

FIES FORM 1 (1994)
 NSCB Approval No. A0477-R071-HH
 Expires May 31, 1995

C O N F I D E N T I A L I T Y
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 be used for taxation, investigation or enforcement purposes.

Republic of the Philippines
 NATIONAL STATISTICS OFFICE
 Manila

1994 FAMILY INCOME AND EXPENDITURES SURVEY

PART I. IDENTIFICATION AND OTHER INFORMATION	
A. IDENTIFICATION:	
1. Province: _____	
2. City/Municipality: _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. Barangay: _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4. Urban/Rural	<input type="checkbox"/>
5. Barangay Stratum	<input type="checkbox"/> <input type="checkbox"/>
6. Household Control Number	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
7. Household Serial Number _____	
8. Household Schedule Number _____	
9. Address: _____	
[First Visit - JULY 1994]	[Second Visit - JANUARY 1995]
10. Name of Respondent _____	_____
11. Line Number of Respondent from ISH Form 2 . . . _____	_____
12. Time Started	_____
13. Time Finished	_____

CERTIFICATION:				
I hereby certify that the data gathered in this questionnaire were obtained/reviewed by me personally and in accordance with instructions.				
	Date Accomplished	Name & Signature of Interviewer	Date Reviewed	Name & Signature of Supervisor
[1st Visit- July 1994]	_____	_____	_____	_____
[2nd Visit- Jan. 1995]	_____	_____	_____	_____

PART II - EXPENDITURES AND OTHER DISBURSEMENTS

A. FOOD, ALCOHOLIC BEVERAGES AND TOBACCO

A1. FOOD CONSUMED AT HOME

1 1 1

1 1 2

A1.1 CEREALS AND CEREAL PREPARATIONS

(a) During the PERIOD SPECIFIED, did you or any member of your family consume cereals and cereal preparations?

1 - YES

2 - NO, GO TO NEXT PAGE (A1.2)

A1.1

1 - YES

2 - NO, GO TO NEXT PAGE (A1.2)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Amount (P)	Code	VALUE CONSUMED (P)		Quantity Consumed	Amount (P)	Code	VALUE CONSUMED (P)	
				Total	In cash/ on credit				Total	In cash/ on credit
1. Rice										
a. Special, 1st class (Magway, San Jose, Dinorah, Milagrosa, Peminad, etc.)			11111					11111		
b. Ordinary, commercial (P-3, P-16, P-12, P-60)			11112					11112		
c. NEA rice			11113					11113		
d. Other kinds, specify			11114					11114		
2. Corn			11120					11120		
Corn on the cob										
Whole grain										
Milled, corn grain										
3. Bread			11110					11110		
Loaf (baked bread)										
Panada										
Others, specify										
4. Biscuits			11140					11140		
Cookies, Crackers										
Others, specify										
5. Flour			11150					11150		
All purpose (white)										
Cake flour										
Others, specify										
6. Native cakes (Bibingka, Biko, Suman, Puto, etc.)			11160					11160		
7. Noodles (Bibon, Miki, Miso, Sotanghon, Mararoni, etc.)			11170					11170		
8. Other cereal preparations Infant cereal Ready-mixed noodle soup Cereal based junk foods (chippy, etc.) Others, specify			11180					11180		
TOTAL			11199					11199		
TOTAL CASH X 26			11100					11100		

COMPUTATIONS/
REMARKS:

A1.2 ROOTS AND TUBERS

1 2 1

1 2 2

(a) During the PERIOD SPECIFIED, did you or any member of your family consume roots and tubers and their preparations?

1 - YES 2 - NO, GO TO NEXT PAGE (A1.3)

A1.2 1 - YES 2 - NO, GO TO NEXT PAGE (A1.3)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Amount (P)	Code	VALUE CONSUMED (P)		
				Total	In cash/ on credit	In kind
1. Potato			11210	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Cassava			11220	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Sweet Potato (camote)			11230	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Gabi			11240	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Other roots and tubers including preparations			11250	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ubi.....						
Tugul.....						
Cassava cake.....						
Haleya.....						
Potato chips.....						
Others, specify _____						
TOTAL			11299	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMPUTATIONS/
REMARKS:

A1.3 FRUITS AND VEGETABLES

1 2 1

1 2 2

(a) During the PERIOD SPECIFIED, did you or any member of your family consume fruits and vegetables?

1 - YES 2 - NO, GO TO NEXT PAGE (A1.4)

A1.3 1 - YES 2 - NO, GO TO NEXT PAGE (A1.4)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Amount (P)	Code	VALUE CONSUMED (P)		
				Total	In cash/ on credit	In kind
1. Fresh fruits			11310			
Banana						
Citrus fruits						
Mango						
Papaya						
Others, specify						
2. Fresh vegetables						
a. Leafy vegetables			11321			
Cabbage						
Cassia tops, Kangkong						
Malunggay leaves						
Betchay						
Others, specify						
b. Fruit vegetables			11322			
Ampalaya						
Eggplant						
Okra						
Tomato						
Others, specify						
c. Green/dry beans and other legumes			11323			
Bacon beans/Habichuelas						
Mungo						
String beans						
Others, specify						
d. Other vegetables			11324			
Carrot						
Onion						
Others, specify						
3. Other crops			11330			
Coconut (Young or Mature)						
Peanut						
Others, specify						
4. Fruit preparations			11340			
Canned Pineapple						
Guava jelly						
Others, specify						
5. Vegetable preparations			11350			
Pickled Vegetable						
Tukwa, Tausi, Bago						
Others, specify						
6. Other preparations			11360			
Peanut butter						
Others, specify						
TOTAL	XXXXXX	XXXXXX	11399			
TOTAL CASH X 26	XXXXXX	XXXXXX	11300	XXXXXXXX		XXXXXX

A1.5 DAIRY PRODUCTS AND EGGS

1 4 1

1 4 2

(a) During the PERIOD SPECIFIED, did you or any member of your family consume dairy products and eggs?

1 - YES 2 - NO, GO TO NEXT PAGE (A1.6)

A1.5 1 - YES 2 - NO, GO TO NEXT PAGE (A1.6)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Amount (P)	Code	VALUE CONSUMED (P)	
				Total	In cash/ on credit
1. Milk					
a. Condensed (sweetened)			11511	<input type="checkbox"/>	<input type="checkbox"/>
b. Evaporated			11512	<input type="checkbox"/>	<input type="checkbox"/>
c. Powdered			11513	<input type="checkbox"/>	<input type="checkbox"/>
d. Fresh			11514	<input type="checkbox"/>	<input type="checkbox"/>
2. Ice cream			11520	<input type="checkbox"/>	<input type="checkbox"/>
3. Other dairy products Butter Cheese Others, specify			11530	<input type="checkbox"/>	<input type="checkbox"/>
4. Eggs					
a. Fresh eggs Chicken Others, specify			11541	<input type="checkbox"/>	<input type="checkbox"/>
b. Processed eggs Bakul Salted eggs Others, specify			11542	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL			11599	<input type="checkbox"/>	<input type="checkbox"/>

COMPUTATIONS/
REMARKS:

COMPUTATIONS/
REMARKS:

A1.6 FISH AND MARINE PRODUCTS

1 5 1

1 5 2

(a) During the PERIOD SPECIFIED, did you or any member of your family consume fish and marine products?

1 - YES 2 - NO, GO TO NEXT PAGE (A1.7)

A1.6 1 - YES 2 - NO, GO TO NEXT PAGE (A1.7)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity		V A L U E		C O N S U M E D (P)	
	Consumed (P)	Amount	Code	Total	In cash/ on credit	In kind
1. Fresh fish, shells and others			11610		<input type="checkbox"/>	<input type="checkbox"/>
Anchovies (dilis).....						
Bangus.....						
Galunggong.....						
Tilapia, Plapia, Gurami...						
Shrimp.....						
Squid.....						
Shells (tahong,tulya,etc.)						
Others, specify _____						
2. Processed fish			11621		<input type="checkbox"/>	<input type="checkbox"/>
a. Canned fish						
Sardines, mackerel.....						
Others, specify _____						
b. Dried/smoked fish			11622		<input type="checkbox"/>	<input type="checkbox"/>
Daing, tuyo.....						
Tinapa.....						
Others, specify _____						
c. Salted fish			11623		<input type="checkbox"/>	<input type="checkbox"/>
Bagoong.....						
Others, specify _____						
3. Other processed marine products			11630		<input type="checkbox"/>	<input type="checkbox"/>
Canned squid.....						
Others, specify _____						
TOTAL.....			11699		<input type="checkbox"/>	<input type="checkbox"/>

A1.7 COFFEE, COCOA AND TEA

1 5 1

(a) During the PERIOD SPECIFIED, did you or any member of your family consume any coffee, cocoa and tea?

1 - YES

2 - NO, GO TO NEXT PAGE (A1.8)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

Item	Quantity Consumed	Code	VALUE CONSUMED (P)	
			Total	In cash/ In kind on credit
1. Coffee				
a. Processed (instant coffee)		11711		
b. Coffee beans		11712		
2. Cocoa				
a. Powdered tonic drinks (Milo, Ovaltine, etc.)		11721		
b. Processed cocoa (Ricoa cocoa, tablea, etc.)		11722		
c. Cocoa beans		11723		
3. Tea				
a. Processed tea (Lipton, Black cat, etc.)		11731		
b. Tea leaves		11732		
TOTAL		11799		

1 5 2

A1.7

1 - YES

2 - NO, GO TO NEXT PAGE (A1.8)

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Code	VALUE CONSUMED (P)	
			Total	In cash/ In kind on credit
1. Coffee				
a. Processed (instant coffee)		11711		
b. Coffee beans		11712		
2. Cocoa				
a. Powdered tonic drinks (Milo, Ovaltine, etc.)		11721		
b. Processed cocoa (Ricoa cocoa, tablea, etc.)		11722		
c. Cocoa beans		11723		
3. Tea				
a. Processed tea (Lipton, Black cat, etc.)		11731		
b. Tea leaves		11732		
TOTAL		11799		

COMPUTATIONS/
REMARKS:

COMPUTATIONS/
REMARKS:

A1.8 NON-ALCOHOLIC BEVERAGES

(a) During the PERIOD SPECIFIED, did you or any member of your family consume any non-alcoholic beverages such as carbonated drinks, fruit juices, non-carbonated drinks and others?

1 6 1

1 6 2

1 - YES

2 - NO, GO TO NEXT PAGE (A1.9)

A1.8

1 - YES

2 - NO, GO TO NEXT PAGE (A1.9)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Amount (P)	Code	V A L U E C O N S U M E D (P)		
				Total	In cash/ on credit	In kind
1. Soft drinks			11810	___	<input type="checkbox"/>	<input type="checkbox"/>
2. Fruit juices and non-carbonated drinks			11820	___	<input type="checkbox"/>	<input type="checkbox"/>
Pineapple juice						
Orange juice						
Other kinds, specify						
1. Other forms (types) of beverages (ice candy, ice drop, ice buko, etc.)			11830	___	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL			11899	___	<input type="checkbox"/>	<input type="checkbox"/>

A1.9 FOOD NOT ELSEWHERE CLASSIFIED

1 6 1

1 6 2

(a) During the PERIOD SPECIFIED, did you or any member of your family consume any food not elsewhere classified such as sugar and sugar products, cooking oil, margarine, sauces, salt, other spices and seasoning, prepared meals bought outside and eaten at home, and others?

1 - YES 2 - NO, GO TO NEXT PAGE (A2)

A1.9 1 - YES 2 - NO, GO TO NEXT PAGE (A2)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed (P)	Amount Consumed (P)	Code	VALUE CONSUMED (P)		Quantity Consumed (P)	Amount Consumed (P)	Code	VALUE CONSUMED (P)	
				Total	In cash/In kind				Total	In cash/In kind
1. Sugar										
Brown			11910					11910		
Refined										
Other, specify										
2. Sugar products										
Candies			11920					11920		
Chocolates										
Other, specify										
3. Cooking oil			11930					11930		
4. Margarine			11940					11940		
5. Sauces			11950					11950		
Mayonnaise										
Catup										
Togo										
Batin										
Other, specify										
6. Salt			11960					11960		
(Iodized, Table salt)										
7. Other spices & seasoning			11970					11970		
Black Pepper										
Garlic										
Ginger										
Zestain										
Zinegar										
Other, specify										
8. Prepared meals bought outside and eaten at home			11980					11980		
9. Other food not elsewhere classified (ice, honey, etc.)			11990					11990		
TOTAL			11999					11999		

COMPUTATIONS/
REMARKS:

COMPUTATIONS/
REMARKS:

A2. FOOD REGULARLY CONSUMED OUTSIDE THE HOME

1 7 1

1 7 2

(a) During the PERIOD SPECIFIED, did you or any member of your family regularly consume any food outside the home excluding home-prepared foods?

1 - YES 2 - NO, GO TO NEXT PAGE (A3)

A2 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A3)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	Quantity Consumed	Code	V A L U E Total	C O N S U M E D (P)	
				In cash/ on credit	In kind
1. Meals at school, place of work, restaurants, etc.		12010	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. Merienda or snacks, coffee, softdrinks, etc.		12020	_____	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL		12099	_____	<input type="checkbox"/>	<input type="checkbox"/>

Quantity Consumed	Code	V A L U E Total	C O N S U M E D (P)	
			In cash/ on credit	In kind
	12010	_____	<input type="checkbox"/>	<input type="checkbox"/>
	12020	_____	<input type="checkbox"/>	<input type="checkbox"/>
	12099	_____	<input type="checkbox"/>	<input type="checkbox"/>

(c) How many family members are regularly eating outside the home?

