

## Section 5 – TOPICAL MODULES

### Part A – WORK DISABILITY HISTORY

<b>CHECK ITEM T1</b>	Refer to cc item 24. What is . . . 's age?	<b>8300</b>	1 <input type="checkbox"/> 15 years old – <i>SKIP to Statement D, page 56</i> 2 <input type="checkbox"/> 16 to 67 years old 3 <input type="checkbox"/> 68 years old or older – <i>SKIP to Statement D, page 56</i>
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**STATEMENT C** → **Now I want to talk about any health or physical condition . . . may have that affected . . . 's ability to work.**

<b>CHECK ITEM T2</b>	Is "Disabled" (code 171) marked on the ISS for . . . ?	<b>8302</b>	1 <input type="checkbox"/> Yes – <i>SKIP to 1a</i> 2 <input type="checkbox"/> No
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<b>CHECK ITEM T3</b>	Refer to cc item 47. Is "Disabled" (code 171) marked on the control card for . . . ?	<b>8304</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to 1b</i>
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<b>1a. We have recorded that . . . 's health or condition limits the kind or amount of work . . . can do. Is that correct?</b>	<b>8306</b>	1 <input type="checkbox"/> Yes – <i>SKIP to 1c</i> 2 <input type="checkbox"/> No – <i>SKIP to Statement D, page 56</i>
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<b>b. Does . . . have a physical, mental, or other health condition which limits the kind or amount of work . . . can do?</b>	<b>8308</b>	1 <input type="checkbox"/> Yes – <i>Mark "171" on ISS</i> 2 <input type="checkbox"/> No – <i>SKIP to Statement D, page 56</i>
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<b>c. When did . . . become limited in the kind or amount of work that . . . could do at a job?</b>	<b>8310</b>	[ ] [ ] Month      x1 <input type="checkbox"/> DK
	<b>8312</b>	1 9 [ ] [ ] Year      x1 <input type="checkbox"/> DK
		OR
	<b>8314</b>	x3 <input type="checkbox"/> Person was limited before person became of working age – <i>SKIP to 2a</i> x5 <input type="checkbox"/> Person became limited after retiring – <i>SKIP to Statement D, page 56</i>

<b>d. Was . . . employed at the time . . . 's work limitation began?</b>	<b>8316</b>	1 <input type="checkbox"/> Yes – <i>SKIP to 2a</i> 2 <input type="checkbox"/> No
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<b>e. When was the last time . . . worked before . . . 's work limitation began?</b>	<b>8318</b>	[ ] [ ] Month      x1 <input type="checkbox"/> DK
	<b>8320</b>	1 9 [ ] [ ] Year      x1 <input type="checkbox"/> DK
		OR
	<b>8322</b>	x3 <input type="checkbox"/> Had never been employed before work limitation began

<i>ASK OR VERIFY – (SHOW FLASHCARD EE)</i>	<b>8324</b>	Code      Name of health condition [ ] [ ] _____ _____
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**2a. What health condition is the main reason for . . . 's work limitation?**

<i>ASK OR VERIFY –</i>	<b>8326</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to Check Item T4</i>
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**b. Was this condition caused by an accident or injury?**

<b>c. Where did the accident or injury take place – was it (Read categories) –</b> <i>Mark (X) only one.</i>	<b>8328</b>	1 <input type="checkbox"/> <b>On the job?</b> 2 <input type="checkbox"/> <b>During service in the Armed Forces?</b> 3 <input type="checkbox"/> <b>In the home?</b> 4 <input type="checkbox"/> <b>Somewhere else?</b>
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TOPICAL MODULES

<b>CHECK ITEM T4</b>	Is "Worked" (code 170) marked on the ISS?	<b>8330</b>	1 <input type="checkbox"/> Yes – <i>SKIP to Check Item T5</i> 2 <input type="checkbox"/> No
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<b>3a. Does . . . 's health or condition prevent . . . from working at a job or business?</b>	<b>8332</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to 4a</i>
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<b>b. When did . . . become unable to work at a job?</b>	<b>8334</b>	[ ] [ ] Month      x1 <input type="checkbox"/> DK
	<b>8336</b>	1 9 [ ] [ ] Year      x1 <input type="checkbox"/> DK
		OR
	<b>8338</b>	x3 <input type="checkbox"/> Has never been able to work at a job – <i>SKIP to Statement D, page 56</i>

**Section 5 – TOPICAL MODULES (Continued)**

**Part A – WORK DISABILITY HISTORY (Continued)**

**CHECK  
ITEM T5**

Refer to item 8a, page 4.

