



INCOME AND EXPENDITURE SURVEY 2010/11 HOUSEHOLD DIARY

WEEK 1
UNIQUE IDENTIFIER

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SURVEY PERIOD

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SURVEY DATE

0			2	0	1	
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PARTICULARS OF SAMPLED UNIT

Primary Sampling Unit (PSU) number

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Dwelling Unit (DU) number

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HOUSEHOLDS AT THE DWELLING UNIT

Household number for this household

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Total number of households at the dwelling unit

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NUMBER OF DIARIES

Diary number (this diary)

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Total number of diaries for this week

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Barcode of 1st Diary for this Week (if more than one diary)

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NUMBER OF ENTRIES PER DAY

Purchases, consumption from own production and nature, payments for services, gifts, remittances, etc.

Weekday	Day of Month	Number of entries for the day		
		Form 1	Form 2	Form 3
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
Total				

PHYSICAL IDENTIFICATION OF DWELLING UNIT

COMMENTS

FIELDWORK

Date issued (ddmm)

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Date to collect (ddmm)

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Date collected (ddmm)

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Interviewer Name

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Number

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Supervisor Name

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Number

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Checklist

1.	Is there anyone in this household aged 2 years or younger?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
2.	Does any member of this household use alcoholic beverages?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
3.	Does anyone in this household support someone who is in a boarding school, old age home, etc.?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
4.	Does any member of this household use tobacco or tobacco products?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
5.	How many dwelling units are owned by members of this household?.....	<input type="text"/>	<input type="text"/>		
6.	Does any member of the household own a cellular phone?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
7.	Does the household own or make use of a functional telephone?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
8.	Does the household have access to electricity for cooking, lighting and/or heating?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
9.	Does anyone in this household make use of public transport to go to school or work?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
10.	Does anyone in this household make use of private transport to go to school or work?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
11.	Does anyone in this household own a car (vehicle)?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
12.	Does anyone in this household attend an educational institution?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
13.	Is there anyone in this household who is covered by medical aid or health insurance?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
14.	Are there any TV licences for TV sets owned by this household?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
15.	Does anyone in this household subscribe to any kind of magazine or newspaper?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
16.	Does anyone in this household subscribe to DStv, internet, etc.?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
17.	Does anyone in this household have a bank account?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
18.	Does this household or anyone in this household grow produce (e.g. vegetables) and/or raise livestock for the household's own consumption?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
19.	Does this household regularly purchase items from informal markets?	<input type="checkbox"/>	YES	<input type="checkbox"/>	No

Does anyone in the household have debit orders, such as

20.	Medical aid or health insurance	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
21.	Car insurance	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
22.	Other insurance	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
23.	Subscription to DStv	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
24.	Subscription to the internet	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
25.	Subscription to magazines and newspapers	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
26.	TV licence	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
27.	Parking	<input type="checkbox"/>	YES	<input type="checkbox"/>	No
28.	Other debit orders	<input type="checkbox"/>	YES	<input type="checkbox"/>	No

List all deductions from salaries/wages of household members:

29.	
30.	
31.	
32.	
33.	

INCOME AND EXPENDITURE SURVEY 2010/11

GUIDELINES FOR FILLING IN DAILY ACQUISITIONS

TO BE RECORDED DAILY IN:

Form 1 (pages 6-11)

- All food and non-food items purchased by any member of the household, such as bread, milk, rice, furniture, electric appliances, wood, etc. for the household's consumption as well as to give away as a gift or maintenance.

Households to record the full price of the item at the time of acquisition.

- All items acquired by the household without paying for them, such as items from own production, (e.g. from own garden or kraal) or from nature (e.g. items from hunting, fishing and gathering of vegetables).
To be recorded when the item was consumed by the household.
- All items received as gifts or maintenance from someone who is not a household member.

Households to record the estimated value of the item acquired.

Form 2 (pages 12-13)

- All food and beverages (such as hamburgers, fruit, soft drinks, etc) acquired at restaurants, canteens and other food outlet.
- "Small" acquisitions (such as cigarettes, newspapers, sweets, soft drinks, etc) by individual household members.

To be recorded when purchased/acquired.

Form 3 (pages 14-15)

- All payments made by household members for services such as car insurance, telephone bills, DSTv, bus and taxi fares, etc. whether paid for when receiving the service or paid monthly.

Households to record the amount paid for the service.

