

STATISTICAL AGENCY OF THE REPUBLIC OF KAZAKHSTAN

Approved by the Resolution of
the Statistical Agency of
the Republic of Kazakhstan
7 July, 2000, No 40

D 004

SAMPLING SURVEY OF THE HOUSEHOLDS

**QUARTERLY QUESTIONNAIRE ON
THE HOUSEHOLDS'
EXPENDITURES AND INCOME**

(..... QUARTER)

1. OBLAST _____ □□
2. REGION (RURAL, URBAN) _____ □□
3. PLACE OF RESIDENCE _____ □
(Astana city – 1, rural settlements – 2, large cities – 3, medium-size cities – 4, small towns – 5, Almaty city - 6)
4. NUMBER OF THE HOUSEHOLD _____ □□□□
5. INTERVIEWEE'S CODE _____ □□□
6. PLANNED INTERVIEW DATE day□□ month□□ year□□
7. PLANNED INTERVIEW TIME hour□□ □□minutes
8. ACTUAL INTERVIEW DATE day□□ month□□ year□□
INTERVIEW TIME
9. START: hours□□ □□minutes
10. FINISH: hours□□ □□minutes

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1. RESULTS OF THE VISITS	
1. Result of the first visit <input type="checkbox"/>	<p style="text-align: center;">Visits Results Codes</p> <p>1. interview completed</p> <p>2. interview started but not completed</p> <p>3. interview postponed till another day</p> <p>4. refusal</p> <p>5. interview wasn't carried out due to other reasons</p> <p>6. nobody is at home</p> <p>7. uninhabited apartment</p>
2. Planned time for the second visit “__”_____ at __ h. ____ min	
3. Result of the second visit <input type="checkbox"/>	
4. Planned time for the third visit “__”_____ at __ h. ____ min	
5. Result of the third visit <input type="checkbox"/>	

2. SCHEDULE OF ENTRIES INTO THE DAILY EXPENDITURES JOURNAL

1. Please mark the box if the household refuses to keep a journal
2. Approximate time planned for the journal delivery: “__”_____ at __ h. ____ min
3. If the journal was left at the household during the quarterly interview please note the approximate time for its receipt
“__”_____ at __ h. ____ min.

3. SCHEDULE FOR THE NEXT QUARTERLY INTERVIEWS

1. Please mark the box if the household refuses to participate in the next interviews.
2. Approximate time planned for the interview: “__”_____ at __ h. ____ min

During my visit on (the month of the last quarterly report) I have given to you the quarterly expenditures journal to record major expenditures of your family for the last three months.

INTERVIEWER! Please explain to the responder that this is different from the diary.

1.1 Would you please bring the Quarterly Expenditure Journal in order to start filling the Quarterly Questionnaire in?

First, I would like to transfer the information recorded by you in the Quarterly Expenditure Journal to my Questionnaire. If you recollect any expenditure occurred for the last three months, which you did not record in the Quarterly Expenditure Journal, please advise and I'll add them into the Questionnaire.

1.2 Now I would like to ask a few questions in order to get clarifications regarding clothes, shoes, household goods, furniture, etc. expenditures.

INTERVIEWER! The text at this page should not be delivered word for word. Here you can give your interpretation of the presented information. Further, please ask questions strictly as they are written in the text.

3. UTILITIES EXPENDITURES

Now I would like to record in detail all the expenditures related to your household utilities payments.

3.1. Did you pay a rent fee for this dwelling for the last 3 months? If “Yes”, please specify the amount.

1	2	3
	Yes – 1 No – 2 No answer – 9	Paid amount, Tenge
1 st month of the quarter		
2 nd month of the quarter		
3d month of the quarter		

3.2 Do you have a central heating in your dwelling?

Yes – 1 → 3.3

No – 2 → 3.4

3.3 How much did you pay for the central heating?

Code	1	2		3		4		5		6		7	
		1 st month of the Quarter		2 nd month of the Quarter		3d month of the Quarter		Reference period		Total amount, Tenge		Reference period	
04 5 5 0001	Central heating												