Did . . . usually work 35 or more hours per week during the reference period?

8340

- 1  Yes – *SKIP to 4b*
- 2  No

**4a. Is . . . now able to work at a full-time job or is . . . only able to work part time?**

8342

- 1  Full-time
- 2  Part-time
- 3  Not able to work – *SKIP to Statement D, page 56*

**b. Is . . . now able to work regularly or is . . . only able to work occasionally or irregularly?**

8344

- 1  Regularly
- 2  Only occasionally or irregularly
- 3  Not able to work – *SKIP to Statement D, page 56*

**c. Is . . . now able to do the same kind of work . . . did before . . .’s work limitation began?**

8346

- 1  Yes, able to do same kind of work
- 2  No, not able to do same kind of work
- 3  Did not work before limitation began

NOTES

TOPICAL MODULES

**Section 5 – TOPICAL MODULES (Continued)**

**Part B – EDUCATION AND TRAINING HISTORY**

**STATEMENT D** → Now I would like to ask you a few questions about . . . 's education and any work training . . . may have received.

**CHECK ITEM T6** Refer to cc items 31b and 31c.  
Has . . . completed the 12th grade? **8400** 1  No, has not completed 12th grade  
2  Yes, has completed 12th grade – *SKIP to Item 3a*

**1. When did . . . last attend elementary or high school?**  
**8402**   Month x1  DK  
**8404**     Year x1  DK  
**8406** 1  Currently attending – *SKIP to Check Item T10 page 59*  
2  Never attended

**2. Has . . . received a high school diploma? (Include GED's.)** **8408** 1  Yes  
2  No – *SKIP to Check Item T9*

**3a. When did . . . receive a high school diploma?**  
**8410**   Month x1  DK  
**8412**     Year x1  DK

**b. Was the high school that . . . attended public; private, church-related; or private, not church-related?** **8414** 1  Public  
2  Private, church-related  
3  Private, not church-related  
4  Did not attend high school  
x1  DK

**CHECK ITEM T7** Refer to cc item 31b.  
Was . . . 's highest grade attended at least one year of college? (Codes 21–26 in cc item 31b) **8416** 1  Yes  
2  No – *SKIP to Check Item T9*

**4a. When did . . . first attend college, a university, or a technical, business, or vocational school beyond high school?**  
**8418**   Month x1  DK  
**8420**     Year x1  DK

**b. What is the highest degree beyond a high school diploma that . . . has earned?** **8422** 1  PhD or equivalent  
2  Professional degree such as Dentistry, Medicine, Law, or Theology  
3  Master's degree  
4  Bachelor's degree  
5  Associate degree  
6  Vocational, technical, or business certificate or diploma  
7  Has not earned a degree } *SKIP to 4f*  
x1  DK

**c. When did . . . receive that degree?**  
**8424**   Month x1  DK  
**8426**     Year x1  DK

(SHOW FLASHCARD FF)  
**d. In what field of study did . . . receive that degree?** **8428** Code  Field of study   
x1  DK

**CHECK ITEM T8** Refer to item 4b above.  
Did . . . receive a degree higher than a Bachelor's degree? (Box 1, 2, or 3 marked in item 4b.) **8430** 1  Yes  
2  No – *SKIP to Check Item T9*

**4e. When did . . . receive his/her Bachelor's degree?**  
**8432**   Month x1  DK  
**8434**     Year x1  DK } *SKIP to Check Item T9*

(SHOW FLASHCARD FF)  
**f. In what field of study were the courses that . . . took at college or university?** **8436** Code  Field of study   
x1  DK

**9. When was the last time that . . . was a student at a college or university?**  
**8438**   Month x1  DK  
**8440**     Year x1  DK  
OR  
**8442** 1  Is still a student

**Section 5 – TOPICAL MODULES (Continued)**

**Part B – EDUCATION AND TRAINING HISTORY (Continued)**

**CHECK  
ITEM T9**

Refer to cc item 24.  
Is . . . 65 years of age or older?