SEE ALSO THE EXAMPLES ON THE NEXT TWO PAGES

NOT TO BE RECORDED IN THE DIARY:

- Items purchased for business purposes.

HOW TO COMPLETE THE DIARY

Instructions to the main respondent:

- The household member who knows the most about the household's acquisitions should take responsibility for completing the Household Diary.
- A notebook should be issued to individual household members to be carried when away from home, in order to record acquisitions which take place during the day. After completion of a week, tear out the used pages from the notebook and put inside the envelope provided, seal the envelope and give it to the interviewer at his/her next visit.
- Ask each member of the household about any transactions for the day which have not been recorded in the Household Diary.
- Please use the checklist as a reminder regarding items which are easily forgotten.
- ***In order to ensure complete recording, please keep receipts from all purchases.***

FORM 1

ITEMS **PURCHASED** BY THE HOUSEHOLD, OR **RECEIVED** AS GIFTS OR MAINTENANCE, OR **CONSUMED**

Note: Items purchased from restaurants, fastfood outlets, etc. should be recorded in Form 2

PAYMENTS FOR **SERVICES** (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE													Value								
I	COICOP								CHK		Day	Description	Rand				Cent				
											0 1	Brown bread						8	5	0	101
											0 1	Long life full cream milk						7	0	0	102
											0 1	Newspaper						4	5	0	103
											0 1	Milk chocolate					1	1	9	5	104
											0 2	Rice					1	7	9	5	105
											0 5	Women's skirt				2	9	9	9	5	106
											0 5	Fresh potatoes						7	0	0	107
											0 6	Fish caught by household					2	0	0	0	108

FORM 2

FOOD, BEVERAGES AND SMALL ITEMS **ACQUIRED** (PURCHASED, RECEIVED AS GIFT, ETC.) FROM

Note: PAYMENTS FOR **SERVICES** (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE													Value							
I	COICOP							CHK		Day	Description	Rand				Cent				
										0 5	Burger and chips					1 6	9 5	201		
										0 5	Potato chips					6	8 0	202		
										0 6	Apple					2	0 0	203		
										0 6	Pap and meat					2 0	0 0	204		
										0 7	Cigarettes					1 1	9 5	205		
										0 7	Cup of rooibos tea					8	5 0	206		

FORM 3

PAYMENTS FOR **SERVICES** (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE														Value							
I	COICOP							CHK			Day	Description	Rand						Cent		
										0	2	Return taxi fare to shopping mall					3	7	0	0	301
										0	2	Pre-primary school fee			2	0	0	0	0	0	302
										0	2	Transport to school					1	0	0	0	303
										0	4	Parking at work						8	0	0	304
										0	6	DStv payment				4	9	5	0	0	305
										0	7	Airtime					6	0	0	0	306

insurance premiums, etc.) should be recorded in Form 3

Source 1 = Shop 2 = Own business 3 = Own produce (from own garden, livestock, etc.) 4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.) 5 = Other		Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No. maintenance given away		Area of purchase 1 = In a big city (Metro) 2 = In another urban area (town/city/township) 3 = In a rural area 4 = NOT APPLICABLE 5 = DON'T KNOW		Type of retailer		FOR OFFICE USE	
						Formal sector	Informal sector		
						1 = Chain store 2 = Internet 3 = Other retailer 6 = NOT APPLICABLE 7 = DON'T KNOW	4 = Street trading 5 = Other		
101	1		1		1		1		
102	1		1		1		1		
103	1		1		1		3		
104	4		1		2		4		
105	1		1		1		1		
106	1		2		4		6		
107	5		1		2		4		
108	5		1		4		6		

RESTAURANTS, FASTFOOD OUTLETS, KIOSKS, ETC.

insurance premiums, etc.) should be recorded in Form 3

Source 1 = Shop 2 = Own business 3 = Own produce (from own garden, livestock, etc.) 4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.) 5 = Other		Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No. maintenance given away		Area of purchase 1 = In a big city (Metro) 2 = In another urban area (town/city/township) 3 = In a rural area 4 = NOT APPLICABLE 5 = DON'T KNOW		Type of retailer		FOR OFFICE USE	
						Formal sector	Informal sector		
						1 = Chain store 2 = Internet 3 = Other retailer 6 = NOT APPLICABLE 7 = DON'T KNOW	4 = Street trading 5 = Other		
201	1		1		1		2		
202	3		1		1		2		
203	5		1		2		3		
204	1		1		1		2		
205	2		2		2		2		
206	6		1		1		4		

insurance premiums, etc.)