3.4 What kinds of fuel do you use to heat the house and how much (in Tenge) have you spent for each kind of fuel? ↓

In the “Liquid Gas” line please record expenditures made for the purchase of gas in containers used for cooking and other needs

Code	1 Kind of fuel	2	3	4
		1 st month of the Quarter	2 nd month of the Quarter	3d month of the Quarter
04 5 4 0002	Wood			
04 5 4 0001	Coal g			
04 5 4 0003	Peat, pressed dun			
07 2 2 2002	Black oil			
04 5 2 0001	Natural gas (network)			
04 5 2 0002	Liquid gas			
07 2 2 2003	Kerosene			
07 2 2 2001	Diesel, stove fuel			
04 5 4 0099	Other kinds of solid fuel			
07 2 2 2099	Other kinds of fuel and oil			

3.5. How much did you pay for the following utilities services?

1	2	3	4	5	6	7	8	9
Code		Are the following utilities services included into the rent fee? Yes - 1 →3.6 No - 2 NA - 9	1 st month of the Quarter		2 nd month of the Quarter		3 ^d month of the Quarter	
			Total payment, Tenge	Reference period	Total payment, Tenge	Reference period	Total payment, Tenge	Reference period
04 4 1 0002	Hot water							
04 4 1 0001	Cold water							
04 5 2 0001	Natural gas (network)							
04 4 4 0003	Elevator							
04 4 3 0001	Sewerage system							
04 4 2 0001	Wastes disposal							
04 5 1 0001	Electricity							
08 3 0 0005	Radio							
08 3 0 0006	Satellite, cable TV, other							
08 3 0 0001	Telephone user fee							
08 3 0 0002	Long-distance phone calls							
08 3 0 0004	Internet, facsimile							
04 1 1 0001	Regular payments for housing maintenance and operation made to the housing co-operatives							

3.6. How much did you pay for the housing renovations? (excluding monthly regular payments made to the housing co-operatives) tenge

1st month of the Quarter _____ Nothing I don't know how much No answer

2nd month of the Quarter _____ Nothing I don't know how much No answer

3^d month of the Quarter _____ Nothing I don't know how much No answer

4. EDUCATION EXPENDITURES

4.1 Did your family members have any of the following education expenditures? If yes, please specify amount of such expenditures (in Tenge):

Code	1	2 Yes - 1 No - 2 → <u>5.4 to the next line</u> NA - 9	4			5
			How much did you spent?			
			1 st month of the Quarter	2 nd month of the Quarter	3d month of the Quarter	
	Kindergartens user fee					
10 1 0 0001	<i>Private (including baby-sitters services)</i>					
10 1 0 0002	<i>Public institutions</i>					
	Purchase of textbooks					
09 5 1 1011	<i>for schoolchildren</i>					
09 5 1 1012	<i>for students</i>					
03 1 2 3105	Purchase of uniform for schoolchildren					
	Catering expenditures					
11 1 0 0011	<i>for schoolchildren</i>					
11 1 0 0012	<i>for students</i>					
	Train transportation expenditures					
07 3 1 2011	<i>For schoolchildren</i>					
07 3 1 2012	<i>For students</i>					
	Motor transportation expenditures					
07 3 2 1011	<i>For schoolchildren</i>					
07 3 2 1012	<i>For students</i>					
	Other transportation expenditures					
07 3 6 0011	<i>For schoolchildren</i>					
07 3 6 0012	<i>for students</i>					
07 3 3 0011	Aircraft transportation expenditures					
10 1 0 0011	Preliminary Tuition fee for schoolchildren					
10 2 0 0001	Secondary Tuition Fee for schoolchildren					
10 3 0 0001	Professional Secondary Tuition Fee for students					
<u>10 40 0001</u>	<u>High education Tuition Fee for students</u>					
	Other (informal) education expenditures					
10 1 0 0012	<i>For schoolchildren</i>					
10 4 0 0011	<i>For students</i>					
<u>10 5 0 0002</u>	<u>Education for adults</u>					
<u>04 1 1 0002</u>	<u>Occupancy fee for students (pupils)</u>					