(c)

COMPUTATIONS/
REMARKS:

A3. ALCOHOLIC BEVERAGES

1 8 1

(a) During the PERIOD SPECIFIED, did you or any member of your family consume beer, wine or liquor?

1 - YES 2 - NO, GO TO A4 BELOW

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

Item	Quantity Consumed	Code	VALUE CONSUMED (P)	
			Total	In cash/ In kind on credit
1. Beer		13010	<input type="checkbox"/>	<input type="checkbox"/>
2. Wine (Tuba, Basil, etc.)		13020	<input type="checkbox"/>	<input type="checkbox"/>
1. Liquor (Lambanog, Brandy, Whisky, rum, etc.)		13030	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL		13099	<input type="checkbox"/>	<input type="checkbox"/>

1 8 2

A3. 1 - YES 2 - NO, GO TO A4 BELOW

[JULY - DECEMBER 1994]

Quantity Consumed	Code	VALUE CONSUMED (P)	
		Total	In cash/ In kind on credit
	13010	<input type="checkbox"/>	<input type="checkbox"/>
	13020	<input type="checkbox"/>	<input type="checkbox"/>
	13030	<input type="checkbox"/>	<input type="checkbox"/>
	13099	<input type="checkbox"/>	<input type="checkbox"/>

A4. TOBACCO

1 8 1

(a) During the PERIOD SPECIFIED, did you or any member of your family consume cigarettes, cigars or other tobacco?

1 - YES 2 - NO, GO TO NEXT PAGE (A5)

(b) On the AVERAGE, how much is your WEEKLY consumption of the following?

[JANUARY - JUNE 1994]

Item	Quantity Consumed	Code	VALUE CONSUMED (P)	
			Total	In cash/ In kind on credit
1. Cigarettes		14010	<input type="checkbox"/>	<input type="checkbox"/>
2. Cigars		14020	<input type="checkbox"/>	<input type="checkbox"/>
1. Others (Betel nut, leaf and lime, chewing tobacco, leaf tobacco, etc.)		14030	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL		14099	<input type="checkbox"/>	<input type="checkbox"/>

1 8 2

1 - YES 2 - NO, GO TO NEXT PAGE (A5)

[JULY - DECEMBER 1994]

Quantity Consumed	Code	VALUE CONSUMED (P)	
		Total	In cash/ In kind on credit
	14010	<input type="checkbox"/>	<input type="checkbox"/>
	14020	<input type="checkbox"/>	<input type="checkbox"/>
	14030	<input type="checkbox"/>	<input type="checkbox"/>
	14099	<input type="checkbox"/>	<input type="checkbox"/>

A5. FOOD ITEMS, ALCOHOLIC BEVERAGES AND TOBACCO RECEIVED AS GIFTS

191

192

During the PERIOD SPECIFIED, did you or any member of your family consume any food items, alcoholic beverages or tobacco which were received as gifts?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

1 - YES 2 - NO, GO TO PAGE 16 (B1)

A5. 1 - YES 2 - NO, GO TO PAGE 16 (B1)

Item	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
	Quantity	Code	Value (P)	Quantity	Code	Value (P)
1. Cereals and cereal preparations		15001	-----		15001	-----
a. Rice, special, first class		11111	-----		11111	-----
b. Rice, ordinary		11112	-----		11112	-----
c. Other rice (glutinous rice, etc.)		11114	-----		11114	-----
d. Corn		11120	-----		11120	-----
e. Bread, Native cakes		11130	-----		11130	-----
f. Others, specify _____			-----			-----
2. Roots and tubers		15002	-----		15002	-----
a. Potato		11210	-----		11210	-----
b. Sweet Potato		11230	-----		11230	-----
c. Others, specify _____			-----			-----
3. Fruits and Vegetables		15003	-----		15003	-----
a. Fresh fruits		11310	-----		11310	-----
b. Fresh vegetables		11320	-----		11320	-----
c. Fruit preparation		11340	-----		11340	-----
d. Others, specify _____			-----			-----
4. Meat and meat preparations		15004	-----		15004	-----
a. Fresh chicken		11410	-----		11410	-----
b. Fresh beef, fresh pork		11420	-----		11420	-----
c. Canned meat		11451	-----		11451	-----
d. Others, specify _____			-----			-----
5. Dairy products and eggs		15005	-----		15005	-----
a. Ice cream		11520	-----		11520	-----
b. Fresh chicken eggs		11541	-----		11541	-----
c. Others, specify _____			-----			-----

A5. FOOD ITEMS, ALCOHOLIC BEVERAGES AND TOBACCO RECEIVED AS GIFTS (continued)

2 0 1

2 0 2

COMPUTATIONS/
REMARKS:

[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]			
Item	Quantity	Code	Value (P)	Quantity	Code	Value (P)	
6. Fish and marine products		15006	-----		15006	-----	
a. Fresh fish, shells, and others		11610	-----		11610	-----	
b. Canned fish		11621	-----		11621	-----	
c. Dried/smoked fish		11622	-----		11622	-----	
d. Others, specify _____			-----			-----	
7. Coffee, cocoa, tea		15007	-----		15007	-----	
a. Processed (instant) coffee		11711	-----		11711	-----	
b. Coffee beans		11712	-----		11712	-----	
c. Processed tea		11731	-----		11731	-----	
d. Others, specify _____			-----			-----	
8. Non-alcoholic beverages		15008	-----		15008	-----	
a. Soft drinks		11810	-----		11810	-----	
b. Fruit juices & non-carbonated drinks		11820	-----		11820	-----	
c. Others, specify _____			-----			-----	
9. Food not elsewhere classified		15009	-----		15009	-----	
a. Sugar		11910	-----		11910	-----	
b. Sugar products		11920	-----		11920	-----	
c. Prepared meals		11980	-----		11980	-----	
d. Others, specify _____			-----			-----	
10. Food regularly eaten outside the home		15010	-----		15010	-----	
SUB - TOTAL		15100	-----		15100	-----	
11. Alcoholic beverages		15200	-----		15200	-----	
a. Beer		13010	-----		13010	-----	
b. Wine		13020	-----		13020	-----	
c. Liquor		13030	-----		13030	-----	
12. Tobacco		15300	-----		15300	-----	
a. Cigarettes		14010	-----		14010	-----	
b. Others, specify _____			-----			-----	

COMPUTATIONS/
REMARKS:

B. FUEL, LIGHT AND WATER, TRANSPORTATION AND COMMUNICATION, HOUSEHOLD OPERATIONS

B1. FUEL, LIGHT AND WATER

2 1 1

2 1 2

(a) During the PAST MONTH, did you or any member of your family consume fuel, light and water?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO NEXT PAGE (B2)

B1(a) 1 - YES 2 - NO, GO TO NEXT PAGE (B2)

Item	Quantity Consumed	Code	VALUE CONSUMED		
			Total	In cash/ on credit	In kind
1. Charcoal		21110	_____	_____	_____
2. Firewood		21120	_____	_____	_____
3. Liquefied Petroleum Gas (LPG)		21130	_____	_____	_____
4. Petroleum products (Kerosene/gaas, etc.)		21140	_____	_____	_____
5. Electricity		21150	_____	_____	_____
6. Candle, oils, etc.		21160	_____	_____	_____
7. Water		21170	_____	_____	_____
8. Others, specify		21180	_____	_____	_____
TOTAL		21199	_____	_____	_____

Quantity Consumed	Code	VALUE CONSUMED		
		Total	In cash/ on credit	In kind
	21110	_____	_____	_____
	21120	_____	_____	_____
	21130	_____	_____	_____
	21140	_____	_____	_____
	21150	_____	_____	_____
	21160	_____	_____	_____
	21170	_____	_____	_____
	21180	_____	_____	_____
	21199	_____	_____	_____

(b) Were any of the above received as gifts?

2 2 1

2 2 2

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO NEXT PAGE (B2)

B1(b) 1 - YES 2 - NO, GO TO NEXT PAGE (B2)

Item	Quantity	Code	Value
1. Charcoal		21210	_____
2. Firewood		21220	_____
3. Liquefied Petroleum Gas (LPG)		21230	_____
4. Petroleum products (Kerosene/gaas, etc.)		21240	_____
5. Electricity		21250	_____
6. Candle, oils, etc.		21260	_____
7. Water		21270	_____
8. Others, specify		21280	_____
TOTAL		21299	_____

Quantity	Code	Value
	21210	_____
	21220	_____
	21230	_____
	21240	_____
	21250	_____
	21260	_____
	21270	_____
	21280	_____
	21299	_____

B2. TRANSPORTATION AND COMMUNICATION

2 3 1

2 3 2

(a) During the PAST MONTH, did you or any member of your family pay for transportation and communication services in the form of land transport fares, air transport fares, water transport fares, telephone bills, postal services or incur expenses on personal transport, telegrams, radiograms and other transportation and communication expenses?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO NEXT PAGE (B2(b))

B2(a) 1 - YES 2 - NO, GO TO NEXT PAGE (B2(b))

Item	Frequency/ Quantity	Amount (P)	Code	Total	Frequency/ Quantity	Amount (P)	Code	Total
1. Land transport fare			22110				22110	
Bus								
Jeepney								
Tricycle								
Others, specify								
2. Air transport fare			22120				22120	
Domestic								
International								
3. Water transport fare			22130				22130	
4. Personal transport expenses								
a. Gasoline/diesel			22141				22141	
b. Maintenance and repair			22142				22142	
Chassis lubrication								
Motor tune-up								
Oil change and greasing								
Others, specify								
c. Driver's salary			22143				22143	
d. Others			22144				22144	
Lubricants								
Car battery								
Tires/tubes								
Car accessories								
Others, specify								
5. Telephone bills, etc.			22150				22150	
Local calls								
Long distance calls								
6. Postage stamps			22160				22160	
Domestic mail								
Foreign mail								
7. Telegrams, etc.			22170				22170	
8. Other transportation and communication expenses			22180				22180	
Moving fee								
Driving lesson								
Fees for animal used for transportation								
Messenger fees								
Others, specify								
TOTAL			22199				22199	
			22100				22100	

COMPUTATIONS/
REMARKS:

B2. TRANSPORTATION AND COMMUNICATION

2 4 1

2 4 2

(b) During the PAST MONTH, did you or any member of your family receive as gifts services and materials for transportation and communication?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO NEXT PAGE (B3)

B2 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (B3)

Item	Frequency/ Quantity	Amount (P)	Code	Total
1. Land transport fare			22210	
Bus				
Jeepney				
Tricycle				
Others, specify				
2. Air transport fare			22220	
Domestic				
International				
3. Water transport fare			22230	
4. Personal transport expenses			22241	
a. Gasoline/diesel				
b. Maintenance and repair			22242	
Chassis lubrication				
Motor tune-up				
Oil change and grease				
Others, specify				
c. Driver's salary			22243	
d. Others			22244	
Lubricants				
Car battery				
Tires/tubes				
Car accessories				
Others, specify				
5. Telephone bills, etc.			22250	
Local calls				
Long distance calls				
6. Postage stamps			22260	
Domestic mail				
Foreign mail				
7. Telegrams, etc.			22270	
8. Other transportation and communication expenses			22280	
Moving fee				
Driving lesson				
Fees for animal used for transportation				
Messengerial fees				
Others, specify				
TOTAL			22299	

Item	Frequency/ Quantity	Amount (P)	Code	Total
1. Land transport fare			22210	
Bus				
Jeepney				
Tricycle				
Others, specify				
2. Air transport fare			22220	
Domestic				
International				
3. Water transport fare			22230	
4. Personal transport expenses			22241	
a. Gasoline/diesel				
b. Maintenance and repair			22242	
Chassis lubrication				
Motor tune-up				
Oil change and grease				
Others, specify				
c. Driver's salary			22243	
d. Others			22244	
Lubricants				
Car battery				
Tires/tubes				
Car accessories				
Others, specify				
5. Telephone bills, etc.			22250	
Local calls				
Long distance calls				
6. Postage stamps			22260	
Domestic mail				
Foreign mail				
7. Telegrams, etc.			22270	
8. Other transportation and communication expenses			22280	
Moving fee				
Driving lesson				
Fees for animal used for transportation				
Messengerial fees				
Others, specify				
TOTAL			22299	

TOTAL 22299

B3. HOUSEHOLD OPERATION

2 5 1

2 5 2

(a) During the PAST MONTH, did you or any member of your family consume materials for household operations?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO B3(b) BELOW

B3 (a) 1 - YES 2 - NO, GO TO B3(b) BELOW

Item	Quantity Consumed	Code	V A L U E C O N S U M E D (P)		
			Total	In cash/ on credit	Received as gifts
1. Laundry soap and detergent		23110	_____	_____	_____
2. Starch		23120	_____	_____	_____
3. Floor wax		23130	_____	_____	_____
4. Insect spray/Rat and Mosquito killer/coil		23140	_____	_____	_____
5. Cleanser/ Scouring powder		23150	_____	_____	_____
6. Air freshener/ deodorizer		23160	_____	_____	_____
7. Fluorescent & incandescent bulbs, etc.		23170	_____	_____	_____
8. Others (matches, brooms, husks, battery, naphthalene balls, etc.)		23180	_____	_____	_____
TOTAL		23199	_____	_____	_____

Item	Quantity Consumed	Code	V A L U E C O N S U M E D (P)		
			Total	In cash/ on credit	Received as gifts
1. Laundry soap and detergent		23110	_____	_____	_____
2. Starch		23120	_____	_____	_____
3. Floor wax		23130	_____	_____	_____
4. Insect spray/Rat and Mosquito killer/coil		23140	_____	_____	_____
5. Cleanser/ Scouring powder		23150	_____	_____	_____
6. Air freshener/ deodorizer		23160	_____	_____	_____
7. Fluorescent & incandescent bulbs, etc.		23170	_____	_____	_____
8. Others (matches, brooms, husks, battery, naphthalene balls, etc.)		23180	_____	_____	_____
TOTAL		23199	_____	_____	_____

(b) During the PAST MONTH, did you or any member of your family avail of laundry, dry cleaning and domestic services?