Method of payment 1 = Debit order 2 = Deducted from salary 3 = Internet payments 4 = Cash 5 = Other		Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No, maintenance given away		FOR OFFICE USE	
				S	D
301	4		1		
302	4		1		
303	4		1		
304	4		1		
305	1		1		
306	4		2		

PAYMENTS FOR SERVICES (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

PLEASE COMPLETE FORM 2 AND FORM 3 WHERE APPLICABLE

insurance premiums, etc.) should be recorded in Form 3

Source	Was this for this household's own consumption?	Area of purchase	Type of retailer		FOR OFFICE USE	
			Formal sector	Informal sector		
			1 = Chain store	4 = Street trading		
			2 = Internet	5 = Other		
3 = Own produce (from own garden, livestock, etc.)	1 = Yes	1 = In a big city (Metro)	3 = Other retailer	6 = NOT APPLICABLE	S	D
4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.)	2 = No, gift given away	2 = In another urban area (town/city/township)		7 = DON'T KNOW		
5 = Other	3 = No. maintenance given away	3 = In a rural area				
		4 = NOT APPLICABLE				
		5 = DON'T KNOW				
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insurance premiums, etc.) should be recorded in Form 3

Source 1 = Shop 2 = Own business 3 = Own produce (from own garden, livestock, etc.) 4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.) 5 = Other	Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No. maintenance given away	Area of purchase 1 = In a big city (Metro) 2 = In another urban area (town/city/township) 3 = In a rural area 4 = NOT APPLICABLE 5 = DON'T KNOW	Type of retailer		FOR OFFICE USE S D
			Formal sector 1 = Chain store 2 = Internet 3 = Other retailer	Informal sector 4 = Street trading 5 = Other	
			6 = NOT APPLICABLE 7 = DON'T KNOW		
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FORM 1

ITEMS **PURCHASED** BY THE HOUSEHOLD, OR **RECEIVED** AS GIFTS OR MAINTENANCE, OR **CONSUMED**

Note: Items purchased from restaurants, fastfood outlets, etc. should be recorded in Form 2

PAYMENTS FOR **SERVICES** (e.g. taxi fares, airline, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE												Value										
I	COICOP								CHK		Day	Description	Rand					Cent				
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PLEASE COMPLETE FORM 2 AND FORM 3 WHERE APPLICABLE

insurance premiums, etc.) should be recorded in Form 3

	Source 1 = Shop 2 = Own business 3 = Own produce (from own garden, livestock, etc.) 4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.) 5 = Other	Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No. maintenance given away	Area of purchase 1 = In a big city (Metro) 2 = In another urban area (town/city/township) 3 = In a rural area 4 = NOT APPLICABLE 5 = DON'T KNOW	Type of retailer		FOR OFFICE USE		
				Formal sector 1 = Chain store 2 = Internet 3 = Other retailer 6 = NOT APPLICABLE 7 = DON'T KNOW	Informal sector 4 = Street trading 5 = Other			
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FORM 2

FOOD, BEVERAGES AND SMALL ITEMS **ACQUIRED** (PURCHASED, RECEIVED AS GIFT, ETC.) FROM
Note: PAYMENTS FOR **SERVICES** (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE											Value									
I	COICOP								CHK	Day	Description	Rand								Cent
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PLEASE COMPLETE FORM 3 WHERE APPLICABLE

RESTAURANTS, FAST FOOD OUTLETS, KIOSKS, ETC.
insurance premiums, etc.) should be recorded in Form 3

Source 1 = Shop 2 = Own business 3 = Own produce (from own garden, livestock, etc.) 4 = Gift or maintenance received or from nature (hunted, gathered, fished, etc.) 5 = Other	Was this for this household's own consumption? 1 = Yes 2 = No, gift given away 3 = No. maintenance given away	Area of purchase 1 = In a big city (Metro) 2 = In another urban area (town/city/township) 3 = In a rural area 4 = NOT APPLICABLE 5 = DON'T KNOW	Type of retailer		FOR OFFICE USE S D
			Formal sector 1 = Chain store 2 = Internet 3 = Other retailer	Informal sector 4 = Street trading 5 = Other	
			6 = NOT APPLICABLE 7 = DON'T KNOW		
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FORM 3

PAYMENTS FOR **SERVICES** (e.g. taxi fares, airtime, telephone bills, internet and DStv subscriptions,

FOR OFFICE USE										Value																		
I	COICOP							CHK		Day	Description	Rand					Cent											

insurance premiums, etc.)

