



Palestinian National Authority
 Palestinian Central Bureau of Statistics
Expenditure and Consumption Survey, 2004
 Household Questionnaire

ID00	Questionnaire serial no. in sample <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	ID04	Questionnaire serial no. in Enumerated Area <input type="text"/> <input type="text"/>
ID01	Governorate <input type="text"/> <input type="text"/>	ID05	Number of building <input type="text"/> <input type="text"/> <input type="text"/>
ID02	Locality Type <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	ID06	Number of Housing unit in the building <input type="text"/> <input type="text"/> <input type="text"/>
ID03	Enumerated area code in locality <input type="text"/> <input type="text"/> <input type="text"/>	ID07	Number of household in housing unit <input type="text"/>
ID09	Round no. <input type="text"/> <input type="text"/>	ID08	
ID10	Month Record <input type="text"/> <input type="text"/>	ID11	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

ID12	Name of Household (HH) head.....
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Street

IR03	Interview Result	1	Interview is completed
		2	Household traveled
		3	Unit not found
		4	Nobody at home
		5	Refusal
		6	Not inhabited
		7	No information
		8	Other (Specify)

IR04	Total members of HH <input type="text"/> <input type="text"/>	Male Number <input type="text"/> <input type="text"/>	Female Number <input type="text"/> <input type="text"/>
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IR05	Interviewer's Name.....	Interviewer's code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	IR06 Date .../.../ ..200
IR07	Supervisor Name.....	Supervisor's code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	IR08 Date.../.../...200
IR09	Editor Name.....	Editor's code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	IR10 Date.../.../...200
IR11	Data Entry Person's Name.....	Data Entry Person's code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	IR12 Date.../.../...200

Household Members

D1	D2	D3	D4	D5	D6	D7	D8
Line no. Of member	Names of usual HH residents (Full names)	The relationship of (name) to the head of HH? 1. Head of HH. 2. Husband/ wife 3. Son/Daughter 4. Father/mother 5. Brother/Sister 6. Grand Father/mother 7. Grand Child 8. Daughter/son in law 9. Other relatives 10. Non Relatives	Sex 1. Male 2. Female	Age <i>Compute age From birthday</i> And record the Answer in full Years, Record (00) If age less than one year 98 DK	Refugee Status 1. Registered refugee 2. Unregistered refugee 3. Not refugee	Education Attendance (for persons 5 years and Over) 1. Currently attending School 2. Attending school at any time and left before completing level 3. Attending school and graduated 4. Never attending school	Educational Status (for persons 10 years and Over) 1. Illiterate 2. Can read and write 3. Elementary 4. Preparatory 5. Secondary 6. Associate diploma 7. Bachelor 8. High diploma 9. Master 10. PH.D.
01.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
02.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
03.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
04.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
05.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
06.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
07.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
08.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
09.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
10.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
11.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
12.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
13.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
14.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
15.		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

D1	D2	D9	D10	D11	D12
Line no. Of member	Names of usual HH residents (Full names)	Marital Status (for persons 12 years and over) 1. Never married 2. Legally married 3. Currently married 4. Divorced 5. Widowed 6. separated	Work Status during the past week (for persons age 10 years and over) 1. Employed from 1-14 hours 2. Employed for 15 hours or more 3. 4. Unemployed, has ever worked 5. Unemployed, has never worked 6. Full time student 7. Housewife 8. Unable to work 9. Does not work and does not seek Job 10. Does not work and does not Seek job/ because hopelessness 11. Other <i><u>5-11 move to another member</u></i>	Work Status for persons 12 years and over	
				employment status 1. Employer 2. Self employed 3. Employee 4. Family work 5. Other	Place of Work 1. At home 2. in the same Locality 3. in the same Governorate 4. in other Governorate 5. Israel 6. Settlements 7. Abroad
01.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D1	D2	D13			D14				D15	D16	
Continuous: Work Status for persons age 10 years and over											
Line no. of member	Names of usual HH residents (Full names)	Main Occupation Describe main tasks for coding				Economic Activity				Sector 1. National praivet 2. forgion praivet 3. national government 4. forgion government 5. non-profit organization 6. UNRWA 7. international organization 8. Outside establishments	Is name do another work 1. Yes 2. No
01.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Housing Data