2 6 1

[FIRST VISIT - JULY 1994]

2 6 2

[SECOND VISIT - JANUARY 1995]

1 - YES 2 - NO, GO TO NEXT PAGE (C1)

B3 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (C1)

Item	Code	V A L U E O F S E R V I C E S (P)		
		Total	In cash/ on credit	Received free
1. Laundry services	23210	_____	_____	_____
2. Dry clean services	23220	_____	_____	_____
3. Domestic services		_____	_____	_____
a. Maid/boy	23231	_____	_____	_____
b. Gardener	23232	_____	_____	_____
c. Others	23233	_____	_____	_____
4. Repair and maintenance of household appliances	23240	_____	_____	_____
TOTAL	23299	_____	_____	_____

Item	Code	V A L U E O F S E R V I C E S (P)		
		Total	In cash/ on credit	Received free
1. Laundry services	23210	_____	_____	_____
2. Dry clean services	23220	_____	_____	_____
3. Domestic services		_____	_____	_____
a. Maid/boy	23231	_____	_____	_____
b. Gardener	23232	_____	_____	_____
c. Others	23233	_____	_____	_____
4. Repair and maintenance of household appliances	23240	_____	_____	_____
TOTAL	23299	_____	_____	_____

COMPUTATIONS/
REMARKS:

C. PERSONAL CARE AND EFFECTS, CLOTHING, FOOTWEAR AND OTHER WEAR

C1. PERSONAL CARE AND EFFECTS

271

272

(a) During the PAST MONTH, did you or any member of your family purchase in cash or on credit materials for personal care and effects such as beauty aids and toilet articles, personal effects, or pay for beauty parlor and barbershop services, and other personal care and services?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

Item	1 - YES			2 - NO, GO TO NEXT PAGE (C1(b))		
	Amount (P)	Code	Total Value (P)	C1(a)	1 - YES	2 - NO, GO TO NEXT PAGE (C1(b))
1. Beauty aids and toilet articles						
Cleansing cream, astringent...		31110				
Body deodorant.....						
Lotion, baby oil.....						
Make-up, cosmetics, perfumes..						
Powder.....						
Razor blade.....						
Toilet/bath soap.....						
Toilet and tissue paper.....						
Toothpaste.....						
Sanitary napkin.....						
Shampoo, conditioner.....						
Others, specify.....						
2. Personal effects						
Fine and costume jewelry.....		31120				
Handbag, wallet, etc.....						
Wristwatch.....						
Umbrella.....						
Others, specify.....						
3. Beauty parlor services						
Cold wave/perm.....		31130				
Haircut/trim.....						
Manicure/pedicure.....						
Others, specify.....						
4. Barbershop services (Haircut, shave, etc.)						
.....		31140				
5. Other personal care and services (sauna bath, aerobics, etc.)						
.....		31150				
TOTAL.....		31199				

C1. PERSONAL CARE AND EFFECTS (continued)

2 7 1

2 7 2

(b) During the PAST MONTH, did you or any member of your family receive as gifts materials and services for personal care and effects?

[FIRST VISIT - JULY 1994]

[SECOND VISIT - JANUARY 1995]

Item	1 - YES 2 - NO, GO TO NEXT PAGE (C2)			C1 (b)	1 - YES 2 - NO, GO TO NEXT PAGE (C2)		
	Amount (P)	Code	Total Value (P)		Amount (P)	Code	Total Value (P)
1. Beauty aids and toilet articles		31210	_____		31210	_____	
Cleansing cream, astringent...							
Body deodorant.....							
Lotion, baby oil.....							
Make-up, cosmetics, perfumes..							
Powder.....							
Razor blade.....							
Toilet/bath soap.....							
Toilet and tissue paper.....							
Toothpaste.....							
Sanitary napkin.....							
Shampoo, conditioner.....							
Others, specify.....							
2. Personal effects		31220	_____		31220	_____	
Fine and costume jewelry.....							
Handbag, wallet, etc.....							
Wristwatch.....							
Umbrella.....							
Others, specify.....							
3. Beauty parlor services		31230	_____		31230	_____	
Cold wave/perm.....							
Haircut/trim.....							
Manicure/pedicure.....							
Others, specify.....							
4. Barbershop services (Haircut, shave, etc.)		31240	_____		31240	_____	
5. Other personal care and services (sauna bath, aerobics, etc.)		31250	_____		31250	_____	
TOTAL.....		31299	-----		31299	-----	

C2. CLOTHING, FOOTWEAR AND OTHER WEAR (continued)

281

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (C2 (b))

Item	Quantity	Amount	Code	Total Value (P)
2. Footwear				
a. Men (10 years and over)			32121	
Leather/Synthetic shoes...				
Rubber shoes				
Slippers				
Others, specify				
b. Women (10 years and over)			32122	
Leather/Synthetic shoes ..				
Rubber shoes				
Slippers				
Others, specify				
c. Boys (below 10 years old)			32123	
Leather/Synthetic shoes ..				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
d. Girls (below 10 years old)			32124	
Leather/Synthetic shoes...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
1. Sewing materials (textiles, fabrics, etc.)			32130	
4. Sewing accessories (threads, needles, buttons, zippers, etc.)			32140	
5. Service fees			32150	
Repair of footwear				
Dressmaking				
Tailoring				
Others, specify				
TOTAL			32100	

282

[JULY - DECEMBER 1994]

C2 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (C2 (b))

Item	Quantity	Amount	Code	Total Value (P)
a. Men (10 years and over)			32121	
Leather/Synthetic shoes...				
Rubber shoes				
Slippers				
Others, specify				
b. Women (10 years and over)			32122	
Leather/Synthetic shoes ..				
Rubber shoes				
Slippers				
Others, specify				
c. Boys (below 10 years old)			32123	
Leather/Synthetic shoes ..				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
d. Girls (below 10 years old)			32124	
Leather/Synthetic shoes...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
1. Sewing materials (textiles, fabrics, etc.)			32130	
4. Sewing accessories (threads, needles, buttons, zippers, etc.)			32140	
5. Service fees			32150	
Repair of footwear				
Dressmaking				
Tailoring				
Others, specify				
TOTAL			32100	

C2. CLOTHING, FOOTWEAR AND OTHER WEAR (continued)

291

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (D1)

Item	Quantity	Amount	Code	Total Value (P)
2. Footwear				
a. Men (10 years and over)			32221	_____
Leather/Synthetic shoes...				
Rubber shoes				
Slippers				
Others, specify				
b. Women (10 years and over)			32222	_____
Leather/Synthetic shoes ..				
Rubber shoes				
Slippers				
Others, specify				
c. Boys (below 10 years old)			32223	_____
Leather/Synthetic shoes ...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
d. Girls (below 10 years old)			32224	_____
Leather/Synthetic shoes ...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
3. Sewing materials (textiles, fabrics, etc.)			32230	_____
4. Sewing accessories (threads, needles, buttons, zippers, etc.)			32240	_____
5. Service fees			32250	_____
Repair of footwear				
Dressmaking				
Tailoring				
Others, specify				
TOTAL			32200	-----

292

[JULY - DECEMBER 1994]

C2 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (D1)

Item	Quantity	Amount	Code	Total Value (P)
a. Men (10 years and over)			32221	_____
Leather/Synthetic shoes...				
Rubber shoes				
Slippers				
Others, specify				
b. Women (10 years and over)			32222	_____
Leather/Synthetic shoes ..				
Rubber shoes				
Slippers				
Others, specify				
c. Boys (below 10 years old)			32223	_____
Leather/Synthetic shoes ...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
d. Girls (below 10 years old)			32224	_____
Leather/Synthetic shoes ...				
Rubber shoes/Sneakers				
Slippers				
Others, specify				
3. Sewing materials (textiles, fabrics, etc.)			32230	_____
4. Sewing accessories (threads, needles, buttons, zippers, etc.)			32240	_____
5. Service fees			32250	_____
Repair of footwear				
Dressmaking				
Tailoring				
Others, specify				
TOTAL			32200	-----

COMPUTATIONS/
REMARKS:

D. EDUCATION, RECREATION AND MEDICAL CARE

D1. EDUCATION

3 0 1

3 0 2

(a) During the PERIOD SPECIFIED, did you or any member of your family pay for education fees, give allowance or support to family members studying away from home, purchase in cash or on credit any educational materials and school supplies and other educational supplies?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YES 2 - NO, GO TO D1 (b) BELOW				D1 (a)	1 - YES 2 - NO, GO TO D1 (b) BELOW			
	Quantity	Amount (P)	Code	Total Value (P)		Quantity	Amount (P)	Code	Total Value (P)
1. Education fees (matriculation, tuition fees, etc.)			41110				41110		
Public									
Private									
2. Allowance for family member studying away from home			41120				41120		
3. Books (Textbooks, dictionaries, work books, etc.)			41130				41130		
4. School supplies			41140				41140		
Notebooks									
Pencils, ballpens									
Bond paper, pad paper									
Others, specify									
5. Other educational supplies			41150				41150		
Newspaper, magazines									
Comics, pocketbooks									
Others, specify									
TOTAL			41100			XXXXXXXX	41100		

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts materials, fees and services for education?

3 0 1

[JANUARY - JUNE 1994]

3 0 2

[JULY - DECEMBER 1994]

Item	1 - YES 2 - NO, GO TO NEXT PAGE (D2)				D1 (b)	1 - YES 2 - NO, GO TO NEXT PAGE (D2)			
	Quantity	Amount (P)	Code	Total Value (P)		Quantity	Amount (P)	Code	Total Value (P)
1. Education fees (matriculation, tuition fees, etc.)			41210				41210		
Public									
Private									
2. Allowance for family member studying away from home			41220				41220		
3. Books (Textbooks, dictionaries, work books, etc.)			41230				41230		
4. School supplies			41240				41240		
Notebooks									
Pencils, ballpens									
Bond paper, pad paper									
Others, specify									
5. Other educational supplies			41250				41250		
Newspaper, magazines									
Comics, pocketbooks									
Others, specify									
TOTAL			41200			XXXXXXXX	41200		

COMPUTATIONS/
REMARKS:

D2. RECREATION

3 1 1

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase in cash or on credit recreational goods and supplies, musical instruments, pay for admission tickets to movies, shows, cockfights, races, boxing, basketball, dances, fairs, and others?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE [D2(b)]

Item	Quantity	Amount (P)	Code	Total Value (P)
1. Recreational goods and supplies			42110	_____
Children's bicycle, and playcars				
Dolls and other toys				
Balls, golf clubs, rackets				
Mahjong sets, playing cards				
Chess sets				
Video and cassette tapes and records				
2. Musical instruments (Piano, organ, guitar, violin, etc.)			42120	_____
3. Admission tickets to movies/shows			42130	_____
4. Admission fees to cockfights and races			42140	_____
5. Other recreational expenses			42150	_____
Rental of video tapes				
Admission fees for basketball, boxing, circuses and fairs				
Dances, discos, nightclubs and beerhouses				
Bowling, billiard and pools ..				
Pets, food for pets				
Others, specify _____				
TOTAL			42100	-----

3 1 2

[JULY - DECEMBER 1994]

D2 (a) 1 - YES 2 - NO, GO TO NEXT PAGE [D2(b)]

Item	Quantity	Amount (P)	Code	Total Value (P)
1. Recreational goods and supplies			42110	_____
Children's bicycle, and playcars				
Dolls and other toys				
Balls, golf clubs, rackets				
Mahjong sets, playing cards				
Chess sets				
Video and cassette tapes and records				
2. Musical instruments (Piano, organ, guitar, violin, etc.)			42120	_____
3. Admission tickets to movies/shows			42130	_____
4. Admission fees to cockfights and races			42140	_____
5. Other recreational expenses			42150	_____
Rental of video tapes				
Admission fees for basketball, boxing, circuses and fairs				
Dances, discos, nightclubs and beerhouses				
Bowling, billiard and pools ..				
Pets, food for pets				
Others, specify _____				
TOTAL			42100	-----

D2. RECREATION

3 1 1

3 1 2

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts recreational goods and admission tickets for recreation?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YRS 2 - NO, GO TO NEXT PAGE (D3)				D2 (b)	1 - YRS 2 - NO, GO TO NEXT PAGE (D3)			
	Quantity	Amount (P)	Code	Total Value (P)		Quantity	Amount (P)	Code	Total Value (P)
1. Recreational goods and supplies			42210				42210		
Children's bicycle, and playern									
Dolls and other toys									
Balls, golf clubs, rackets									
Mahjong sets, playing cards									
Chess sets									
Video and cassette tapes and records									
2. Musical instruments (Piano, organ, guitar, violin, etc.)			42220				42220		
3. Admission tickets to movies/shows			42230				42230		
4. Admission fees to cockfights and races			42240				42240		
5. Other recreational expenses			42250				42250		
Rental of video tapes									
Admission fees for basketball, boxing, circuses and fairs									
Dances, discos, nightclubs and beerhouses									
Bowling, billiard and pools									
Pets, food for pets									
Others, specify									
TOTAL			42200				42200		

D3. MEDICAL CARE

3 2 1

3 2 2

COMPUTATIONS/
REMARKS:

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase in cash or on credit any health care goods such as drugs and medicines for first aid, common ailments, serious illnesses or childbirth; pay for hospital room charges, medical charges, dental charges, other medical goods, and other medical and health services?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YES		2 - NO, GO TO NEXT PAGE [D3(b)]		D3 (a)	1 - YES		2 - NO, GO TO NEXT PAGE [D3(b)]	
	Quantity	Amount (P)	Code	Total Value (P)		Quantity	Amount (P)	Code	Total Value (P)
1. Drugs and medicines			43110				43110		
Antibiotic									
Antacid									
Analgesic									
Expectorant									
Vitamins									
Others, specify									
2. Hospital room charges			43120				43120		
Public									
Private									
3. Medical charges (service fees for doctors, nurses, midwives etc.)			43130				43130		
4. Dental charges (service fees for dentists, etc.)			43140				43140		
5. Other medical goods and supplies			43150				43150		
Alcohol									
Bandage, plaster, adhesives									
Cold rub									
Eyeglasses									
Others, specify									
6. Other medical and health services (service fees for herbalists, faith healers, hilotas, etc.)			43160				43160		
TOTAL			43100				43100		

COMPUTATIONS/
REMARKS:

D3. MEDICAL CARE

3 2 1

3 2 2

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts health care goods and free medical health services?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YES		2 - NO, GO TO NEXT PAGE (E1)		Code	Total Value (P)	D3 (b)	1 - YES		2 - NO, GO TO NEXT PAGE (E1)		
	Quantity	Amount (P)	Quantity	Amount (P)				Quantity	Amount (P)	Quantity	Amount (P)	
1. Drugs and medicines					43210	-----					43210	-----
Antibiotic												
Antacid												
Analgic												
Expectorant												
Vitamins												
Others, specify												
2. Hospital room charges					43220	-----					43220	-----
Public												
Private												
3. Medical charges (service fees for doctors, nurses, midwives, etc.)					43230	-----					43230	-----
4. Dental charges (service fees for dentists, etc.)					43240	-----					43240	-----
5. Other medical goods and supplies					43250	-----					43250	-----
Alcohol												
Bandage, plaster, adhesives												
Cold rub												
Eyeglasses												
Others, specify												
6. Other medical and health services (service fees for herbalists, faith healers, hilotas, etc.)					43260	-----					43260	-----
TOTAL					43200	-----					43200	-----

E. FURNISHINGS AND EQUIPMENT

COMPUTATIONS/
REMARKS:

E1. NON-DURABLE FURNISHINGS

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase in cash or on credit non-durable furnishings such as utensils and accessories, household linen and furnishings?

3 3 1 [JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO E1 (b) BELOW

Item	Quantity	Amount (P)	Code	Total Value (P)
1. Utensils and accessories			51110	_____
Dinnerware, glassware, and silverware.....				
Kitchen utensils/knives....				
Others, specify				
2. Household linen and furnishings			51120	_____
Mosquito net				
Pillow, pillow case				
Redsheets, blankets				
Towels				
Others, specify				
3. Other household furnishings			51130	_____
Flower pots, vases				
Decor, figurines				
Others, specify				
TOTAL			51100	-----

3 3 2 [JULY - DECEMBER 1994]

E1 (a) 1 - YES 2 - NO, GO TO E1 (b) BELOW

Quantity	Amount (P)	Code	Total Value (P)
		51110	_____
		51120	_____
		51130	_____
		51100	-----

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts non-durable furnishings?

3 3 1 [JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (E2)

Item	Quantity	Amount (P)	Code	Total Value (P)
1. Utensils and accessories			51210	_____
Dinnerware, glassware, and silverware.....				
Kitchen utensils/knives....				
Others, specify				
2. Household linen and furnishings			51220	_____
Mosquito net				
Pillow/pillow case				
Redsheets/blankets				
Towels				
Others, specify				
3. Other household furnishings			51230	_____
Flower pots, vases				
Decor, figurines				
Others, specify				
TOTAL			51200	-----

3 3 2 [JULY - DECEMBER 1994]

E1 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (E2)

Quantity	Amount (P)	Code	Total Value (P)
		51210	_____
		51220	_____
		51230	_____
		51200	-----

E2. DURABLE FURNITURE AND EQUIPMENT

3 4 1

3 4 2

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase on cash basis any durable furniture and equipment such as kitchen and laundry appliances, audio-visual equipment, furnitures, and other major appliance and equipment, household transport equipment and household tools?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

1 - YES 2 - NO, GO TO NEXT PAGE [E2(b)]

E2 (a) 1 - YES 2 - NO, GO TO NEXT PAGE [E2(b)]

Item	Quantity	Amount (P)	Code	Total Value (P)	Quantity	Amount (P)	Code	Total Value (P)
1. Kitchen and laundry appliances			52110	-----			52110	-----
Refrigerator								
Cooking Range/Stove								
Washing machine								
Others, specify								
2. Audio-visual equipment			52120	-----			52120	-----
Television								
Video cassette recorder								
Stereos set/sing-along system								
Radio (am/fm)/Radio Cassette								
Others, specify								
3. Furnitures			52130	-----			52130	-----
Dining set								
Sala set								
Beds, cabinets								
Others, specify								
4. Other major appliances and equipment (vacuum cleaner, floor polisher, airconditioner, etc.)			52140	-----			52140	-----
5. Minor appliances			52150	-----			52150	-----
Electric fan								
Rice cooker								
Toaster								
Sewing machine								
Flat iron								
Others, specify								
6. Transport equipment for household use			52160	-----			52160	-----
Bicycle, tricycle, motorcycle								
Car								
Others, specify								
7. Household tools (hammer, saw, chisel, rake, spade, garden hose, lawn mower etc.)			52170	-----			52170	-----
TOTAL			52100	-----			52100	-----

COMPUTATIONS/
REMARKS:

E2. DURABLE FURNITURE AND EQUIPMENT (continued)

3 5 1

3 5 2

(b) During the PERIOD SPECIFIED, did you or any member of your family purchase on installment basis durable furniture and equipment?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YES		2 - NO, GO TO NEXT PAGE [E2(c)]		Code	Total Value (P)	Total Amt. Paid	E2 (b)	1 - YES		2 - NO, GO TO NEXT PAGE [E2(c)]		Code	Total Value (P)	Total Amt. Paid
	Quantity	Amount (P)	Quantity	Amount (P)					Quantity	Amount (P)	Quantity	Amount (P)			
1. Kitchen and laundry appliances Refrigerator					52210								52210		
Cooking Range/Stove															
Washing machine															
Others, specify															
2. Audio-visual equipment Television					52220								52220		
Video cassette recorder															
Stereo set/sing-along system															
Radio (am/fm)/Radio Cassette															
Others, specify															
3. Furnitures Dining set					52230								52230		
Sala set															
Beds, cabinets															
Others, specify															
4. Other major appliances and equipment (vacuum cleaner, floor polisher, airconditioner, etc.)					52240								52240		
5. Minor appliances Electric fan					52250								52250		
Rice cooker															
Toaster															
Sewing machine															
Flat iron															
Others, specify															
6. Transport equipment for household use Bicycle, tricycle, motorcycle					52260								52260		
Car															
Others, specify															
7. Household tools (hammer, saw, chisel, rake, spade, garden hose, lawn mower etc.)					52270								52270		
TOTAL					52200								52200		

COMPUTATIONS/
REMARKS:

E2. DURABLE FURNITURE AND EQUIPMENT (continued)

361

362

(c) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts any durable furniture and equipment?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (F)

E2 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (F)

Item	[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]			
	Quantity	Amount (P)	Code	Total Value (P)	Quantity	Amount (P)	Code	Total Value (P)
1. Kitchen and laundry appliances			52110				52110	
Refrigerator								
Cooking Range/Stove								
Washing machine								
Others, specify								
2. Audio visual equipment			52120				52120	
Television								
Video cassette recorder								
Stereo set/sing-along system								
Radio (am/fm)/Radio Cassette								
Others, specify								
3. Furnitures			52130				52130	
Dining set								
Salv set								
Beds, cabinets								
Others, specify								
4. Other major appliances and equipment (vacuum cleaner, floor polisher, aircondit ioner, etc.)			52140				52140	
5. Minor appliances			52150				52150	
Electric fan								
Rice cooker								
Toaster								
Sewing machine								
Flat iron								
Others, specify								
6. Transport equipment for household use			52160				52160	
Bicycle, tricycle, motorcycle								
Car								
Others, specify								
7. Household tools (hammer, saw, chisel, rake, spade, garden hose, lawn mower etc.)			52170				52170	
TOTAL			52100				52100	

F. TAXES

3 6 1

3 6 2

During the PERIOD SPECIFIED, did you or any member of your family pay taxes such as income tax, real estate tax, car registration, and other direct taxes?

[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
	1 - YES	2 - NO, GO TO NEXT PAGE (G1)	F.	1 - YES	2 - NO, GO TO NEXT PAGE (G1)
Item	Code	Value	Code	Value	
1. Income tax	60010	_____	60010	_____	
2. Real estate tax	60020	_____	60020	_____	
3. Car registration, toll fees & driver's license	60030	_____	60030	_____	
4. Other direct taxes (residence certificate, etc.)	60040	_____	60040	_____	
TOTAL	60000	-----	60000	-----	

COMPUTATIONS/REMARKS:

COMPUTATIONS/
REMARKS:

G. HOUSING, HOUSE MAINTENANCE AND MINOR REPAIRS

G1. HOUSING

3 7 1

At the time of visit... (JULY 1994)

(a)... in what type of building/house does the family reside?

- 1 - Single house
- 2 - Duplex
- 3 - Apartment/accessoria/
condominium/townhouse
- 4 - Improvised house
- 5 - Commercial/industrial/agricultural
building/house
- 6 - Other housing unit (e.g., cave,
boat)

(b)... what type of construction materials are the roofs made of?

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick,
stone, asbestos)
- 2 - Light materials (cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials

(c)... what type of construction materials are the outer walls made of?

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick,
stone, wood, plywood, asbestos)
- 2 - Light materials (bamboo, sawali, cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials

(d)... what is the tenure status of the housing unit and lot occupied by
your family?

- 1 - Own or owner-like possession of house and lot
How much is the imputed rent per month? P _____
- 2 - Rent house/room including lot
How much is the rent per month? P _____
- 3 - Own house, rent lot
How much is the rent of the lot per month? P _____
How much is the imputed rent of the house per month? P _____
- 4 - Own house, rent-free lot with consent of owner
How much is the imputed rent of house per month? P _____
How much is the imputed rent of lot per month? P _____
- 5 - Own house, rent-free lot without consent of owner
How much is the imputed rent per month? P _____
- 6 - Rent-free house and lot with consent of owner
How much is the imputed rent per month? P _____
- 7 - Rent-free house and lot without consent of owner
How much is the imputed rent per month? P _____

G1. HOUSING

3 7 2

At the time of visit... (JANUARY 1995)

(a)... in what type of building/house does the family reside?

- 1 - Single house
- 2 - Duplex
- 3 - Apartment/accessoria/
condominium/townhouse
- 4 - Improvised house
- 5 - Commercial/industrial/agricultural
building/house
- 6 - Other housing unit (e.g., cave,
boat)

(b)... what type of construction materials are the roofs made of?

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick,
stone, asbestos)
- 2 - Light materials (cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials

(c)... what type of construction materials are the outer walls made of?

- 1 - Strong materials (galvanized iron, aluminum, tile, concrete, brick,
stone, wood, plywood, asbestos)
- 2 - Light materials (bamboo, sawali, cogon, nipa, anahaw)
- 3 - Salvaged/makeshift materials
- 4 - Mixed but predominantly strong materials
- 5 - Mixed but predominantly light materials
- 6 - Mixed but predominantly salvaged materials

(d)... what is the tenure status of the housing unit and lot occupied by
your family?

- 1 - Own or owner-like possession of house and lot
How much is the imputed rent per month? P _____
- 2 - Rent house/room including lot
How much is the rent per month? P _____
- 3 - Own house, rent lot
How much is the rent of the lot per month? P _____
How much is the imputed rent of the house per month? P _____
- 4 - Own house, rent-free lot with consent of owner
How much is the imputed rent of house per month? P _____
How much is the imputed rent of lot per month? P _____
- 5 - Own house, rent-free lot without consent of owner
How much is the imputed rent per month? P _____
- 6 - Rent-free house and lot with consent of owner
How much is the imputed rent per month? P _____
- 7 - Rent-free house and lot without consent of owner
How much is the imputed rent per month? P _____

COMPUTATIONS/
REMARKS:

G2. HOUSE MAINTENANCE AND MINOR REPAIRS

3 9 1

3 9 2

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase in cash or on credit materials for house maintenance and minor repairs such as carpentry materials, electrical materials, masonry, paint, varnish, plumbing and other materials, and pay for labor?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	1 - YES			2 - NO, GO TO G2 (b) BELOW		
	Quantity	Code	Value			
1. Carpentry materials (bamboo, nails, lumber, GI sheets, plywood, etc.)		72110	_____			
2. Electrical materials (wires, switch, receptacles, etc.)		72120	_____			
3. Masonry (cement, gravel, sand, etc.)		72130	_____			
4. Paint, varnish, thinner, etc.		72140	_____			
5. Plumbing materials (faucet, pipes, etc.)		72150	_____			
6. Other materials (wall paper, etc.)		72160	_____			
7. Paid labor (wages for carpenters, electricians, masons, plumbers, etc.)		72170	_____			
TOTAL		72100	-----			

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts materials and/or paid labor for house maintenance and minor repairs?

