Other equipment (calculator, binoculars, etc)	4 5 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Other leisure services	4 5 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								

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M - LESS FREQUENTLY PURCHASED ITEMS

[illegible]

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M - LESS FREQUENTLY PURCHASED ITEMS

	1	2	3								
ITEM NAME	During the reference period, did the household purchase [....]? Yes/No If no next product		Amount spent during the reference period (in L\$s)								
Education expenditure - last 12 months	●										
School fees - nursery school	4 7 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School fees - primary school	4 7 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School fees - general secondary school	4 7 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School fees - technical secondary school	4 7 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School fees - higher education	4 7 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Literacy course	4 7 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Professional/vocational training fees	4 7 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School books	4 8 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School uniforms	4 8 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Notebooks	4 8 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
School bags and knapsacks	4 8 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Raincoats	4 8 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Stationery for school	4 8 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Files and file folders	4 8 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								
Other school material	4 8 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>								

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N - HOUSEHOLD INCOME

SOURCE OF INCOME	1	2	3	4																
	Did the household earn any income from sales of [...] during the last 12 months? Yes/No If no next source		How much was earned from sales of [...] during the last 12 months (in L\$)?	How has the income from [...] changed since 12 months ago?																
Sales of agricultural products	●																			
Rice	5 0 1	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Corn	5 0 2	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Other cereals	5 0 3	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Fruits	5 0 4	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Vegetables	5 0 5	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Groundnuts	5 0 6	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Palm nuts	5 0 7	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Palm oil	5 0 8	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Bananas	5 0 9	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Citrus (oranges, lemons, etc)	5 1 0	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Mangoes	5 1 1	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Pineapple	5 1 2	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Other fruits (guaves, apples, etc)	5 1 3	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Tomatoes	5 1 4	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Onions	5 1 5	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																
Cassava leaves	5 1 6	Yes <input type="radio"/> Y No <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4" style="text-align: center;">▲</td><td colspan="4" style="text-align: center;">▲</td></tr></table>									▲				▲				+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
▲				▲																

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N - HOUSEHOLD INCOME

SOURCE OF INCOME	1	2	3	4								
	Did the household earn any income from sales of [...] during the last 12 months? Yes/No If no next source		How much was earned from sales of [...] during the last 12 months (in L\$)?	How has the income from [...] changed since 12 months ago?								
Other leaves	5 1 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Lettuce, cabbage	5 1 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Okra	5 1 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Garden eggs	5 2 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Carrots	5 2 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Green beans	5 2 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Other vegetables	5 2 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Condiments (pepper, ginger, etc)	5 2 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of other agricultural products	5 2 5	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of cattle	5 2 6	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of sheep	5 2 7	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of poultry	5 2 8	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of game (wild) birds or animals	5 2 9	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of other animals	5 3 0	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of other animal products	5 3 1	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of fish	5 3 2	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of crustaceans (crab, etc)	5 3 3	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4
Sales of other aquatic products	5 3 4	Yes <input type="radio"/> No <input type="radio"/>	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>									+ Same - DK 1 2 3 4

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N - HOUSEHOLD INCOME

SOURCE OF INCOME	1 Did the household earn any income from sales of [...] during the last 12 months? Yes/No If no next source	2	3 How much was earned from sales of [...] during the last 12 months (in L\$)?	4 How has the income from [...] changed since 12 months ago?																
Non agricultural wages and incomes	●																			
Salaries and wages	5 3 5 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Other earnings	5 3 6 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Net income for entrepreneurs	5 3 7 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Profits	5 3 8 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Royalties and commissions	5 3 9 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Payments in kind	5 4 0 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Public Transfers	●																			
Pensions and social security allowances	5 4 1 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Veteran and disability allowances	5 4 2 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Other public transfers	5 4 3 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Other revenue	●																			
Rental property income	5 4 4 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Other rental income	5 4 5 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Treasury bonds	5 4 6 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Interest and dividends received	5 4 7 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Sale of a house or other asset	5 4 8 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Sale of a car or other capital good	5 4 9 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Lottery winnings	5 5 0 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
Other income	5 5 1 <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="radio"/> Y <input type="radio"/> N	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																	+ Same - DK <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4

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O - HOUSEHOLD TRANSFERS

	1	2	3	4	5																
	Did the household receive/send any money for [...] during the last 12 months? Yes/No If no next item		Relationship 1 Parent 2 Child 3 Relative 4 Not related	Origin or destination: 1 Liberia 2 Outside	How much was sent/received for [...] during the last 12 months																
Money received by the household																					
Education expenses	6 0 1	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Health care expenses	6 0 2	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Funeral expenses	6 0 3	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Celebration expenses	6 0 4	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Business investment	6 0 5	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Living expenses	6 0 6	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Money sent by the household																					
Education expenses	6 0 7	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Health care expenses	6 0 8	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Funeral expenses	6 0 9	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Celebration expenses	6 1 0	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Business investment	6 1 1	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																
Living expenses	6 1 2	Yes <input type="radio"/> Y No <input type="radio"/> N	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	<input type="radio"/> 1 <input type="radio"/> 2	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="4"></td><td colspan="4"></td></tr></table>																