H1	Type of housing Unit	<input type="checkbox"/>	1. Villa 2. House 3. Apartment 4. Separate Room 5. Tent 6. Marginal 7. Others
H2	Tenure of the housing unit	<input type="checkbox"/>	1. Owned 2. Rented no furniture 3. Rented with furniture 4. Without payment 5. For work 6. Others (specify).....
H3	What is the overcoming material used in build outside walls of housing unit		1. clean stone 2. stone & cement 3. old stone 4. cement cob 5. concrete 6. mud 7. other (specify).....
H4	What is the area of housing unit (square meter)	
H5	What is the area of earth which the building built on in square meter	
H6	In which year the building of housing unit end	
H7	What is usage of housing unit	<input type="checkbox"/>	1. for residence 2. residence & work
H8	How many rooms are there in dwelling	<input type="checkbox"/> <input type="checkbox"/>	Excluding (bathroom and kitchen)
H9	How many sleep rooms are used in dwelling	<input type="checkbox"/> <input type="checkbox"/>	
H10	1. How much do you pay in rent each month 2. specify type of currency <input type="checkbox"/>	If code 2 or 3 in H2 1. Shekel 2. Dinar 3. Dollar
H11	1. What is estimated rent value each month 2. specify type of currency <input type="checkbox"/>	If code 1 or 4 or 5 or 6 in H2 (if someone wanted to rent an dwelling like yours) 1. Shekel 2. Dinar 3. Dollar
H12	Connection to Public Networks		
	1. Water	<input type="checkbox"/>	1. Public network 2. Private system 3. No piped water
	2. Electricity	<input type="checkbox"/>	1. Public network 2. Private generator 3. No electricity
	3. sewage system	<input type="checkbox"/>	1. Public Sewage System 2. Cesspit 3. No Sewage System
H13	Availability of a kitchen	<input type="checkbox"/>	1. Kitchen with Piped Water 2. Kitchen without Piped Water 3. No Kitchen
H14	Availability of a Bathroom	<input type="checkbox"/>	1. Bathroom with Piped Water 2. Bathroom without Piped Water 3. No Bathroom
H15	Availability of a Toilet (WC):	<input type="checkbox"/>	1. Toilet with Piped Water 2. Toilet without Piped Water 3. No Toilet
H16	Main source of energy in 1. Cooking 2. Heating	<input type="checkbox"/> <input type="checkbox"/>	1. Gas 2. Kerosene 3. Electricity 4. Wood 5. Other / specify..... 0. No exist 1. gas 2. Kerosene 3. Electricity 4. Wood/coal 5. Other/ specify.....
H17	Is few or all of housing rooms and corridors, kitchen suffer from the following: 1. Yes 2. No	1. wetness <input type="checkbox"/> 3. weak fanning <input type="checkbox"/>	2. cold and difficult heating in winter <input type="checkbox"/> 4. Increase degree of heat in summer <input type="checkbox"/>

H18	Is household members face in housing unit for any effects				
	1. Smoke, bad smells from cars	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	2. Smoke, bad smells from industry	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	3. smells resulting from animals	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	4. smells resulting from water of sewage system	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	5. smells resulting from garbage	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	6. General dust	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	7. Dust or smells resulting from other sources	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
	8. Noise	<input type="checkbox"/>	1. Yes	2. No	3. Don't Know
H19	What is the method to remove garbage	<input type="checkbox"/>	1. Collect from clean worker 2. Throwing in nearer container of garbage 3. Throwing randomly 4. Throwing in place of garbage 5. Being on fire 6. using for specific things 7. Other / specify.....		
H20	What is the distance from the following:				
	1. public transportation	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
	2. private doctor clinic	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
	3. health center	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
	4. hospital	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
	5. Elementary school	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
	6. mother and child health central	<input type="checkbox"/>	1. Less than 1 km 2. 1-5 km 3. More than 5 km		
H21	Availability of durable goods 1. Yes 2. No	1. Private Car	<input type="checkbox"/>	10. Home library	<input type="checkbox"/>
		2. Refrigerator	<input type="checkbox"/>	11. T.V	<input type="checkbox"/>
		3. Solar Boiler	<input type="checkbox"/>	12. Video	<input type="checkbox"/>
		4. Washing Machine	<input type="checkbox"/>	13. Phone line	<input type="checkbox"/>
		5. Cooking stove	<input type="checkbox"/>	14. Jawwal	<input type="checkbox"/>
		6. Dish washer	<input type="checkbox"/>	15. Mobile	<input type="checkbox"/>
		7. Central heating	<input type="checkbox"/>	16. Computer	<input type="checkbox"/>
		8. Vacuum cleaner	<input type="checkbox"/>	17. Satellite	<input type="checkbox"/>
		9. Blotter	<input type="checkbox"/>	18. Internet	<input type="checkbox"/>