3 9 1

[JANUARY - JUNE 1994]

3 9 2

[JULY - DECEMBER 1994]

Item	1 - YES			2 - NO, GO TO NEXT PAGE (H)		
	Quantity	Code	Value			
1. Carpentry materials (bamboo, nails, lumber, GI sheets, plywood, etc.)		72210	_____			
2. Electrical materials (wires, switch, receptacles, etc.)		72220	_____			
3. Masonry (cement, gravel, sand, etc.)		72230	_____			
4. Paint, varnish, thinner, etc.		72240	_____			
5. Plumbing materials (faucet, pipes, etc.)		72250	_____			
6. Other materials (wall paper, etc.)		72260	_____			
7. Paid labor (wages for carpenters, electricians, masons, plumbers, etc.)		72270	_____			
TOTAL		72200	-----			

H. MISCELLANEOUS EXPENDITURES

COMPUTATIONS/
REMARKS:

H1. SPECIAL FAMILY OCCASIONS

(a) During the PERIOD SPECIFIED, did you or any member of your family purchase in cash or on credit any food or pay for services for special family occasions such as food and refreshments, alcoholic beverages, service of priests, cooks, waiters, rentals, package tours, and others?

[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]			
4 0 1				4 0 2			
1 - YES				1 - YES			
2 - NO, GO TO H1(b) BELOW				2 - NO, GO TO H1(b) BELOW			
Item	Frequency/ Quantity	Code	Value	Item	Frequency/ Quantity	Code	Value
1. Food and refreshments		81110	_____			81110	_____
2. Alcoholic beverages		81120	_____			81120	_____
3. Service of priests, cooks, waiters, etc.		81130	_____			81130	_____
4. Rental of space, facilities and equipment		81140	_____			81140	_____
5. Package tours		81150	_____			81150	_____
6. Others (balloons, flowers, etc.)		81160	_____			81160	_____
TOTAL		81100	-----			81100	-----

(b) During the PERIOD SPECIFIED, did you or any member of your family receive as gifts any food and free services for special family occasions?

[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]			
4 0 1				4 0 2			
1 - YES				1 - YES			
2 - NO, GO TO NEXT PAGE (H2)				2 - NO, GO TO NEXT PAGE (H2)			
Item	Frequency/ Quantity	Code	Value	Item	Frequency/ Quantity	Code	Value
1. Food and refreshments		81210	_____			81210	_____
2. Alcoholic beverages		81220	_____			81220	_____
3. Service of priests, cooks, waiters, etc.		81230	_____			81230	_____
4. Rental of space, facilities and equipment		81240	_____			81240	_____
5. Package tours		81250	_____			81250	_____
6. Others (balloons, flowers, etc.)		81260	_____			81260	_____
TOTAL		81200	-----			81200	-----

H2. GIFTS AND CONTRIBUTIONS TO OTHERS

4 1 1

4 1 2

(NOTE TO THE INTERVIEWER: ENTRY IN THE "IN KIND" COLUMN SHOULD BE THE SUM OF VALUE GIVEN AWAY AS GIFTS FROM NET SHARE OF CROPS (PAGE 46), FAMILY SUSTENANCE ACTIVITIES (PAGE 52) AND ENTREPRENEURIAL ACTIVITIES (PAGES 53-66). HENCE, DO NOT FILL UP THIS COLUMN UNTIL YOU HAVE ASKED THESE SECTIONS.)

During the PERIOD SPECIFIED, did you or any member of your family give gifts and contributions, in cash or in kind?

[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]						
Item	Code	1 - YES		2 - NO, GO TO H3 BELOW		H2. Code	1 - YES		2 - NO, GO TO H3 BELOW	
		In cash	In kind	In cash	In kind		In cash	In kind		
1. Gifts and assistance to private individuals outside the family	82010	_____	_____	_____	_____	82010	_____	_____	_____	_____
2. Contributions to church and religious institutions	82020	_____	_____	_____	_____	82020	_____	_____	_____	_____
3. Contributions and donations to other institutions	82030	_____	_____	_____	_____	82030	_____	_____	_____	_____
4. Other gifts and contributions	82040	_____	_____	_____	_____	82040	_____	_____	_____	_____
TOTAL	82000	_____	_____	_____	_____	82000	_____	_____	_____	_____

H3. OTHER EXPENDITURES

4 2 1

4 2 2

During the PERIOD SPECIFIED, did you or any member of your family incur any expense, in cash or on credit, on other expenditure item such as life insurance and retirement premiums, interest payment on loans for household expenses, and others?

[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]						
Item	Quantity	Code	Value	1 - YES		2 - NO, GO TO NEXT PAGE (1)		H3. Quantity	Code	Value
				In cash	In kind	In cash	In kind			
1. Life insurance and retirement premiums (including contribution to PAG-IBIG Funds)		83010	_____						83010	_____
2. Interest payment on loans for household expenses		83020	_____						83020	_____
3. Others (losses due to fire and theft, legal fees, professional fees, welfare and civic association dues, membership fees, periodic monthly or yearly dues, insurance premiums, GSIS/SSS premiums, MEDICARE, etc.)		83030	_____						83030	_____
TOTAL		83000	_____						83000	_____

I. OTHER DISBURSEMENTS

4 3 1

4 3 2

During the PERIOD SPECIFIED, did you or any member of your family incur any expenses, in cash or on credit, on other disbursement such as purchase or amortization of real property, payment of cash loans, installments for appliances or car bought before 1994 on installment basis, loans granted to persons outside the family, deposits, investments and others?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

Item	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]			
	1 - YES	2 - NO, GO TO NEXT PAGE (PART III)		1. 1 - YES	2 - NO, GO TO NEXT PAGE (PART III)		
		Quantity	Code	Value	Quantity	Code	Value
1. Purchase/amortization of real property			84010	_____		84010	_____
2. Payments of cash loan (principal)			84020	_____		84020	_____
3. Installments for appliances, etc. bought before 1994			84030	_____		84030	_____
4. Installments for personal transport bought before 1994			84040	_____		84040	_____
5. Loans granted to persons outside the family			84050	_____		84050	_____
6. Amount deposited in banks/investments			84060	_____		84060	_____
7. Other disbursements (Major repair and construction of house, withholding taxes from current income, payment for goods/services acquired/availed of outside reference period, back rentals paid during reference period, etc.)			84070	_____		84070	_____
TOTAL			84000	-----		84000	-----

COMPUTATIONS/
REMARKS:

PART III - INCOME AND OTHER RECEIPTS
A. SALARIES AND WAGES FROM EMPLOYMENT

NOTE TO THE INTERVIEWER

REVIEW PART II SECTION G (HOUSING) PAGES 16 TO 17. IF G1 IS CODE 4 OR 6 ADD THREE IS A SHARP SIGN (#) BEFORE THE VALUE. COPY THE TOTAL VALUE FOR THE SEMESTER IN COLUMN (11). REVIEW ALSO ALL SECTIONS OF PART II FOR VALUE OF GOODS AND SERVICES RECEIVED AS FRINGE BENEFITS FROM EMPLOYER AND ENTER IN COLUMN (11).

JANUARY - JUNE 1994 (NOTE: THIS PAGE FOR VISIT ONE ONLY)
(Visit 1)

A1. SALARIES AND WAGES FROM REGULAR EMPLOYMENT

A1.1 Agricultural

4 4 1

During the PERIOD SPECIFIED, did you or any member of your family regularly receive salaries and wages from employment in agricultural sectors, in cash (including allowances, honoraria, tips, bonus, commissions and others) and in kind (including housing, food, grocery, clothing, medical benefits, etc.)?

1 - YES 2 - NO, GO TO A1.2 BELOW

Line Number (1)	First name of family member (2)	Occupation (3)	[Occupation Code] (4)	Kind of Industry (5)	[Industry Code] (6)	CASH EARNINGS			EARNINGS IN KIND		
						Basic salaries and wages (7)	Allowances, honoraria, tips, etc. (8)	Total (9)	Basic salaries and wages (10)	Housing, clothing, food, etc. (11)	Total (12)
						TOTAL	91016				

A1.2 Non-agricultural

4 5 1

During the PERIOD SPECIFIED, did you or any member of your family regularly receive salaries and wages from employment in non-agricultural sectors, in cash (including allowances, honoraria, tips, bonus, commissions and others) and in kind (including housing, food, grocery, clothing, medical benefits, etc.)?

1 - YES 2 - NO, GO TO PAGE 44 (A2)

Line Number (1)	First name of family member (2)	Occupation (3)	[Occupation Code] (4)	Kind of Industry (5)	[Industry Code] (6)	CASH EARNINGS			EARNINGS IN KIND		
						Basic salaries and wages (7)	Allowances, honoraria, tips, etc. (8)	Total (9)	Basic salaries and wages (10)	Housing, clothing, food, etc. (11)	Total (12)
						TOTAL	91029				

JULY - DECEMBER 1994 (NOTE: THIS PAGE FOR VISIT TWO ONLY)

(Visit 2)

A1. SALARIES AND WAGES FROM REGULAR EMPLOYMENT

A1.1 Agricultural

4 4 2

During the PERIOD SPECIFIED, did you or any member of your family receive regularly salaries and wages from employment in agricultural sectors, in cash (including allowances, honoraria, tips, bonus, commissions and others) and in kind (including housing, food, grocery, clothing, medical benefits, etc.)?

1 - YES 2 - NO, GO TO A1.2 BELOW

Line Number (1)	First name of family member (2)	Occupation (3)	[Occupation Code] (4)	Kind of Industry (5)	[Industry Code] (6)	CASH EARNINGS			EARNINGS IN KIND		
						Basic salaries and wages (7)	Allowances, honoraria, tips, etc. (8)	Total (9)	Basic salaries and wages (10)	Housing, clothing, food, etc. (11)	Total (12)
TOTAL						91010					

A1.2 Non-agricultural

4 5 2

During the PERIOD SPECIFIED, did you or any member of your family receive regularly salaries and wages from employment in non-agricultural sectors, in cash (including allowances, honoraria, tips, bonus, commissions and others) and in kind (including housing, food, grocery, clothing, medical benefits, etc.)?

1 - YES 2 - NO, GO TO PAGE 45 (A2)

Line Number (1)	First name of family member (2)	Occupation (3)	[Occupation Code] (4)	Kind of Industry (5)	[Industry Code] (6)	CASH EARNINGS			EARNINGS IN KIND		
						Basic salaries and wages (7)	Allowances, honoraria, tips, etc. (8)	Total (9)	Basic salaries and wages (10)	Housing, clothing, food, etc. (11)	Total (12)
TOTAL						91020					

NOTE TO THE INTERVIEWER:

REVIEW PART II SECTION G (HOUSING) PAGES 36 TO 37. IF G1.8 IS CODE 4 OR 6 AND THERE IS A SHARP SIGN (#) BEFORE THE VALUE, COPY THE TOTAL VALUE FOR THE SEMESTER IN COLUMN (11). REVIEW ALSO ALL SECTIONS OF PART II FOR VALUE OF GOODS AND SERVICES RECEIVED AS FRINGE BENEFITS FROM EMPLOYER AND ENTER IN COLUMN (11).

COMPUTATIONS/
REMARKS:

B. NET SHARE OF CROPS, FRUITS AND VEGETABLES PRODUCED OR LIVESTOCK AND POULTRY RAISED BY OTHER HOUSEHOLDS

During the PERIOD SPECIFIED, did you or any member of your family receive net share of crops, fruits and vegetables produced or livestock and poultry raised by other households? If yes, how much was sold for cash or consumed by the family?

		4 B 1 [JANUARY - JUNE 1994]			4 B 2 [JULY - DECEMBER 1994]			
Item	Code	1 - YES	2 - NO, GO TO NEXT PAGE (C)		B	1 - YES	2 - NO, GO TO NEXT PAGE (C)	
		Total Net Value of Share	Sold for Cash	Value Consumed		Code	Total Net Value of Share	Sold for Cash	Value Consumed
1. Cereals	92010	_____	_____	_____	92010	_____	_____	_____
(a) Palay	92011	_____	_____	_____	92011	_____	_____	_____
(b) Corn	92012	_____	_____	_____	92012	_____	_____	_____
(c) Other cereals	92013	_____	_____	_____	92013	_____	_____	_____
2. Roots and tubers	92070	_____	_____	_____	92070	_____	_____	_____
3. Fruits and vegetables	92030	_____	_____	_____	92030	_____	_____	_____
4. Livestock and poultry	92040	_____	_____	_____	92040	_____	_____	_____
5. Livestock and poultry products	92050	_____	_____	_____	92050	_____	_____	_____
6. Others (specify)	92060	_____	_____	_____	92060	_____	_____	_____
TOTAL	92000	_____	_____	_____	92000	_____	_____	_____

COMPUTATIONS/REMARKS:

COMPUTATIONS/
REMARKS:

C. OTHER SOURCES OF INCOME

C1. CASH RECEIPTS, GIFTS, SUPPORT, RELIEF AND OTHER FORMS OF ASSISTANCE FROM ABROAD

During the PERIOD SPECIFIED, did you or any member of your family receive in cash any receipt, gift or other forms of assistance from abroad?

Item	4 9 1 [JANUARY - JUNE 1994]		4 9 2 [JULY - DECEMBER 1994]	
	Code	In cash	Code	In cash
1. Cash received from family members who are contract workers	93011	_____	93011	_____
2. Cash received from family members who are working abroad	93012	_____	93012	_____
3. Pensions, retirement, workmen's compensation & other benefits	93013	_____	93013	_____
4. Cash gifts, support, relief, etc. from abroad	93014	_____	93014	_____
5. Dividends from investment abroad	93015	_____	93015	_____
TOTAL	93010	_____	93010	_____

C2. CASH RECEIPTS, SUPPORT, ASSISTANCE AND RELIEF FROM DOMESTIC SOURCE

During the PERIOD SPECIFIED, did you or any member of your family receive in cash any gift, support, assistance or relief from a domestic source?