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5. HEALTHCARE EXPENDITURES

5.1 Did members of your household have any of the following healthcare expenditures? If yes, please specify amount of such expenditures (in Tenge):

Code	1	2 Yes - 1 No - 2 → <u>6.+ to the next line</u> NA - 9	4 How much did you spent? (in Tenge)			5
			3	1 st month of the Quarter	2 nd month of the Quarter	
06 1 3 0000	Medical equipment and apparatuses					
06 1 1 0000	Medicine (pharmaceuticals)					
06 2 1 0000	Medical services					
06 2 2 0000	Dental services					
06 3 0 0000	In-patient hospitals services					
07 3 4 0000	Vehicle Passenger Transportation to/from the medical facility					
<u>07 3 1 0000</u>	<u>Train Passenger Transportation to/from the medical facility</u>					
07 3 3 0000	Aircraft Passenger Transportation to/from the medical facility					
06 2 3 3001	Other informal expenditures					

6. TRANSPORTATION SERVICES

6.1 What of the following transportation means did members of your family use and how much did you pay for such services (excluding transportation expenditures recorded in the Section 4 “Education Expenditures” and Section 5 “Healthcare Expenditures”) in Tenge?

Code	1	2 Yes - 1 No - 2 → <u>7.+ to the next line</u> NA - 9	4 How much did you spent?			5
			3	1 st month of the Quarter	2 nd month of the Quarter	
07 3 2 0000	Trams, trolley-buses (including purchase of monthly ticket), buses, route taxi					
07 3 1 0000	Train					
07 3 3 0000	Aircraft					
07 3 2 2001	Taxi					
07 3 4 0000	Marine, river transport					
07 3 6 0001	Car hire (for transportation of goods, agricultural products, construction Materials, etc.)					

7. INDIVIDUAL AND OTHER EXPENDITURES

7.1 Did your family have any of the following expenditures? Please specify amount of such expenditures (in Tenge):

Code	1	2			3			4		
		How much did you spent?								
		1 st month of the Quarter			2 nd month of the Quarter			3d month of the Quarter		
03 1 4 0001	Clothes tailoring									
03 1 4 0004	Clothes repair									
03 1 4 0002	Linen washing and treatment									
03 1 4 0003	Dry cleaning and dyeing									
03 2 2 0000	Shoes repair									
05 3 3 0001	Repair of refrigerators, and other machines									
05 3 3 0002	Repair of washing machines									
04 4 5 0001	Meters installation									
04 4 4 0002	Metal doors setting									
05 3 3 0003	Keys production									
05 1 3 0001	Repair of furniture									
05 1 3 0002	Furniture covers renewal									
05 1 3 0003	Production of furniture									
05 3 3 0099	Repair of other home appliances									
07 2 4 0002	Parking place renting									
09 1 5 0001	Repair of TV and radio sets									
08 1 0 0000	Postal services									
12 1 1 1001	Women's hair cut									
12 1 1 1002	Men's hair cut									
12 1 1 1003	Other services provided by beauty shops									
12 1 1 2001	Baths, saunas, showers									
12 3 2 0001	Watch repair									
12 7 1 0000	Ritual services									
12 7 2 0001	Copying services (forms, documents)									
12 7 3 0002	Money mediation									
12 7 2 0003	Legal services									
12 7 2 0004	Other services, not related to the mentioned categories									
09 4 1 0001	Amusement parks services									
09 4 1 0002	Sport facilities services									
09 4 2 1001	Photos production									
09 4 2 1002	Films development and pictures printing									
09 4 2 2001	Cinema									
09 4 2 2002	Theatre									
09 4 2 2003	Concert halls									
09 4 2 2004	Circus									
09 4 2 2005	Museums and exhibitions									
09 4 2 2006	Music lessons									
09 4 2 2007	Extracurricular lessons									
09 4 2 2008	Videotapes hire									
09 6 1 0001	Sightseeing tours and tours to the holiday houses									
09 4 2 2098	Tickets for children to holiday camps									
09 6 0 0002	Tourist tours									
11 4 2 0000	Hotel (accommodation services)									
07 2 3 0001	Technical maintenance and repair of transportation means									
<u>07 24 0001</u>	<u>Vehicle driving lessons</u>									