Group No	Description of item	Item No.	First Week		Second Week		Third Week		Fourth Week	
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity
	Frozen chicken	208								
	Fresh turkey	209								
	Frozen turkey	218								
	Squab fresh or frozen	210								
	Other fresh or frozen birds	211								
	Processed lamb/ beef (hamburger, mortadella)	212								
	Processed poultry meat (mortadella, sausages)	219								
	Tinned meat	213								
	Fresh pork meat frozen or tinned	214								
	Fresh chicken and turkey liver	215								
	Fresh lamb liver	220								
	Fresh cow liver	221								
	Inside organs and limbs of slaughtered animal	222								
	Meat processing costs	223								
	Other, specify	216								
	<i>Total meat & poultry</i>									
03	Fish and sea product									
	Fish fresh	301								
	Fish frozen	302								
	Fish Salted	303								
	Smoked fish	304								
	Tinned, sardines	305								
	Tuna, tinned	306								
	Shrimps fresh or chilled	307								
	Fish products	308								
	Fish processing costs	310								
	Other, specify	309								
	<i>Total fish & sea product</i>									
04	Dairy products and eggs									
	Fresh or pasteurized milk	401								
	Condensed liquid milk	402								
	Powder milk	403								
	Infants powder milk	404								
	Tinned yogurt	405								
	Yogurt in kg.	406								
Group	Description of item	Item	First Week		Second Week		Third Week		Fourth Week	

Group No	Description of item	Item No.	First Week		Second Week		Third Week		Fourth Week	
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity
Group No	Water melon	609								
	Melon	610								
	Apricots	611								
	Plums	612								
	Cherries	613								
	Peaches	614								
	Straw berries	615								
	Pears	616								
	Guava	617								
	Pomegranate	618								
	Figs	619								
	Prickly pear	620								
	Khakis	621								
	Dates	622								
	Indian apricot	623								
	Pine apple	624								
	Mango	625								
	Coconut	626								
	Almonds, green	627								
	Other fresh fruits, (berries, etc), specify	628								
	<i>Total fresh fruits</i>									
07	Tinned fruits & natural fruits juice									
	Tinned pine apple	701								
	Tinned peach	702								
	Tinned mixture of fruits	703								
	others (specify)	706								
	<i>Total tinned fruits & natural fruits juice</i>									
08	Dried fruit									
	Dried figs	801								
	Dried grapes	802								
	Dried dates	803								
	Dried apricots	805								
	Other (i.e dried apricot, dried grapes) specify	804								
	<i>Total dried fruits</i>									
09	Nuts									
	Pistachio	901								

			First Week	Second Week	Third Week	Fourth Week
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			First Week		Second Week		Third Week		Fourth Week	
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity
	Peanuts	902								
	Almond	903								
	Hazelnuts	904								
	Water melon seeds	905								
	Pumpkin seeds	906								
	Sun flower seeds	907								
	Walnut	908								
	Cashew nuts	909								
	Chick pea	910								
	Chestnuts	911								
	Assorted nuts	912								
	Others (specify)	913								
	<i>Total nuts</i>									
10	Fresh vegetables									
	Tomatoes	1001								
	Cucumber	1002								
	Egyptian cucumber	1003								
	Carrot	1006								
	Eggplant	1007								
	marrow	1008								
	Pumpkin	1009								
	Gourd	1010								
	Green beans	1011								
	Green okra	1012								
	Green broad beans	1013								
	Green jews mallow	1014								
	Green peppers	1015								
	Spinach	1016								
	Cauliflower	1017								
	Cabbage	1018								
	<i>Lakhni (a type of cabbage)</i>	1031								
	Green cow peas	1019								
	Green pea	1020								
	Lettuce	1021								
	Grapes leaves	1022								
	Turnip	1023								
	Yellow corn	1024								
	Mushroom	1025								
	Green thyme	1027								
	Green sage	1028								
	Pasley	1029								
	corriander	1032								
	watercress	1033								
	Akoob	1034								
	Fennel	1035								
Group No	Description of item	Item No.	First Week		Second Week		Third Week		Fourth Week	