Method of payment		Was this for this household's own consumption?		FOR OFFICE USE	
1 = Debit order 2 = Deducted from salary 3 = Internet payments 4 = Cash 5 = Other		1 = Yes 2 = No, gift given away 3 = No, maintenance given away		S D	
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TO BE COMPLETED BY THE INTERVIEWER

1. CONFIRMATION OF ACQUISITIONS DURING THE DIARY WEEK, ETC.

1.1 During the week that this diary refers to, did the household acquire any of the following?

Read each item and mark YES or NO under Q1.1

If YES in Q1.1 ask Q1.2

1.2 Was it fully recorded (Y), was some of it recorded (S) or was it not recorded at all (N)? Mark under Q1.2

If in Q1.2 only some was recorded (S) or it was not recorded at all (N), ask Q1.3

1.3 Can it be recorded now? (Y = YES, S = SOME OF IT, N = NO)

		1.1		1.2			1.3		
		Y	N	Y	S	N	Y	S	N
01	Bread								
02	Milk								
03	Flour, mealie meal								
04	Sugar								
05	Meat								
06	Fish								
07	Food items from own production								
08	Other food and beverage items								
09	Alcoholic beverages								
10	Tobacco								
11	Meals away from home for any household member								
12	Soft drinks								
13	Snacks								
14	Newspapers, magazines								
15	Clothing								
16	Footwear								
17	Payments for any licenses, TV, DStv								
18	Transport costs for any household members								
19	Fuel (petrol, diesel) for private use								
20	Parking expenses								
21	Payments for any maintenance, etc. for the dwelling								
22	Admittance charges, like cinema, sports events								
23	Lotto or other expenditures for gambling								
24	Airtime for cellphone/phone cards for landline telephone								

2. UNREPORTED ITEMS

2.1 Were there other items that the household acquired during the past week, which have not been recorded?

1 = YES

2 = NO

3 = DON'T KNOW

☐ 1

☐ 2

☐ 3

If YES, ask for the items, list them below and record them in the diary. Then, answer the next question yourself.

2.2	Have all items now been recorded?		
	1 = YES		1
	2 = NO		2
	3 = DON'T KNOW		3

3.1	Did the household members use the note books to record their acquisitions during the past week?	
	1 = YES, ALL	<input type="checkbox"/> 1
	2 = YES, SOME HOUSEHOLD MEMBERS	<input type="checkbox"/> 2
	3 = NO, NO ONE USED THE NOTEBOOK	<input type="checkbox"/> 3

3.2 Have their recordings been transferred to the diary?

1 = YES, ALL ☐ 1

2 = YES, SOME ☐ 2

3 = NO ☐ 3

4.1	<p>Was this a “normal” spending and/or consuming week?</p> <p>1 = YES <input type="checkbox"/> 1</p> <p>2 = NO, MORE THAN NORMALLY WAS SPENT AND/OR CONSUMED <input type="checkbox"/> 2</p> <p>3 = NO, LESS THAN NORMALLY WAS SPENT AND/OR CONSUMED <input type="checkbox"/> 3</p>
-----	--

4.2	<p>Why was this week different to a “normal” spending and/or consuming week? Please, describe.</p> <div></div> <div></div> <div></div> <div></div> <div></div>
-----	--

Interviewer signature

Has error been corrected?

To be signed by supervisor

Yes No

+

LIST OF BIG CITIES AND METROS

Note: If an item was acquired in one of these towns then option 1 should be recorded in Form 1 and Form 2 in the area of purchase column.

- City of Johannesburg
- City of Tswane (Pretoria)
- City of Cape Town
- Ekurhuleni
- eThekweni (Durban/Pinetown)
- Nelson Mandela Bay (Port Elizabeth)
- Buffalo City (East London)
- Sol Plaatjie (Kimberley)
- Mangaung (Bloemfontein)
- Matjhabeng (Welkom)
- Msunduzi (Pietermaritzburg)
- City Council of Klerksdorp (Rustenburg incl.)
- eMalahleni (Witbank)
- Mbombela (Nelspruit)
- Polokwane

CHECKING

	Name	Number	Date Completed/ Checked			
			d	d	m	m
Interviewer Supervisor DSC						