7.2 Did your family have any of the following expenditures? ↓ **Please, specify the amount in Tenge.**

	1	2	3	4
Code	Type of expenditure	1 st month of the Quarter	2 nd month of the Quarter	3d month of the Quarter
00 00 0050	Real estate tax			
00 00 0052	Land tax (related to real estate)			
00 00 0055	Medical insurance			
00 00 0056	Other			

7.3 Did your family's members pay alimony?

Yes - 1

No - 2

No answer - 9

7.4 If yes, what amount (in Tenge) was paid for alimony from your family's budget for three months of the Quarter? _____

8. TRANSFERS AND ASSISTANCE

5.14-8.1. Have your family assisted the relatives or friends not living with you? What kind of assistance was provided? If the assistance was rendered in the monetary form please specify the amount and if in kind, please try to evaluate it. ↓

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Code	1 Kind of assistance	Yes - 1 No - 2-> to the next line NA - 9	3		4		5	
			1 st month of the Quarter	2 nd month of the Quarter	3d month of the Quarter			
	1	2	3	4	5			
00 0 0 0060	Money							
00 0 0 0061	Food products produced by you							
00 0 0 0062	Food products purchased by you							
003 0 0 000062	Clothes, fabrics, shoes							
06 1 1 0000	Medicine (pharmaceuticals)							
00 0 0 0065	Other							
00 0 0 0063	Childcare		Yes	No	Yes	No	Yes	No
00 0 0 0064	Aged people care, home work assistance		Yes	No	Yes	No	Yes	No

5.16-8.2. Have the relatives or friends not living with you, or charity organizations assisted you (except for charity nutrition)? What kind of assistance was provided? If the assistance was rendered in a monetary form, please specify the amount and if in kind, please try to evaluate it. ↓

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Code	1 Kind of assistance	Yes - 1 No - 2→8.3 NA - 9	3		4		5	
			1 st month of the Quarter	2 nd month of the Quarter	3d month of the Quarter			
			Yes	No	Yes	No	Yes	No
00 0 0 0 60	Money							
03 0 0 0000	Clothes, shoes							
06 1 1 0000	Medicine (pharmaceuticals)							
00 0 0 0065	Other							
00 0 0 0063	Childcare		Yes	No	Yes	No	Yes	No
00 0 0 0064	Aged people care, home work assistance		Yes	No	Yes	No	Yes	No

5.17-8.3. How important was that assistance for you? ↓

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- We would not be able to survive without it _____ 1
 Important, but we would survive without it _____ 2
 Not important _____ 3
 No answer _____ 9

9. FARMING ACTIVITY AT SUBSISTENCY FARMS, RENTED LAND LOTS AND ASSIGNED LAWN-AND-GARDEN SUBURBS, SUMMER HOUSES

9.1 Please advise if your family (you) have an access to any land lot(s)?

Yes _____ 1
 No _____ 2 → 9.7
 No answer _____ 9 → 9.7

I would like to ask a few questions concerning expenditures related to this lot(s) within the last three months.

9.2 Did you spend any money for this land lot(s)?

Yes _____ 1
 No _____ 2 → 9.4
 No answer _____ 9 → 9.4

9.3 What have you spent your money for? ↓

Code	1 Type of expenditure	3 1 st month of the Quarter	4 2 nd month of the Quarter	5 3d month of the Quarter
00 0 0 0070	Rent and purchase of the land			
00 0 0 0071	Land developments			
00 0 0 0072	Fertilizing and pesticides			
00 0 0 0073	Seeds and planting materials			
00 0 0 0074	Hiring of manpower			
00 0 0 0075	Agricultural machinery rent and technical maintenance			
00 0 0 0076	Other			

INTERVIEWER! If the interview takes place not in autumn- winter period and subsidiary farms have no greenhouses → 9.7.