			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity
	Radish	1036								
	Spring onions	1037								
	Fresh garlic	1038								
	Green olives (not pickled)	1039								
	Others	1030								
	<i>Total fresh vegetables</i>									
12	Frozen vegetables									
	Frozen green peas	1201								
	Pease and carrots	1205								
	Frozen green beans	1202								
	Frozen green okra	1206								
	Frozen mixed vegetables	1203								
	Other (specify)	1204								
13	Legumes & Vegetables Dried or Tinned									
	Lentils	1301								
	Grushed lentils	1302								
	Dry chick beans	1303								
	Dry fava beans	1304								
	Dry sweet peas	1305								
	Dry peas	1306								
	Dry beans	1307								
	Dried jew's mallow	1308								
	Dried okra	1309								
	Onions	1318								
	Garlic	1319								
	Dried hyssop	1320								
	Dry yellow corn	1310								
	Lupine	1311								
	Other legumes and vegetables dried	1312								
	Broad beans (tinned)	1313								
	Chick beans, tinned or crushed	1314								
	Dried & tinned sweet beans	1315								
	Green beans (tinned)	1321								
	Tinned sweet beans	1316								
	Green pea (tinned)	1322								
	Other legumes tinned	1317								
	Mixed vegetables (tinned)	1323								
Group No	Description of item	Item No.	First Week		Second Week		Third Week		Fourth Week	
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity

	<i>Total legumes & vegetables (dried or tinned)</i>									
	Tomato paste or solid (tinned)	1324								
	Other tinned vegetables	1325								
14	Tubers									
	Potato	1401								
	Sweet potato	1402								
	Potato slices (frozen or tinned)	1403								
	Other, specify	1405								
	<i>Total tubers</i>									
15	Sugar and Confectionery									
	Sugar	1501								
	Halawa	1502								
	Treacle	1503								
	Jam	1504								
	Turkish delight	1505								
	Honey	1506								
	Local chocolate	1507								
	Imported chocolate	1508								
	Sweet	1509								
	Toffee	1510								
	Chewing gum	1511								
	<i>Qamar deen (made of apricot)</i>	1514								
	<i>Malban (made of grapes)</i>	1515								
	Bonbon, citrus products, etc...	1512								
	Ice-cream	1516								
	Ice	1517								
	Other, specify	1513								
	<i>Total suger and confectioneries</i>									
16	Tea, coffee, and hot chocolate (cacao)									
	Tea (in k.g)	1601								
	Tea packing (various types)	1602								
	Tea bags	1603								
	Ground coffee	1604								
	Green seed coffee	1605								

Durable Goods

Group No	Description of item	Item No.	Total amount last 12 months
50	Furniture		
	Wooden bed	5001	
	Metal bed	5002	
	Wooden tables	5003	
	Wooden chairs	5004	
	Plastic tables	5005	
	Plastic chairs	5006	
	Wooden cupboard	5007	
	Dining room, complete set	5008	
	Living room, complete set	5009	
	Bed room, complete set	5010	
	Office and buffets	5011	
	Book shelves	5012	
	Benches	5013	
	Carpets (pieces and mocket)	5014	
	Mat	5015	
	Plates (tableau, portrait etc.)	5016	
	Baby carriage	5017	
	Infants beds	5018	
	Others, specify	5019	
	Repair of furniture	5020	
	<i>Total furniture</i>	<i>5000</i>	
51	Household appliances		
	Gas/ electric stove	5101	
	Gas stove (cooker)	5102	
	Electric stove (cooker)	5103	
	Refrigerator	5104	
	Freezer	5105	
	Electric iron	5106	
	Air conditiones	5107	
	Electric fan	5108	
	Sewing machine	5109	
	Washing machine	5110	
	Dish washer	5111	
	Gas heater	5112	
	Kerosine heater	5113	
	Solar oil heater	5114	
	Electric heater	5115	