- 8444** 1  Yes – SKIP to Check Item T10, page 59  
2  No

**5a. Has . . . ever received training designed to help find a job, improve job skills or learn a new job?**

- 8446** 1  Yes  
2  No  
x1  DK } SKIP to Check Item T10, page 59

**b. Was any of this training sponsored by any of the following programs (Read categories)?**

Mark (X) all that apply.

- 8448** 1  Job Training Partnership Act (JTPA) or Comprehensive Employment Training Act (CETA)  
**8450** 2  Job Opportunities and Basic Skills (JOBS) or Work Incentive Program (WIN)  
**8452** 3  Food Stamps Work Program  
**8454** 4  Other program sponsored by the Welfare Program or AFDC  
**8456** 5  Veterans' Training Programs  
**8458** 6  No

**c. What type of training program is (was) this?**

Mark (X) all that apply.

- 8460** 1  Classroom training – job skills  
**8462** 2  Classroom training – basic education  
**8464** 3  On-the-job training  
**8466** 4  Job search assistance  
**8468** 5  Work experience  
**8470** 6  Other

**d. Where did . . . receive this training?**

Mark (X) all that apply.

- 8472** 1  Apprenticeship program  
**8474** 2  Business, commercial, or vocational school  
**8476** 3  Junior or community college  
**8478** 4  Program completed at a 4 year college or graduate school  
**8480** 5  High school vocational program  
**8482** 6  Training program at work  
**8484** 7  Military (exclude basic training)  
**8486** 8  Correspondence course  
**8488** 9  Training or experience received on previous job  
**8490** 10  Sheltered workshop  
**8492** 11  Vocational rehabilitation centers  
**8494** 12  Other

**e. Does . . . use this training on . . . 's (most recent) job?**

- 8496** 1  Yes  
2  No

**f. When did . . . start this (most recent) training?**

(If more than one training occurred, ask about the most recent one.)

- 8498**   Month x1  DK  
**8500**     Year x1  DK

**g. For how many weeks did . . . attend this (most recent) training program?**

- 8502**    Weeks  
**8504** x3  Currently attending  
x4  Less than 1 week  
x1  DK

**h. Who paid for this (most recent) program?**

Mark (X) all that apply.

- 8506** 1  Self or family  
**8508** 2  Employer  
**8510** 3  Federal, State, or local government  
**8512** 4  Someone else

**GO to Check Item T10, page 59**

NOTES

NOTES

**Section 5 – TOPICAL MODULES (Continued)**

**Part C – MARITAL HISTORY**

**CHECK  
ITEM T10**

*Refer to cc item 26a.*  
What is . . . 's current marital status?

- 8600** 1  Married, spouse present  
 2  Married, spouse absent  
 3  Widowed  
 4  Divorced  
 5  Separated  
 6  Never married – *SKIP to Statement F, page 61*

**STATEMENT E**

Now I have a few questions about . . . 's marital history.

**1. How many times has . . . been married?**

- 8602** 1  1 – *SKIP to Check Item T14, page 60*  
 2  2  
 3  3  
 4  4 +

**2a. In what month and year did . . . get married for the first time?**

- 8604**   Month x1  DK  
**8606**     Year x1  DK

**b. Did . . . 's first marriage end in widowhood or in divorce?**

- 8608** 1  Widowhood  
 2  Divorce

**c. In what month and year was . . . (widowed/divorced)?**

- 8610**   Month x1  DK  
**8612**     Year x1  DK

**CHECK  
ITEM T11**

*Refer to item 2b above.*  
Is "Widowhood" marked in item 2b?