9.4 Have you grown anything at this lot?

Yes _____ 1
 No _____ 2 → 9.7
 No answer _____ 9 → 9.7

9.5 Have you collected any crop from ~~this (these)~~ all the types of land lots(s)?

Yes _____ 1 → 9.6
 No _____ 2 → 9.7
 No answer _____ 9 → 9.7

9.6 What cultivation have you collected? ↓

Code	1 Description of the cultivation	2 How much have you collected within the last three months?	3 Including						9 Other
			4 Unit	5 Used for own consumption, or presented	6 Used for processing	7 Sold	8 Amount of money received from selling	9 Quantity used to feed live-stock and poultry	
01 1 7 2001	Potatoes		kg, t						
01 1 7 1006	Tomatoes		kg, t						
01 1 7 1005	Cucumbers		kg, t						
01 1 7 1003	Beet root		kg, t						
01 1 7 1004	Carrot		kg, t						
01 1 7 1001	Cabbage		kg, t						
01 1 7 1002	Bulb onion		kg, t						
01 1 7 1011	Green onion,		kg, t						
01 1 7 1008	Garlic		kg, t						
01 7 1 1009	Kabachki Egg-plant		kg, t						
	Patissony								
	Marrow		kg, t						
01 1 7 1099	Other vegetables		kg, t						
00 0 0 0035	Beans		kg, t						
01 1 6 3001	Strawberries, raspberries		kg, t						
01 1 6 3002	Blackberries, gooseberries		kg, t						
01 1 6 3003	Plumps, cherries, sour cherries		kg, t						
01 1 6 3004	Other berries		kg, t						
01 1 6 1002	Grapes		kg, t						
01 1 5 1001	Apples Pears		kg, t						
01 1 6 1005	Water-melons,		kg, t						
01 1 6 1006	Melons		kg, t						
01 1 6 1099	Other fruits		kg, t						
09 3 3 0001	Flowers	X	Unit		X		X	X	
01 1 6 2103	Sun-flowers (seeds)		kg, t						
00 0 0 0010	Crops		kg, t						
	Including:								
00 0 0 0001	Wheat		kg, t						
00 0 0 0002	Corn		kg, t						
00 0 0 0003	Oats		kg, t						
00 0 0 0003	Rice		kg, t						
00 0 0 0005	Buckwheat		kg, t						
00 0 0 0021	Grass Others		kg, t						
00 0 0 0020	Tobacco		kg, t					X	
00 0 0 0021	Forage roots		kg, t						
00 0 0 0030	Mowing grass		kg, t	X					

9.7 Do you keep livestock, poultry, bees and other agricultural animals?

Yes _____ 1 → 9.8
 No _____ 2 → 9.12
 No answer _____ 9 → 9.12

9.8. I would like to ask a few questions on expenditures related to the keeping of these animals (Tenge). ↓

Code	1	2 Did you have any of the following expenditures? Yes - 1 No - 2 → 9.9 NA - 9	3 How much did you spent, Tenge		
			4 1 st month of the Quarter	5 2 nd month of the Quarter	6 3d month of the Quarter
00 0 0 0080	Forage purchase for live-stock				
00 0 0 0081	Forage purchase for poultry				
00 0 0 0082	Veterinary services				
07 3 0 0000	Transportation services				
00 0 0 0083	Manpower hire				
00 0 0 0084	Slaughter and slicing				
00 0 0 0085	Live-stock insurance				
00 0 0 0086	Other				

9.9 Now let us discuss purchases and selling of livestock, bees and poultry:

	1 Did you purchase any agricultural animals, bees or poultry? Yes - 1 No - 2 NA - 9	2 How much did you spent for these purposes (Tenge)?	3 Did you sell livestock, bees or poultry? Yes - 1 No - 2 NA - 9	4 How much did you earn from the sale of such livestock, bees and poultry (Tenge)?
1 st month of the Quarter				
2 nd month of the Quarter				
3d month of the Quarter				