Group No	Description of item	Item No.	Total amount last 12 months
	Vaccum cleaner	5116	
	Textile machine	5117	
	Electric food mixer	5118	
	Coffee mill	5119	
	Electric meat processor	5130	
	Toaster	5131	
	Electric kitchen sets	5120	
	Electric Kettle (tea or coffee)	5121	
	Personal grooming electric devices and their repair	5132	
	Hair dresser	5122	
	Electric cooking pan	5123	
	Microwave oven (stove)	5124	
	Boiler	5125	
	Solar panel	5133	
	Electric cooler	5126	
	Gas cylinder	5127	
	Other, specify	5128	
	Household appliances repair	5129	
	<i>Total Household appliances</i>	<i>5100</i>	
52	Personal means of transportation		
	Vehicles (car, van) new	5201	
	Vehicles (car, van) old	5205	
	Motorcycle	5202	
	Bicycle	5203	
	Other, specify	5204	
	<i>Total personal means of transportation</i>	<i>5200</i>	
53	Recreational supplies		
	Radio or radio with tape recorder	5301	
	Radio	5315	
	Tape - recorded	5316	
	T.V's	5302	
	Video	5303	
	Video camera	5304	

Group No	Description of item	Item No.	Total amount last 12 months
	Cameras	5305	
	Musical instruments	5306	
	Satellite	5307	
	T.V's aid	5308	
	Attari	5309	
	Computers	5310	
	Mobile	5317	
	Telephone	5318	
	Telefax	5319	
	Other specify	5311	
	Recreational appliances repair	5312	
	Calculator	5320	
	Buying pets	5321	
	Plants including Christmas tree	5322	
	Sports equipment	5323	
	Camping tools	5324	
	<i>Total recreational appliances</i>		
54	Other goods and services		
	Tickets for traveling abroad	5401	
	Abroad tourist trip	5406	
	Abroad trip costs (study)	5407	
	Hajj and <i>Omra</i> (visit Mecca for religious ceremonies)	5408	
	Abroad trip costs (physical therapy)	5409	
	Jewels, watches, rings, precious stones etc.	5403	
	Other specify	5404	
	Jewels and watches repair	5405	
	<i>Total other goods and services</i>		
55	Social protection		
	Expenses of old people homes and disables people homes	5501	
	Expenses of the schools for the disabled	5502	
	Childcare expenses	5503	
38	Education		
	Kindergarten tuitions	3801	

Group No	Description of item	Item No.	Total amount last 12 months
	School tuitions	3802	
	Special education elementary fees	3815	
	Government secondary education fees	3816	
	Special secondary education fees	3817	
	Community college tuitions	3803	
	University tuitions	3804	
	Vocational education fees	3818	
	Cultural development education fees	3819	
	Expenses of adult and youth education outside school	3820	
	Other, specify	3813	
	<i>Total education</i>		

Assistance Data

I01	During current month, Is Household received humanitarian assistance		1. Yes 2. No		<input type="checkbox"/>	
I02	Frequency of recieved assistance during month				<input type="checkbox"/> <input type="checkbox"/>	
I03	A. Type of assistance	B. Value of assistance	C. Source of Assistance		D. Satisfaction with assistance	
	1. Food	Value	1. Shekel	1. Ministry of Social Affairs	3. Political Parties	1. Completely satisfied
	2. Free treatment\ Medicine		2. Dinar	2. Other Palestinian National Authority Institutions	4. Charity (Zakat) committees	2. Fairly satisfied
	3. Clothes		3. Dollar	5. International Institutions	6. UNRWA	3. Fairly not satisfied
	4. Operating			7. Arab Countries	8. Charity Institutions	4. Completely not satisfied
	5. The martyrs compensations			9. Relatives	10. Friends\ Neighbors	
	6. Cash (finance)		11. Labor union	12. Local Banks		
	7. A health insurance		13. Local peacemaking committee	14. Other		
	8. Many					
	9. Other					
For researcher record assistance which household obtain during current month. Specify row for each assistance						
1	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
2	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
3	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
4	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
5	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
6	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
7	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
8	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
9	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
I04	Is Household need for assistance		1. Yes 2. No 3. Not sure		<input type="checkbox"/>	
I05	1. Is Household receive assistance from abroad		1. Yes 2. No		<input type="checkbox"/>	
	2. The value of monthly amount received from remittances		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> record amount in Shekel			
I06	During current month, are you received remittances from abroad		1. Yes 2. No -> remove to I08		<input type="checkbox"/>	
I07	What are the sides of expenditure of remittances 1. Yes 2. No		1. In living or Food	<input type="checkbox"/>	4. Buy Furniture / Devices	<input type="checkbox"/>
			2. Build/ expansion house/ maintenance	<input type="checkbox"/>	5. Educate member of Household	<input type="checkbox"/>
			3. Marry of one Household member	<input type="checkbox"/>	6. Buy / expansion realty	<input type="checkbox"/>
					7. Other	<input type="checkbox"/>