Source	4 9 1 [JANUARY - JUNE 1994]		4 9 2 [JULY - DECEMBER 1994]	
	Code	In cash	Code	In cash
1. Other families	93021	_____	93021	_____
2. Government and private institutions	93022	_____	93022	_____
TOTAL	93020	_____	93020	_____

C3. RENTALS RECEIVED FROM NON-AGRICULTURAL LANDS, BUILDINGS, SPACES AND OTHER PROPERTIES

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, rentals from non-agricultural land, buildings, spaces or other properties?

Item	5 0 1 [JANUARY - JUNE 1994]				5 0 2 [JULY - DECEMBER 1994]		
	Code	In cash	In kind		Code	In cash	In kind
1. Land	93031	_____	_____		93031	_____	_____
2. Buildings	93032	_____	_____		93032	_____	_____
3. Spaces	93033	_____	_____		93033	_____	_____
4. Other properties	93034	_____	_____		93034	_____	_____
TOTAL	93030	_____	_____		93030	_____	_____

COMPUTATIONS/
REMARKS:

C4. INTEREST

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, interest from bank deposits and loans extended to other families?

5 1 1 [JANUARY - JUNE 1994]				5 1 2 [JULY - DECEMBER 1994]						
Item	Code	1 - YES		2 - NO, GO TO C5 BELOW		C4. Code	1 - YES		2 - NO, GO TO C5 BELOW	
		In Cash	In kind	In cash	In kind		In cash	In kind		
1. Interest from bank deposits	93041	_____	XXXXXXXXXX	93041	_____	XXXXXXXXXX				
2. Interest from loans extended to other families	93042	_____	_____	93042	_____	_____				
TOTAL	93040	_____	_____	93040	_____	_____				

C5. PENSION AND RETIREMENT, WORKMEN'S COMPENSATION AND SOCIAL SECURITY BENEFITS

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, pension and retirement, workmen's compensation, or social security benefits?

5 1 1 [JANUARY - JUNE 1994]				5 1 2 [JULY - DECEMBER 1994]						
Item	Code	1 - YES		2 - NO, GO TO C6 BELOW		C5. Code	1 - YES		2 - NO, GO TO C6 BELOW	
		In Cash	In kind	In cash	In kind		In cash	In kind		
1. Pension and retirement	93051	_____	_____	93051	_____	_____				
2. Workmen's compensations	93052	_____	_____	93052	_____	_____				
3. Social security benefits	93053	_____	_____	93053	_____	_____				
TOTAL	93050	_____	_____	93050	_____	_____				

C6. NET WINNINGS FROM GAMBLING, SWEEPSTAKES AND RAFFLE

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, net winnings from gambling, sweepstakes or raffle?

5 1 1 [JANUARY - JUNE 1994]				5 1 2 [JULY - DECEMBER 1994]						
Item	Code	1 - YES		2 - NO, GO TO NEXT PAGE (C7)		C6. Code	1 - YES		2 - NO, GO TO NEXT PAGE (C7)	
		In cash	In kind	In cash	In kind		In cash	In kind		
1. Gambling (jueteng, cockfights, mahjong, bingo, cards, etc.)	93061	_____	_____	93061	_____	_____				
2. Sweepstakes	93062	_____	_____	93062	_____	_____				
3. Raffle	93063	_____	_____	93063	_____	_____				
TOTAL	93060	_____	_____	93060	_____	_____				

C7. DIVIDENDS FROM INVESTMENT

5 2 1

5 2 2

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, any dividend from investment (stocks, bonds, etc.)?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO C8 BELOW

Code In cash In kind

What is the total value? 93070

[JULY - DECEMBER 1994]

C7. 1 - YES 2 - NO, GO TO C8 BELOW

Code In cash In kind

93070

C8. PROFITS FROM SALE OF STOCKS, BONDS AND REAL AND PERSONAL PROPERTY

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, any profit from sale of stocks or bonds and real and personal property?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO C9 BELOW

Code In cash In kind

What is the total value? 93080

[JULY - DECEMBER 1994]

C8. 1 - YES 2 - NO, GO TO C9 BELOW

Code In cash In kind

93080

C9. BACKPAY AND PROCEEDS FROM INSURANCE

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, any backpay and proceeds from insurance?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO C10 BELOW

Code In cash In kind

What is the total value? 93090

[JULY - DECEMBER 1994]

C9. 1 - YES 2 - NO, GO TO C10 BELOW

Code In cash In kind

93090

C10. INHERITANCE

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, any inheritance?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO C11 BELOW

Code In cash In kind

What is the total value? 93100

[JULY - DECEMBER 1994]

C10. 1 - YES 2 - NO, GO TO C11 BELOW

Code In cash In kind

93100

C11. OTHER SOURCES OF INCOME NOT ELSEWHERE CLASSIFIED

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, other sources of income not elsewhere classified such as royalties and income of family members below 10 years old?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (D)

Code In cash In kind

What is the total value? 93110

[JULY - DECEMBER 1994]

C11. 1 - YES 2 - NO, GO TO NEXT PAGE (D)

Code In cash In kind

93110

COMPUTATIONS/
REMARKS:

D. OTHER RECEIPTS

5 3 1

5 3 2

During the PERIOD SPECIFIED, did you or any member of your family receive in cash or in kind, other receipts such as sale of real property, sale of personal property (clothing, jewelry, etc.); loans from other families, business firms and government institutions for current consumption and investment; payment received for loan granted to others (excluding interest); withdrawals from savings/business equity; or other receipts?

Item	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
	1 - YES	2 - NO, GO TO NEXT PAGE (E)		D. 1 - YES	2 - NO, GO TO NEXT PAGE (E)	
Code	In cash	In kind	Code	In cash	In kind	
1. Sale of real property	94001	_____	_____	94001	_____	_____
2. Sale of personal property	94002	_____	_____	94002	_____	_____
3. Loans from other families	94003	_____	_____	94003	_____	_____
4. Loans from business firms (including sari-sari stores) and government institutions	94004	_____	_____	94004	_____	_____
5. Payments received for loans granted to others	94005	_____	_____	94005	_____	_____
6. Withdrawals from savings/business equity	94006	_____	_____	94006	_____	_____
7. Other receipts (tax refund, dowries, etc.)	94007	_____	_____	94007	_____	_____
TOTAL	94000	.....	.....	94000	.....	.....

E. CHECKLIST FOR ENTREPRENEURIAL AND FAMILY SUSTENANCE ACTIVITIES

5 5 1

5 5 2

(a) During the PERIOD SPECIFIED, did you or any member of your family produce goods mainly for home consumption?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

a1. 1 - YES 2 - NO | a1. 1 - YES 2 - NO

(b) During the PERIOD SPECIFIED, did you or any member of your family engage as operator in any of the following entrepreneurial activities?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

- | | | |
|--|--------------------|--------------------|
| 1. CROP FARMING AND GARDENING such as the growing of palsey, corn, roots and tubers, vegetables, fruits, nuts, orchids, ornamental plants, etc. | b1. 1 - YES 2 - NO | b1. 1 - YES 2 - NO |
| 2. LIVESTOCK AND POULTRY RAISING such as raising of carabaos, cattle, hoga, horses, chicken, ducks, etc. and the production of freshmilk, eggs, etc. | 2. 1 - YES 2 - NO | 2. 1 - YES 2 - NO |
| 3. FISHING such as capture fishing (with a boat of three tons or less); gathering fry, shells, seaweeds, etc.; and culturing fish, oyster, mussel, etc. | 3. 1 - YES 2 - NO | 3. 1 - YES 2 - NO |
| 4. FORESTRY AND HUNTING such as tree planting (ipil-ipil), firewood gathering, small-scale logging (excluding concessionaires), charcoal making, gathering forestry products (cogon, nipa, rattan, bamboo, resin, gum, etc.) or hunting wild animals/birds | 4. 1 - YES 2 - NO | 4. 1 - YES 2 - NO |
| 5. WHOLESALE AND RETAIL including market vending, sidewalk vending and peddling | 5. 1 - YES 2 - NO | 5. 1 - YES 2 - NO |
| 6. MANUFACTURING such as mat weaving, tailoring, dressmaking, bagoong making, fish drying, etc. | 6. 1 - YES 2 - NO | 6. 1 - YES 2 - NO |
| 7. COMMUNITY, SOCIAL, RECREATIONAL AND PERSONAL SERVICES such as medical & dental practice, practice of trade, operation of schools, restaurants and hotels, etc. | 7. 1 - YES 2 - NO | 7. 1 - YES 2 - NO |
| 8. TRANSPORTATION, STORAGE AND COMMUNICATION SERVICES such as operation of jeepneys or taxis, storage and warehousing activities, messenger services, etc. | 8. 1 - YES 2 - NO | 8. 1 - YES 2 - NO |
| 9. MINING AND QUARRYING such as mineral extraction like salt making, gold mining; gravel, sand and stone quarrying, etc. | 9. 1 - YES 2 - NO | 9. 1 - YES 2 - NO |
| 10. CONSTRUCTION or repair of a house, building or any structure | 10. 1 - YES 2 - NO | 10. 1 - YES 2 - NO |
| 11. ACTIVITIES NOT ELSEWHERE CLASSIFIED including electricity, gas and water; financing, insurance, real estate and business services. | 11. 1 - YES 2 - NO | 11. 1 - YES 2 - NO |

COMPUTATIONS/
REMARKS:

INSTRUCTIONS/REMINDERS TO INTERVIEWERS:

FOR A 'YES' ANSWER IN (a), FILL UP THE SECTION ON FAMILY SUSTENANCE ACTIVITIES (NEXT PAGE).

FOR EVERY 'YES' ANSWER IN (b), MAKE SURE THE PORTION IN PART IV (PAGE 53-66) CORRESPONDING TO THE ACTIVITY ENGAGED IN IS FILLED UP.

IF THE FAMILY IS NOT ENGAGED IN ANY ENTREPRENEURIAL AND FAMILY SUSTENANCE ACTIVITY, GO TO PART V - HEALTH CARE (PAGES 67-68).

COMPUTATIONS/
REMARKS:

F. FAMILY SUSTENANCE ACTIVITIES

5 6 1

5 6 2

During the PERIOD SPECIFIED, did you or any member of your family produce goods mainly for home consumption? If yes, how much was consumed by the family?

Type of activity	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
	1 - YES	2 - NO - Refer to Checklist on page 51		1 - YES	2 - NO - Refer to Checklist on page 51	
	Code	Net Receipts	Value Consumed	Code	Net Receipts	Value Consumed
1. Fishing, gathering shells, snail, seaweeds, corals, etc.	95010	_____	.....	95010	_____	.....
2. Logging, gathering forest products like firewood	95050	_____	.....	95050	_____	.....
3. Hunting and trapping	95060	_____	.....	95060	_____	.....
4. Farming, gardening	95080	_____	.....	95080	_____	.....
a) Cereals	95081	_____	.....	95081	_____	.....
b) Roots and tubers	95082	_____	.....	95082	_____	.....
c) Fruits and vegetables	95083	_____	.....	95083	_____	.....
d) Others. Specify _____	95084	_____	.....	95084	_____	.....
5. Raising livestock and poultry	95090	_____	.....	95090	_____	.....
a) Livestock and poultry	95091	_____	.....	95091	_____	.....
b) Livestock and poultry products	95092	_____	.....	95092	_____	.....
TOTAL	95000	.....	.....	95000	.....	.....

PART IV
A. ENTREPRENEURIAL ACTIVITIES

A1. CROP FARMING AND GARDENING

5 7 1

5 7 2

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in crop farming and gardening such as growing of palay, corn, roots and tubers, vegetables, fruits, nuts, etc.?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A1 (a) 1 - YES 2 - NO, GO TO PAGE 55 (A2)

A1 (a) 1 - YES 2 - NO, GO TO PAGE 55 (A2)

(b) During the PERIOD SPECIFIED, did you or any member of your family harvest crops, fruits and vegetables? If yes, how much was consumed by the family or given away as gifts?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A1 (b) 1 - YES 2 - NO, GO TO PAGE 55 (A2)

A1 (b) 1 - YES 2 - NO, GO TO PAGE 55 (A2)

Item (Specify)	Area/Trees		Production Code	Total Value	Value Consumed	Value Given Away As Gifts	Area/Trees		Production Code	Total Value	Value Consumed	Value Given Away As Gifts
	Harvested						Harvested					
1. Cereals			00121						00121			
a) Palay			92011						92011			
b) Corn			92012						92012			
c) Others, specify _____												
2. Roots and tubers			00122						00122			
a. Cassava			92022						92022			
b. Camote			92023						92023			
c. Others, specify _____												
3. Fruits and vegetables			00123						00123			
a) Fruits			92011						92011			
b) Vegetables			92012						92012			
c) Coconut			92013						92013			
d) Others, specify _____												
4. Others (including orchids and ornamental plants)			00124						00124			
a) Tobacco			92001						92001			
b) Coffee			92071						92071			
c) Others, specify _____ (including copra)												
TOTAL VALUE			00120						00120			

COMPUTATIONS/
REMARKS:

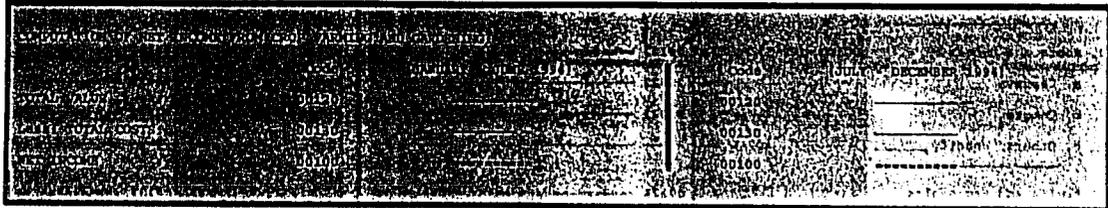
A1. CROP FARMING AND GARDENING (continued)

5 8 1

5 8 2

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in the production of the crops harvested?