- 8614** 1  Yes – *SKIP to Check Item T12*  
 2  No

**2d. In what month and year did . . . actually stop living with . . . 's spouse?**

- 8616**   Month x1  DK  
**8618**     Year x1  DK

**CHECK  
ITEM T12**

*Refer to item 1 above.*  
How many times has . . . been married?

- 8620** 1  2 – *SKIP to Check Item T14, page 60*  
 2  3 +

**3a. In what month and year did . . . get married for the second time?**

- 8622**   Month x1  DK  
**8624**     Year x1  DK

**b. Did . . . 's second marriage end in widowhood or in divorce?**

- 8626** 1  Widowhood  
 2  Divorce

**c. In what month and year was . . . (widowed/divorced)?**

- 8628**   Month x1  DK  
**8630**     Year x1  DK

**CHECK  
ITEM T13**

*Refer to item 3b above.*  
Is "Widowhood" marked?

- 8632** 1  Yes – *SKIP to Check Item T14, page 60*  
 2  No

**3d. In what month and year did . . . actually stop living with . . . 's second spouse?**

- 8634**   Month x1  DK  
**8636**     Year x1  DK

NOTES

**Section 5 - TOPICAL MODULES (Continued)**

**Part C - MARITAL HISTORY (Continued)**

<b>CHECK ITEM T14</b>	Has a Wave 2 interview been obtained for ...'s spouse?	<b>8638</b>	<input type="checkbox"/> Yes - <i>SKIP to Statement F</i> <input type="checkbox"/> No <input type="checkbox"/> No, no spouse in household
<b>4a. In what month and year did ... get married (most recently)?</b>		<b>8640</b>	<input type="text"/> <input type="text"/> Month      x1 <input type="checkbox"/> DK <b>8642</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year      x1 <input type="checkbox"/> DK
<b>CHECK ITEM T15</b>	Refer to Check Item T10. What is ...'s current marital status?	<b>8644</b>	<input type="checkbox"/> Married, spouse present } <i>SKIP to Statement F</i> <input type="checkbox"/> Married, spouse absent } <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated - <i>SKIP to item 4c</i>
<b>4b. In what month and year was ... (widowed/divorced)?</b>		<b>8646</b>	<input type="text"/> <input type="text"/> Month      x1 <input type="checkbox"/> DK <b>8648</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year      x1 <input type="checkbox"/> DK
<b>CHECK ITEM T16</b>	Refer to Check Item T15. Is "Widowed" marked?	<b>8650</b>	<input type="checkbox"/> Yes - <i>SKIP to Statement F</i> <input type="checkbox"/> No
<b>4c. When did ... actually stop living with ...'s (most recent) spouse?</b>		<b>8652</b>	<input type="text"/> <input type="text"/> Month      x1 <input type="checkbox"/> DK <b>8654</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year      x1 <input type="checkbox"/> DK

**GO to Statement F**

NOTES

**Section 5 - TOPICAL MODULES (Continued)**

**Part D - MIGRATORY HISTORY**

**STATEMENT F**

Now I have some questions about places where . . . has lived in the past, and where . . . was born.