I08	What are important needs for household	1. Food 2. Clothing 3. Education 4. Jobs 5. Money	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6. Providing medicine 7. Providing House 8. Entertainment activities	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I09	To enable household from covering their expenditures during currently month 1. Yes 2. No 3. Not applicable	1. Dependence on family income 2. Obtain assistance from family and friends 3. Used their saving 4. Used their saving in Israeli banks 5. Sold available of durabel goods 6. Sold Jewels or part of it 7. Borrowed from banks or financial institution 8. Reduced their expenditures	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	9. Borrowed money 10. Worked in farming or breeding livestock 11. Sold or mortgaged lands or building 12. Sent at least one family member from students to work 13. Sent at least one family member from others to work 14. Search for another work 15. Postponed paying bills	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I10	What is Period in which the Household can Financially cope	1. Can cope more than 12 month 2. Can cope from 7-12 month 3. Can cope from 4-6 month		4. Can cope less than 4 month 5. Suffered from dangers situations and don't know how to live 6. Don't know	<input type="checkbox"/>
I11	Arrange Main Source of Income	1. Agriculture 2. Household business 3. Wages and salaries from public sector 4. Wages and salaries from private sector 5. Wages and salaries from Israeli work sector	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6. Remittances from Palestine 7. Remittances from abroad 8. International Institutions 9. Social Aid 10. Other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I12	Is one member of household do any producing or service activity during currently month			1. Yes 2. No -> Skip to I14	<input type="checkbox"/>
I13	What are producing and services activities do 1. For sale 2. Household Consumption 3. Sale and household consumption 4. Not applicable	1. Producing few food	<input type="checkbox"/>	5. Services (home cleaning, printing ,work home ...)	<input type="checkbox"/>
		2. Dressmaking	<input type="checkbox"/>	6. Switch selling	<input type="checkbox"/>
		3. Handmade industry	<input type="checkbox"/>	7. Agriculture Producing	<input type="checkbox"/>
		4. Haircut	<input type="checkbox"/>	8. Other	<input type="checkbox"/>
I14	Total amount of money that a household need to satisfy its basic needs		Researcher impute in Shekel	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
I15	In general, is your household	1. Good 2. Middle] -> Skip to I18 3. Poor 4. Very poor			<input type="checkbox"/>

I16	Arrange three main reasons for poor Household	1. Jobs are not available 2. Smallness of income sources 3. Smallness of wages and salaries 4. Rising of living cost 5. Large of household size	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6. Illness of head of household 7. Dead of previous head of household 8. Loans 9. Other (specify).....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I17	Arrange three important methods help your household removal from poverty	1. Job creation 2. Increase Salaries and wages 3. Obtain assistance 4. Increase Household Income 5. Removal from loans	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6. Providing Houses 7. Family Planning 8. Other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I18	Is the Household have an agricultural land? (even it is owned ,free, rented)	1. Yes 2. No -> Skip to I22	<input type="checkbox"/>		
I19	What is the type of use for this land	<input type="checkbox"/>	1. For agriculture 2. For building 3. Unused land 4. Other \determine		
I20	What is the area of this land in general	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	How many dunum		
I21	What are the number of family members worked in the land cultivation during the last agricultural season?	males <input type="checkbox"/> <input type="checkbox"/> females <input type="checkbox"/> <input type="checkbox"/>	If the answer on 119 by 1		
I22	Is the household have an animal holding (have or benefit from the following types) 1.yes. 2.No.	1. Cattle 2. Sheep and Goats 3. Poultry	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	4. Horses and Mule 5. Beehives	<input type="checkbox"/> <input type="checkbox"/>
I23	What are the number of breaded heads and beehives at the visit time?	1. Cattle 2. Sheep and Goats 3. Poultry	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	4. Horses and Mule 5. Beehives	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