Item	[JANUARY - JUNE 1994]				A1 (C)	[JULY - DECEMBER 1994]			
	Code	1 - YES	2 - NO, GO TO NEXT PAGE (A2)			Code	1 - YES	2 - NO, GO TO NEXT PAGE (A2)	
1. Seeds	00131				00131				
2. Fertilizer	00132				00132				
3. Pesticide	00133				00133				
4. Fuel and oil	00134				00134				
5. Wages of hired labor and paid family members	00135				00135				
6. Interest paid on agricultural loan (if any)	00136				00136				
7. Irrigation fees and other water charges	00137				00137				
8. Rent of land, equipment, and work animal	00138				00138				
9. Other expenses	00139				00139				
TOTAL COSTS	00130				00130				



COMPUTATIONS/
REMARKS:

A2. LIVESTOCK AND POULTRY RAISING

5 9 1

5 9 2

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in livestock or poultry raising such as raising of carabaos, cattle, horses, hogs, chickens, ducks, etc. and produce any livestock and poultry products such as milk, eggs, etc.?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A2 (a) 1 - YES 2 - NO, GO TO PAGE 57 (A3)

A2 (a) 1 - YES 2 - NO, GO TO PAGE 57 (A3)

(b) During the PERIOD SPECIFIED, did you or any member of your family dispose of any livestock and poultry, whether sold, consumed or given away, or did you or any family member produce livestock/poultry products? If yes, how much was consumed by the family or given away as gifts?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A2 (b) 1 - YES 2 - NO, GO TO PAGE 57 (A3)

A2 (b) 1 - YES 2 - NO, GO TO PAGE 57 (A3)

Item (Specify)	Number/ Quantity	Code	Total Value	Value		Number/ Quantity	Code	Total Value	Value	
				Consumed	Given Away As Gifts				Consumed	Given Away As Gifts
1. Livestock and poultry		00221	-----	-----	-----		00221	-----	-----	-----
a) Pigs		92041	-----	-----	-----		92041	-----	-----	-----
b) Cow		92042	-----	-----	-----		92042	-----	-----	-----
c) Chicken		92043	-----	-----	-----		92043	-----	-----	-----
d) Carabao		92044	-----	-----	-----		92044	-----	-----	-----
e) Others, specify _____			-----	-----	-----			-----	-----	-----
f) _____			-----	-----	-----			-----	-----	-----
g) _____			-----	-----	-----			-----	-----	-----
2. Livestock/poultry products		00222	-----	-----	-----		00222	-----	-----	-----
a) Milk		92051	-----	-----	-----		92051	-----	-----	-----
b) Eggs		92054	-----	-----	-----		92054	-----	-----	-----
c) Others, specify _____			-----	-----	-----			-----	-----	-----
TOTAL		00220	-----	-----	-----		00220	-----	-----	-----

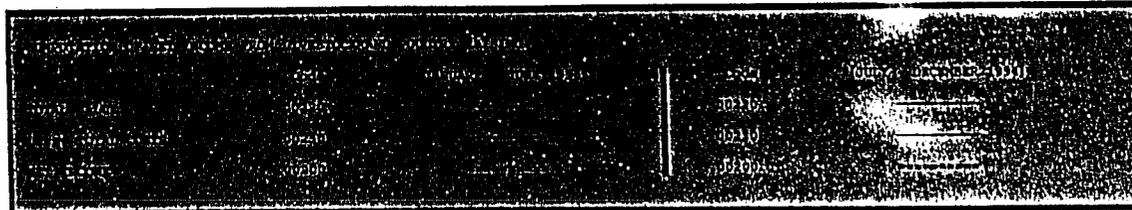
A2. LIVESTOCK AND POULTRY RAISING (continued)

6 0 1

6 0 2

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in raising the livestock and poultry disposed of, or in producing the livestock/poultry products?

Item	Code	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]			
		1 - YES	2 - NO, GO TO NEXT PAGE (A3)		A2 (c)	1- YES	2 - NO, GO TO NEXT PAGE (A3)	
		In cash	In kind	Total	Code	In cash	In Kind	Total
1. Acquisition cost of stock	00231	_____	_____	_____	00231	_____	_____	_____
2. Feeds	00232	_____	_____	_____	00232	_____	_____	_____
3. Medicine	00233	_____	_____	_____	00233	_____	_____	_____
4. Labor	00234	_____	_____	_____	00234	_____	_____	_____
5. Fuel and oil	00235	_____	_____	_____	00235	_____	_____	_____
6. Electricity	00236	_____	_____	_____	00236	_____	_____	_____
7. Other expenses	00237	_____	_____	_____	00237	_____	_____	_____
TOTAL COSTS . . .	00230	_____	_____	_____	00230	_____	_____	_____



A3. FISHING

6 1 1

6 1 2

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in such activities as capturing fish (with a boat of three tons or less), gathering fry, shells, seaweeds and other aquatic animals or products and culturing fish, oyster, mussel, etc.?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A3 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

A3 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

(b) During the PERIOD SPECIFIED, did you or any member of your family catch/gather/harvest fish or aquatic products? If Yes, how much was consumed by the family or given away as gifts?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A3 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

A3 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

Item	Quantity	Code	Total Value	Value Consumed	Value Given Away As Gifts
1. Fish and other products		00321			
2. Fry gathered		00322			
3. Shells and other products gathered		00323			
4. Fish harvested		00324			
5. Oyster and mussel harvested		00325			
6. Other products harvested		00326			
TOTAL VALUE		00320			

Item	Quantity	Code	Total Value	Value Consumed	Value Given Away As Gifts
1. Fish and other products		00321			
2. Fry gathered		00322			
3. Shells and other products gathered		00323			
4. Fish harvested		00324			
5. Oyster and mussel harvested		00325			
6. Other products harvested		00326			
TOTAL VALUE		00320			

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in catching, gathering or culturing the fish or aquatic products reported above?

6 2 1

[JANUARY - JUNE 1994]

6 2 2

[JULY - DECEMBER 1994]

A3 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

A3 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A4)

Item	Code	In cash	In kind	Total
1. Acquisition cost of fry /fingerlings	00331			
2. Fertilizer, feeds and pesticide	00332			
3. Wages of hired labor and paid family members	00333			
4. Ice	00334			
5. Fuel and oil	00335			
6. Other expenses	00336			
TOTAL COSTS	00330			

Item	Code	In cash	In kind	Total
1. Acquisition cost of fry /fingerlings	00331			
2. Fertilizer, feeds and pesticide	00332			
3. Wages of hired labor and paid family members	00333			
4. Ice	00334			
5. Fuel and oil	00335			
6. Other expenses	00336			
TOTAL COSTS	00330			



A5. WHOLESALE AND RETAIL

6 5 1

6 5 2

COMPUTATIONS/
REMARKS:

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in any wholesale or retail activity including market vending, sidewalk vending and peddling?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A5 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)

A5 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)

(b) During the PERIOD SPECIFIED, did you or any member of your family sell goods either on wholesale or retail basis?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A5 (b) 1 - YES 2 - NO, GO TO A5 (c) BELOW

A5 (b) 1 - YES 2 - NO, GO TO A5 (c) BELOW

Code
How many months did you sell such goods? 00521
What is the average gross sale per month 00522 X _____
TOTAL SALES . . . 00520 _____

Code
How many months did you sell such goods? 00521
What is the average gross sale per month 00522 X _____
TOTAL SALES . . . 00520 _____

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in selling such goods?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A5 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)

A5 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)

Item	Code	In cash	In kind	Total
1. Cost of goods sold	00531	_____	_____	_____
2. Others (specify)	00532	_____	_____	_____
TOTAL COSTS . . .	00530	_____	_____	_____

Code	In cash	In kind	Total
00531	_____	_____	_____
00532	_____	_____	_____
00530	_____	_____	_____

COMPUTATIONS/REMARKS:
[JANUARY - JUNE 1994]
A5 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)
A5 (b) 1 - YES 2 - NO, GO TO A5 (c) BELOW
Code
How many months did you sell such goods?
What is the average gross sale per month
TOTAL SALES . . .

COMPUTATIONS/REMARKS:
[JULY - DECEMBER 1994]
A5 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A6)
A5 (b) 1 - YES 2 - NO, GO TO A5 (c) BELOW
Code
How many months did you sell such goods?
What is the average gross sale per month
TOTAL SALES . . .

COMPUTATIONS/
REMARKS:

A6. MANUFACTURING

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in such manufacturing activities as mat weaving, tailoring, dressmaking bagoong making and fish drying?

6 6 1 [JANUARY - JUNE 1994]

A6 (a) 1 - YES 2 - NO, GO TO PAGE 62 (A7)

6 6 2 [JULY - DECEMBER 1994]

A6 (a) 1 - YES 2 - NO, GO TO PAGE 62 (A7)

(b) Describe major activity:

A6 (b) Code: _____

A6 (b) Code: _____

(c) During the PERIOD SPECIFIED, did you or any member of your family sell any of the goods manufactured?

[JANUARY - JUNE 1994]

A6 (c) 1 - YES 2 - NO, GO TO A6 (d) BELOW

Code

How many months did you sell such goods?

00621

What is the average gross sale per month

00622

X _____

TOTAL SALES . . . 00620

[JULY - DECEMBER 1994]

A6 (c) 1 - YES 2 - NO, GO TO A6 (d) BELOW

Code

00621

00622

X _____

00620

(d) During the PERIOD SPECIFIED, did you or any member of your family consume any of the goods manufactured?

6 7 1 [JANUARY - JUNE 1994]

A6 (d) 1 - YES 2 - NO, GO TO NEXT PAGE [A6 (e)]

Item

Quantity

Code

Value

1. Cereal preparation
2. Preparation from roots and tubers
3. Fruit and vegetable preparation
4. Meat preparation
5. Processed fish and marine products
6. Other food items
7. Alcoholic beverages (native wine)
8. Other non-food items (specify)

[REDACTED]

00631 -----
00632 -----
00633 -----
00634 -----
00635 -----
00636 -----
00637 -----
00638 -----
00630 -----

TOTAL CONSUMED

6 7 2 [JULY - DECEMBER 1994]

A6 (d) 1 - YES 2 - NO, GO TO NEXT PAGE [A6 (e)]

Quantity

Code

Value

[REDACTED]

00631 -----
00632 -----
00633 -----
00634 -----
00635 -----
00636 -----
00637 -----
00638 -----
00630 -----

A6. MANUFACTURING (continued)

6 8 1

6 8 2

(e) During the PERIOD SPECIFIED, did you or any member of your family give away as gifts any of the goods manufactured?

(JANUARY - JUNE 1994)

(JULY - DECEMBER 1994)

A6 (e) 1 - YES 2 - NO, GO TO A6(f) BELOW

A6 (e) 1 - YES 2 - NO, GO TO A6(f) BELOW

Item	Code	Value	Code	Value
1. Cereal preparation	00641	_____	00641	_____
2. Preparation from roots and tubers	00642	_____	00642	_____
3. Fruit and vegetable preparation	00643	_____	00643	_____
4. Meat preparation	00644	_____	00644	_____
5. Processed fish and marine products	00645	_____	00645	_____
6. Other food items	00646	_____	00646	_____
7. Alcoholic beverages (native wine)	00647	_____	00647	_____
8. Other non-food items (specify)	00648	_____	00648	_____
TOTAL GIFTS	00640	_____	00640	_____

(f) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in manufacturing the goods reported?

6 9 1

(JANUARY - JUNE 1994)

6 9 2

(JULY - DECEMBER 1994)

A6(f) 1 - YES 2 - NO, GO TO NEXT PAGE (A7)

A6(f) 1 - YES 2 - NO, GO TO NEXT PAGE (A7)

Item	Code	In cash	In kind	Total	Code	In cash	In kind	Total
1. Raw materials	00651	_____	_____	_____	00651	_____	_____	_____
2. Others (specify)	00652	_____	_____	_____	00652	_____	_____	_____
TOTAL COSTS	00650	_____	_____	_____	00650	_____	_____	_____

COMPUTATIONS/
REMARKS:

A7. COMMUNITY, SOCIAL, RECREATIONAL AND PERSONAL SERVICES

7 0 1

7 0 2

(a) During the PERIOD SPECIFIED, did you or any member of your family operate any activity providing community, social, recreational and personal services such as medical and dental practice, practice of trade, operation of schools, restaurants and hotels, etc.?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A7 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A8)

A7 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A8)

(b) During the PERIOD SPECIFIED, did you or any member of your family receive any compensation/payment for rendering such services?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A7 (b) 1 - YES 2 - NO, GO TO A7(c) BELOW

A7 (b) 1 - YES 2 - NO, GO TO A7(c) BELOW

Code

Code

How many months did you render service or practice your trade? 00721

00721

What is the average gross receipt per month? 00722

X _____

00722

X _____

TOTAL GROSS RECEIPTS . . . 00720

00720

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in rendering such services?