9.10. Have you got any products from your animals?

Yes _____ 1
 No _____ 2 → 9.12
 No answer _____ 9 → 9.12

9.11. What products have you got? ↓

Code	1 Description of the cultivation	2 Yes - 1 No - 2 NA - 9	3 How much products have you got for the last three months?	including				7 Used for processing	8 Losses
				4 Used for own consumption, or presented	5 Sold		6 Used for processing		
					Quantity	Cost (Tenge)			
01 1 2 1100	Beef, veal (kg)								
01 1 2 1601	Horse meat								
01 1 2 1300	Pork (kg)								
01 1 2 1500	Poultry meat								
01 1 2 1400	Mutton, lamb, goat's (kg)								
01 1 2 16030	Camel —Other types of meat and by-products (kg)								
01 1 2 1600	By-products								
01 1 4 1100	Milk (l)								
01 1 4 2000	Eggs (unit)								
00 0 0 0040	Wool, down (kg)								
00 0 0 0045	Leather (units)								
01 1 8 2002	Honey (kg)								

9.12 Have your family sold any products produced prior to the last three months?

Yes _____ 1
 No _____ 2 →10.1
 No answer _____ 9 →10.1

9.13. What have you sold?

Code	1 Description of the products	3 Cost of the products		
		2 1 st month of Q	2 nd month of Q	4 3 ^d month of Q

10. PRODUCTION OF GOODS AND SERVICES

10.1 What consumer goods and agricultural products has your family produced during three months of the Quarter and what was the cost of such products and operational costs (in Tenge)?

Code	1 Description	2 Produced Yes - 1 No - 2 NA - 9	3 Cost of the produced products	4 Including amount earned from the sale	5 Operational costs
01 1 0 0000	Food products				
01 1 4 1000	Dairy produce				
01 1 4 1400	Cheese				
01 1 1 3000	Bread				
01 1 2 2000	Sausages and other meat products				
01 1 5 3001	Vegetable Oil				
02 1 2 3000	Home-made wine, brew				
01 1 1 2000	Flour-and-cereals goods				
01 1 1 2100	Flour				
01 1 1 2200	Cereals				
01 1 9 2000	Other food products				
00 0 0 0090	Textile goods and ready-made garments				
00 0 0 0091	Woodworking				
00 0 0 0092	Construction materials				
00 0 0 0093	Other non-food products				

10.2 What services has your family provided and how much money have you received for the provided services without operations costs, i.e. net income or loss (in tenge)?

Code	1 Description	2 Provided Yes - 1 No - 2 NA - 9	3 1 st month of Quarter	4 2 nd month of Quarter	5 3d month of Quarter
07 3 0 0000	Transportation services				
00 0 0 0094	Construction, renovation				
00 0 0 0095	Trade and food delivery				
	Individual				
03 1 4 0000	Clothes, shoes custom tailoring, repair				
	Typing				
09 4 2 1001	Photos production				
12 1 1 1000	Barber's services and beauty care				
	Other				
05 3 3 0000	Repair of household devices				
10 0 0 0000	Educational (tutorial and other)				
06 0 0 0000	Healthcare (massage, injections, etc.)				
04 1 1 0000	Actual Housing rent fee				
00 0 0 040075	Agricultural machinery rent				
07 2 3 0000	Repair of cars and other transportation means				
00 0 0 0096	Others				

12. HOUSEHOLD INCOME

INTERVIEWER! Please exclude people younger than 15 years old from this poll. If during the interview an adult member of the family is present please refer directly to him. Otherwise, the information should be presented by the main responder. At the beginning of each page of the Individual Questionnaire please write down the number of each member of the family based on the Household Demographic Card. If the family has more than two adults, please use an additional Individual Questionnaire.

INTERVIEWER! How many adults in this family?

If the question is answered by the relevant member of the family please mark the box...

If the question is answered by somebody else please put the respondent's number as per the control register...

If the question is answered by the person being not the member of the family, please put 99.