<p><b>1. When did . . . move into this home/apartment/mobile home?</b></p>	<p>8700 <input type="text"/> <input type="text"/> Month <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p>8702 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p align="center">x4 <input type="checkbox"/> Always lived here - <i>SKIP to Check Item T18, page 62</i></p>
<p><b>2. Before living here, where did . . . live?</b> <i>(Refer to Flashcard GG for State or country code.)</i></p>	<p>8704 1 <input type="checkbox"/> Same State, same county 2 <input type="checkbox"/> Same State, different county <input type="checkbox"/> Different State - <i>Specify code</i></p> <p>8706 <input type="text"/> <input type="text"/> <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p><input type="checkbox"/> Different country - <i>Specify code</i></p> <p>8708 <input type="text"/> <input type="text"/> <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p align="right">} <i>SKIP to Item 6</i></p>
<p><b>3. During what period of time did . . . live there?</b></p>	<p>8709 x4 <input type="checkbox"/> Lived there since birth - <i>SKIP to Check Item T18, page 62</i></p> <p align="center">FROM</p> <p>8710 <input type="text"/> <input type="text"/> Month <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p>8712 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p align="center">TO</p> <p>8714 <input type="text"/> <input type="text"/> Month <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p>8716 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year <span style="float:right">x1 <input type="checkbox"/> DK</span></p>
<p><b>4. Has . . . ever lived in another State or foreign country?</b></p>	<p>8718 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - <i>SKIP to item 7</i></p>
<p><b>5. What State or foreign country was that?</b> <i>(If more than one, ask for most recent.)</i> <i>(Enter code from Flashcard GG.)</i></p>	<p align="center">Specify code</p> <p>8720 <input type="text"/> <input type="text"/> <span style="float:right">x1 <input type="checkbox"/> DK</span></p>
<p><b>6. During what period of time did . . . live there?</b></p>	<p align="center">FROM</p> <p>8722 <input type="text"/> <input type="text"/> Month <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p>8724 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p align="center">TO</p> <p>8726 <input type="text"/> <input type="text"/> Month <span style="float:right">x1 <input type="checkbox"/> DK</span></p> <p>8728 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year <span style="float:right">x1 <input type="checkbox"/> DK</span></p>
<p><b>7. In what State or foreign country was . . . born?</b> <i>(Enter code from Flashcard GG.)</i></p>	<p align="center">Specify code</p> <p>8730 <input type="text"/> <input type="text"/></p>
<p><b>CHECK ITEM T17</b> <i>Refer to item 7 above.</i> Does the code in item 7 equal a foreign country code of 62-92 or 99?</p>	<p>8732 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No - <i>SKIP to Check Item T18, page 62</i></p>
<p><b>8. Is . . . a naturalized citizen of the United States?</b></p>	<p>8734 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> No, born abroad of American parent or parents - <i>SKIP to Check Item T18, page 62</i></p>
<p><b>9. When did . . . come to the United States to stay?</b></p>	<p>8736 <input type="text"/> 1 <input type="text"/> 9 <input type="text"/> <input type="text"/> Year</p> <p align="center">x5 <input type="checkbox"/> Before 1901</p>

NOTES

**Section 5 - TOPICAL MODULES (Continued)**

**Part E - FERTILITY HISTORY**

**CHECK ITEM T18**

Refer to cc item 24 and 28.  
What is . . . 's age and sex?

8750

- 1  Female - Read Statement G and then SKIP to item 2a
- 2  Male, 18 + years old
- 3  Male, 15-17 years old - SKIP to Check Item T26, page 64

**STATEMENT G**

**Now I have a few questions about the number of children, if any, that have been born to . . .**

**1. How many children, IF ANY, is . . . the father of?**  
(If previously married, include all children born in previous and current marriages. Do not count adopted, foster, or stepchildren.)

8752

Number  
x3  None  
x1  DK

SKIP to Check Item T26, page 64

**2a. How many children, if any, has . . . ever had?** (Do not count stillbirths, adopted, foster, or stepchildren.)

8754

Number  
x3  None - SKIP to Check Item T26, page 64

**CHECK ITEM T19**

Refer to cc item 24.  
Is . . . 65 years of age or older?

8756

- 1  Yes - SKIP to Check Item T26, page 64
- 2  No

**2b. Are all of . . . 's children currently living in this household?**

8758

- 1  Yes
- 2  No - SKIP to Check Item T21

**CHECK ITEM T20**

Refer to cc item 24.

Verify the birth date of . . . 's first born and last child born (if more than one child ever born) and enter the person number of the child(ren).

Note: If only 1 child born, use the boxes for first child. Use the last child boxes only when there are 2 or more children.