[JANUARY - JUNE 1994]

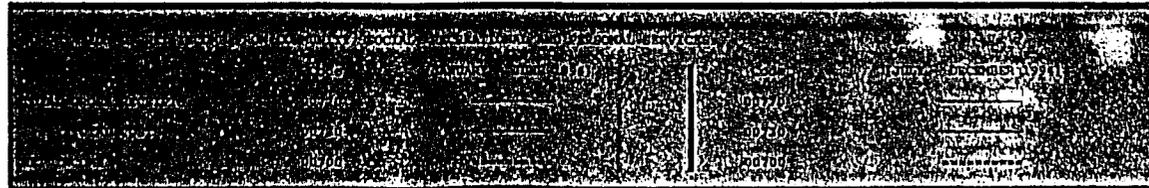
[JULY - DECEMBER 1994]

A7 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A8)

A7 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A8)

Item	Code	In cash	In kind	Total
1. Materials and supplies	00731	_____	_____	_____
2. Others (specify)	00732	_____	_____	_____
TOTAL COSTS	00730	_____	_____	_____

Code	In cash	In kind	Total
00731	_____	_____	_____
00732	_____	_____	_____
00730	_____	_____	_____



A8. TRANSPORTATION, STORAGE AND COMMUNICATION SERVICES

7 1 1

7 1 2

(a) During the PERIOD SPECIFIED, did you or any member of your family operate any activity providing transportation, storage and communication services such as operation of jeepneys or taxis, storage and warehousing activities, tour and travel agencies, messenger services, etc.?

	[JANUARY - JUNE 1994]		[JULY - DECEMBER 1994]	
A8 (a)	1 - YES	2 - NO, GO TO NEXT PAGE (A9)	A8 (a)	1 - YES 2 - NO, GO TO NEXT PAGE (A9)

(b) During the PERIOD SPECIFIED, did you or any member of your family receive any compensation/payment for rendering such services?

	[JANUARY - JUNE 1994]		[JULY - DECEMBER 1994]	
A8 (b)	1 - YES	2 - NO, GO TO A8(c) BELOW	A8 (b)	1 - YES 2 - NO, GO TO A8(c) BELOW

Code

How many months did you operate or render services? 00821

What is the average gross receipt per month? 00822 X _____

TOTAL GROSS RECEIPTS . . . 00820 _____

Code

00821

00822 X _____

00820 _____

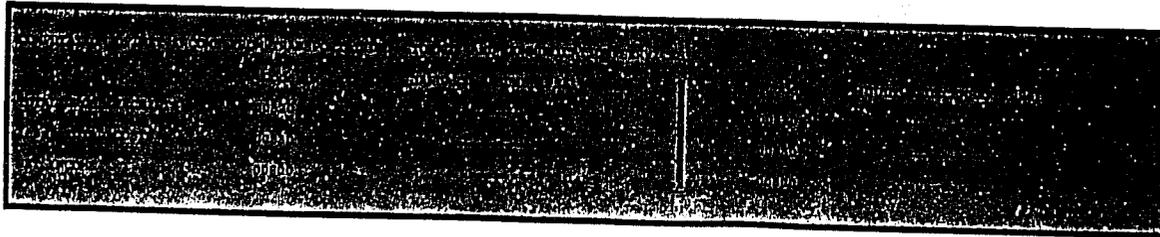
(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in rendering such services?

	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
A8 (c)	1 - YES	2 - NO, GO TO NEXT PAGE (A9)		A8 (c)	1 - YES	2 - NO, GO TO NEXT PAGE (A9)

Item	Code	In cash	In kind	Total
1. Fuel and oil	00831	_____	_____	_____
2. Maintenance and repair	00832	_____	_____	_____
3. Others (specify)	00833	_____	_____	_____
TOTAL COSTS . . .	00830	_____	_____	_____

Code	In cash	In kind	Total
00831	_____	_____	_____
00832	_____	_____	_____
00833	_____	_____	_____
00830	_____	_____	_____

COMPUTATIONS/
REMARKS:



COMPUTATIONS/
REMARKS:

A9. MINING AND QUARRYING

7 2 1

7 2 2

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in mining and quarrying such as salt mining, gold mining, gravel and sand quarrying, etc?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A9 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A10) A9 (a) 1 - YES 2 - NO, GO TO NEXT PAGE (A10)

(b) During the PERIOD SPECIFIED, did you or any member of your family dispose of mining and quarrying products?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A9 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (A10) A9 (b) 1 - YES 2 - NO, GO TO NEXT PAGE (A10)

Code

Code

What is the total

gross receipts? . . . 00920

00920

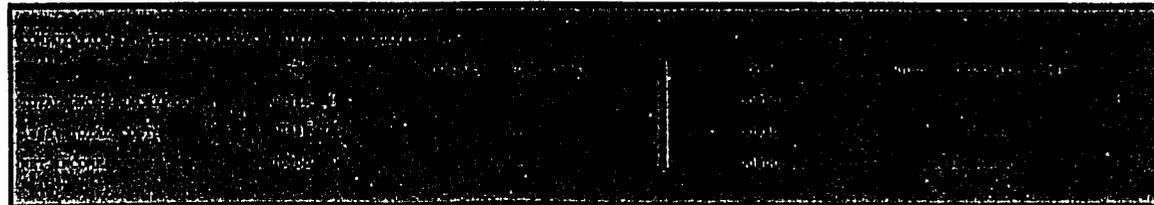
(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in producing the products disposed of?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

A9 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A10) A9 (c) 1 - YES 2 - NO, GO TO NEXT PAGE (A10)

Item	Code	[JANUARY - JUNE 1994]			[JULY - DECEMBER 1994]		
		In cash	In kind	Total	In cash	In kind	Total
1. Materials and Supplies	00931	_____	_____	_____	00931	_____	_____
2. Fuels	00932	_____	_____	_____	00932	_____	_____
3. Others (specify)	00933	_____	_____	_____	00933	_____	_____
TOTAL COSTS . . .	00930	_____	_____	_____	00930	_____	_____



A10. CONSTRUCTION

7 3 1

7 3 2

COMPUTATIONS/
REMARKS:

(a) During the PERIOD SPECIFIED, did you or any member of your family contract services for the construction or repair of a house, building or any structures?

	[JANUARY - JUNE 1994]		[JULY - DECEMBER 1994]	
A10 (a)	1 - YES	2 - NO, GO TO NEXT PAGE (A11)	A10 (a)	1 - YES 2 - NO, GO TO NEXT PAGE (A11)

(b) During the PERIOD SPECIFIED, did you or any member of your family receive payment for the construction activity?

	[JANUARY - JUNE 1994]		[JULY - DECEMBER 1994]	
A10 (b)	1 - YES	2 - NO, GO TO A10(c) BELOW	A10 (b)	1 - YES 2 - NO, GO TO A10(c) BELOW

Code
What is the total gross receipts? 01020

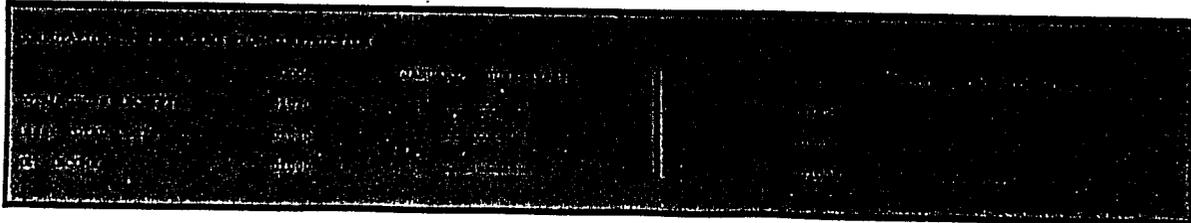
Code
01020

(c) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, for the construction activity?

	[JANUARY - JUNE 1994]				[JULY - DECEMBER 1994]				
A10 (c)	1 - YES	2 - NO, GO TO NEXT PAGE (A11)			A10 (c)	1 - YES	2 - NO, GO TO NEXT PAGE (A11)		

Item	Code	In cash	In kind	Total
1. Wages of hired labor and paid family members	01031	_____	_____	_____
2. Materials and supplies	01032	_____	_____	_____
3. Others (specify)	01033	_____	_____	_____
TOTAL COSTS	01030	_____	_____	_____

Code	In cash	In kind	Total
01031	_____	_____	_____
01032	_____	_____	_____
01033	_____	_____	_____
01030	_____	_____	_____



COMPUTATIONS/
REMARKS:

All. ENTREPRENEURIAL ACTIVITIES NOT ELSEWHERE CLASSIFIED (INCLUDING ELECTRICITY, GAS AND WATER; FINANCING, INSURANCE, REAL ESTATE AND BUSINESS SERVICES)

(a) During the PERIOD SPECIFIED, did you or any member of your family engage in other entrepreneurial activities not elsewhere classified such as legal, accounting and engineering services; advertising services; and machinery and equipment renting and leasing?

7 4 1

[JANUARY - JUNE 1994]

7 4 2

[JULY - DECEMBER 1994]

All (a) 1 - YES 2 - NO, GO TO NEXT PAGE (PART V)

All (a) 1 - YES 2 - NO, GO TO NEXT PAGE (PART V)

(b) Describe major All (b) Code _____

All (b) Code: _____

activity: _____

(c) During the PERIOD SPECIFIED, did you or any member of your family receive professional or service fees for this activity?

[JANUARY - JUNE 1994]

[JULY - DECEMBER 1994]

All (c) 1 - YES 2 - NO, GO TO All(d) BELOW

All (c) 1 - YES 2 - NO, GO TO All(d) BELOW

Code

Code

What is the total gross receipts for the semester? . . . 01120 _____

01120 _____

(d) During the PERIOD SPECIFIED, did you or any member of your family incur expenses, in cash or in kind, in this activity?

[JANUARY - JUNE 1994]

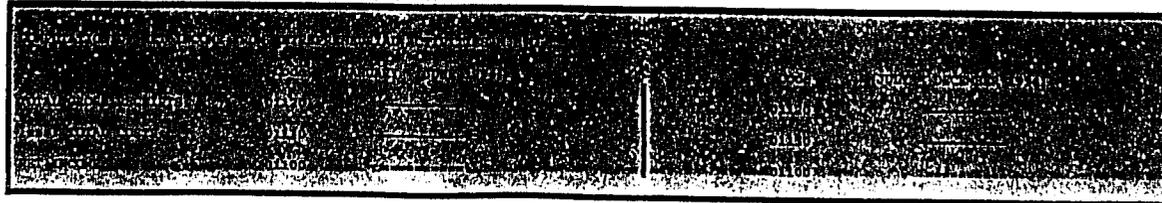
[JULY - DECEMBER 1994]

All (d) 1 - YES 2 - NO, GO TO NEXT PAGE (PART V)

All (d) 1 - YES 2 - NO, GO TO NEXT PAGE (PART V)

Item	Code	In cash	In kind	Total
1. Materials and Supplies	01131	_____	_____	_____
2. Fuel and Lubricants	01132	_____	_____	_____
3. Others (specify)	01133	_____	_____	_____
TOTAL COSTS . . .	01130	_____	_____	_____

Code	In cash	In kind	Total
01131	_____	_____	_____
01132	_____	_____	_____
01133	_____	_____	_____
01130	_____	_____	_____



PART V : HEALTH - CARE

A. HEALTH - CARE EXPENDITURES

(If Part II. D3(a) or D3(b) in pages 29 - 30 has entries, otherwise, go to next page (B))

(1) During the PERIOD SPECIFIED, did you or any member of your family incur any medical expense which was paid for or reimbursed by the member's employer, MEDICARE, health insurance, or other charitable institutions?

7 5 1

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO (A3) BELOW

7 5 2

[JULY - DECEMBER 1994]

1 - YES 2 - NO, GO TO (A3) BELOW

(2) If YES, how much?43307

If YES, how much?43307

(3) During the PERIOD SPECIFIED, did you or any member of the family incur any medical expense which the family paid for in cash or on credit or did you or any member of the family receive as gifts medical goods and supplies which the family member's relative(s)/friend(s) paid for in cash or on credit?

[JANUARY - JUNE 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (B)

[JULY - DECEMBER 1994]

1 - YES 2 - NO, GO TO NEXT PAGE (B)

FACILITY (1)	C O D E S (2)	Total Expenditures Paid by Family Relatives/ Friends (3)	Hospital Room Charges (4)	Prof'l Services (5)	Drugs/ Medicine/ Non- Durables (6)	Vision Products And Other Medical Durables (7)	Labo- ratory Fees (8)
Private Hospitals	43414						
Public Hospitals	43422						
MD Facility (Physician Care in Private/ Outpatient Clinic	43430		XXXXXXXX				
Non-MD Facility (Optometrist, nurse, chiropractor, mid- wives, etc.)	43448		XXXXXXXX				
Dental Clinics	43455		XXXXXXXX				
Hilot And Traditional Health Care	43463		XXXXXXXX				
Self/Home Care	43471		XXXXXXXX	XXXXXXXX			
TOTAL	43406						

C O D E S (2)	Total Expenditures Paid by Family Relatives/ Friends (3)	Hospital Room Charges (4)	Prof'l Services (5)	Drugs/ Medicine/ Non- Durables (6)	Vision Products And Other Medical Durables (7)	Labo- ratory Fees (8)
43414						
43422						
43430		XXXXXXXX				
43448		XXXXXXXX				
43455		XXXXXXXX				
43463		XXXXXXXX				
43471		XXXXXXXX	XXXXXXXX			
43406						

CODES

Codes for Z2081 Class of Worker

Class of Worker Codes

A. For FIES 1985

- 1 Worked for private employer
- 2 Worked for government/government corporation
- 3 Self-employed without any employee
- 4 Employer in own family-operated farm or business
- 5 Worked with pay in own family-operated farm or business
- 6 Worked without pay in own family-operated farm or business

B. For FIES 1988 & 1991

- * 0 Worked for private household
- 1 Worked for private establishment
- 2 Worked for government/government corporation
- 3 Self-employed without any employee
- 4 Employer in own family-operated farm or business
- 5 Worked with pay in own family-operated farm or business
- 6 Worked without pay in own family-operated farm or business

* New/Revised Recode for indicated FIES round