12.1. Have you been working during any period of time within the last three months?

Yes _____ 1 → 12.2

No _____ 2 → 12.75

No answer _____ 9

12.2. Each family members' income↓

Code	1	2	3	4	5	6	7	8	9	10
	1 st month of the Quarter									
	Family member's number									
45	Remuneration (Salary, including payments in kind)									
50	Pension for age									
55	Scholarship									
60	Targeted social assistance ¹⁾									
65	Assistance for housing cost									
67	Budget-funded social benefits ²⁾									
80	Special budget-funded benefits ³⁾									
98	Other income ⁴⁾									
97	Long-service bonus for military men, law enforcement personnel									

Code	1	2	3	4	5	6	7	8	9	10
	2 nd month of the Quarter									
	Family member's number									
45	Remuneration (Salary, including payments in kind)									
50	Pension for age									
55	Scholarship									
60	Targeted social assistance ¹⁾									
65	Assistance for housing cost									
67	Budget-funded social benefits ²⁾									
80	Special budget-funded benefits ³⁾									
98	Other income ⁴⁾									
97	Long-service bonus for military men, law enforcement personnel									

Code	1	2	3	4	5	6	7	8	9	10
	3 rd month of the Quarter									
	Family member's number									
45	Remuneration (Salary, including payments in kind)									
50	Pension for age									
55	Scholarship									
60	Targeted social assistance ¹⁾									
65	Assistance for housing cost									
67	Budget-funded social benefits ²⁾									
80	Special budget-funded benefits ³⁾									
98	Other income ⁴⁾									
97	Long-service bonus for military men, law enforcement personnel									

¹⁾ for disabled children, learned at home by unemployed mothers, for having 4 and more kids below 7 years old, for childbirth, social assistance to unemployed, for funerals etc..

²⁾ for loss of breadwinner, to disabled children below 16 years old, for disablement, by age.

³⁾ people, equalized to disabled persons' allowance and guarantees and Second World War veterans, social assistance to widows of military service members, died in Second World War, invalids of 1, 2 and 3 groups, mothers with many children etc.

⁴⁾ Money received from selling agricultural products, real estate, personal property, real estate renting, alimony etc..

12.3. Have you fulfilled any other work to get additional earnings during the last three months?

- Yes _____ 1
 No _____ 2 → 12.5
 No answer _____ 9 →

12.4. How much have you approximately earned? _____ tenge

12.5. Did you obtain any of the following single-time payments due to the work termination or from the previous place of work?

Code	1 Type of payment	2 Yes – 1 No – 2 NA – 9	3 Amount received for three months (tenge)
10	Severance pay due to the termination of the labor agreement		
20	Payments for the employment period due to the reduction of staff, enterprise reorganization or liquidation		
30	Financial assistance		
40	Singe-time payments to retired veterans		

12.6. Now I would like to ask about other sources of income of your household:

Code	1	2 Did you receive any of the following Yes - 1 No - 2 NA - 3	4 Amount of income, Tenge			5
			3 1 st month of the Quarter	4 2 nd month of the Quarter	5 3d month of the Quarter	
1	Alimony					
2	Dividends from shares and other securities not related to the place of work, deposits interests					
3	Sale of the real estate					
4	Sale of personal or house property (clothes, jewelry,)					
5	Did you obtain any loans? What was the amount of such loans?					
6	Did you use any savings, which you had at the beginning of the Quarter?		X	X	X	

12.7 Have you repaid any amount under the credits or loans during the Quarter? How much have you repaid?

_____ Tenge

12.8. Have you repaid any debt, which you had at the beginning of the quarter?

Yes _____ 1
 No _____ 2
 No answer _____ 9

12.9. What amount have you repaid?

_____ Tenge

12.10. Have you managed to save any amount within the last three months?

Yes _____ 1
No _____ 2
No answer _____ 9

12.11. Please advise if you are satisfied with the monetary income of your family within the last three months?

Not satisfied at all _____ 1
Not satisfied _____ 2
We can find a way out _____ 3
Satisfied _____ 4
Fully satisfied _____ 5
No answer _____ 9

12.12. What do think with the current prices what monthly income should have a family with the same number of people as yours not to feel itself poor?

_____ Tenge

END: On behalf of the National Statistics Agency of the Republic of Kazakhstan I would like to thank you for the cooperation and assistance. My next visit will be on _____