First child	8760	<input type="text"/>	Month	<input type="text"/>	Year	8762	<input type="text"/>	<input type="text"/>	Child's number	8764	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last child	8766	<input type="text"/>	Month	<input type="text"/>	Year	8768	<input type="text"/>	<input type="text"/>	Child's number	8770	<input type="text"/>	<input type="text"/>	<input type="text"/>

SKIP to Check Item T26, Page 64

**CHECK ITEM T21**

Refer to item 2a.  
How many children has . . . ever had?

8778

- 1  One child - SKIP to 4a
- 2  2 + children

**3a. When was . . . 's last child born?**

8780

Month x1  DK

8782

1 9   Year x1  DK

**CHECK ITEM T22**

Refer to item 3a.  
Was . . . 's last child born on or after January 1, 1970?

8784

- 1  Yes
- 2  No - SKIP to 4a

ASK OR VERIFY -

**3b. With whom does the child live now?**

8786

- 1  Resides in this household - Go to Check Item T23
- Resides elsewhere**
- 2  In his/her own household
- With relatives**
- 3  With own father
- 4  With own grandparent(s)
- 5  With adoptive parent(s)
- 6  With other relative(s)
- With nonrelatives**
- 7  In foster care/foster family
- 8  In an institution (hospital)
- 9  In school
- 10  In correctional facility
- 11  Other
- 12  Deceased
- 13  DK

SKIP to 4a

**CHECK ITEM T23**

Write the person number of the last child.

8788

Person number of last child



**Section 5 - TOPICAL MODULES (Continued)**

**Part F - HOUSEHOLD RELATIONSHIPS**

**CHECK ITEM T26** What is the composition of this household? 9266

1 One person HH .....  
 2 Two person HH consisting of husband and wife  
 3 Two person HH consisting of non-relatives  
 4 Other

*SKIP to Check Item C1, page 67*

**CHECK ITEM T27** Is this the Reference Person's questionnaire? 9268

1 Yes  
 2 No - *SKIP to Check Item C1, page 67*

*Pretranscribe each person's name and person number into column heading a-n; list names and person numbers in the SAME ORDER in the roster down the left side of this page.*

**AT TIME OF INTERVIEW**

*Verify the roster against the current household composition in cc items 18 and 19a. If a person who was pretranscribed has left the household since last wave, **line out** name and person number in roster space and column. If a person has entered the household since last wave, **write in** name and person number in the first available (blank) roster space and column.*

**STATEMENT H** ➔ **Now I need to record the EXACT relationships among the persons living here. Please answer by describing adoptive, step, or foster relationships, where appropriate.**  
*For each person number listed on the left side of this page, ask question 1 and enter codes from Flashcard HH.*

	Name	Name	Name	Name	Name	Name
ASK OR VERIFY - <b>1. What is the EXACT relationship of (person listed in roster) to (each person listed in columns a-n)?</b>  <b>ROSTER</b>	9272 Person No.	9274 Person No.	9276 Person No.	9278 Person No.	9280 Person No.	9282 Person No.
	a.	b.	c.	d.	e.	f.
9300 Name Person No.						
9330 Name Person No.	9332					
9360 Name Person No.	9362	9364				
9390 Name Person No.	9392	9394	9396			
9420 Name Person No.	9422	9424	9426	9428		
9450 Name Person No.	9452	9454	9456	9458	9460	
9480 Name Person No.	9482	9484	9486	9488	9490	9492
9510 Name Person No.	9512	9514	9516	9518	9520	9522
9540 Name Person No.	9542	9544	9546	9548	9550	9552
9570 Name Person No.	9572	9574	9576	9578	9580	9582
9600 Name Person No.	9602	9604	9606	9608	9610	9612
9630 Name Person No.	9632	9634	9636	9638	9640	9642
9660 Name Person No.	9662	9664	9666	9668	9670	9672
9690 Name Person No.	9692	9694	9696	9698	9700	9702

**GO to Check Item C1, page 67**

