## Appendix 4 Questionnaire Form

Name of sampling householder:Name of household head:	Addre	ss:
	Classification of Sampling Farm Household	Interview Status  □1.Original sampled registered household
	1. Farm household	Reason for substitution:
	2. Non-farm household	☐2. Excluded objects ☐3. The sample registered household changing register to other address.
		☐4. The sample registered household not living at the registered address.
City or Urbani- Serial No. of No. of Sample		□5. Nobody at home
County zation First Sample Household		□6. Refused
		☐7. Address not existed
		□8. Other:

### 1. Household Member

			Members living in the household					Members living											
		W	ith							ister	as		Vith de-hol			outside with the same household register as			
	Item			tŀ	ie h	ouse	hole	lhe	ad				ousel				ouseho		
Member code		1	2	3	4	5	6	7	8	9	10	31	32	33	34	51	52	53	54
Name																			
Relation to the	household head																		
Sex												<u> </u>			<u>.</u>	<u> </u>	ļ		
Age																			
	Educational attainment	ļ										<u> </u>			<u> </u>	<u>.</u>			ļ
Education	Graduate or not	ļ										ļ			ļ	ļ			ļ
	public sector or not										L	ļ			ļ	<u> </u>			ļ
Full time	Industry										ļ	ļ		ļ	ļ	ļ	ļ	ļ	į
	Occupation																		
Part time											<u> </u>	<u> </u>			<u> </u>	<u> </u>	<u> </u>		
Socio-economic	c status										<u></u>	<u> </u>			<u></u>	<u> </u>	ļ		<u> </u>
Employment st		L.,																	
Employment o											<u></u>	<u> </u>			<u> </u>	<u> </u>	<u> </u>		
Income recipier	nt or not										<u></u>	<u> </u>			<u></u>	<u> </u>	ļ		<u> </u>
Place of work		<u>L</u> .												9					
M arried status											L	<u> </u>			ļ	ļ	ļ		<u> </u>
	No. of outpatient											<u> </u>			ļ	ļ	ļ		<u> </u>
National	Days of hospital stay	L.																	
Health	Insured Persons status	<u></u>										ļ							ļ
Treatti	Who paid the premium											<u> </u>			ļ	ļ	ļ	ļ	<u> </u>
insurance	Number of dependents	<u>L</u> .																	
	Premium	<u> </u>										ļ			ļ				
Social In-	Insured Persons status														ļ	<u> </u>			
surance (I)	Insured month										<u></u>					ļ	ļ		
Social In-	Insured Persons status	Ļ.																	
surance (II)	Insured month																		

### 2. Household Equipment

Equipment	Amount	Equipment	Amount	Equipment	Amount
1. Color TV set		11. Cell phone		21. Vacuum cleaner	
2. DVD player		12. Sedan vehicle		22. Geyser	

Equipment	Amount	Equipment	Amount	Equipment	Amount
3. Movies camera		13. Motorbicycle		23. Hot-warm water fountain	
4. Stereo		14. Electro-magnetic oven		24. Microwave oven	
5. Piano		15. Air conditioner		25. Newspaper	
6. Digital camera		16. Dehumidifier		26. Magazine	
7. Video game		17. Washing machine			
8. Cable TV		18. Drier			
9. Personal computer		19. Air-clean machine		Total Amount	
10 Telephone		20. Water filter machine			

### 3. Housing

(1) Tenure of dwelling	□Self-owned	$\square$ Rented	$\square$ Issued	$\Box$ Leased & others
(2) Usage of dwelling	□Independent	□Connected		
(3) Style of building	□One story	$\Box T$ wo or three stories	□Four or five stories	□Six stories or over
(4)Piped water equipment	$\square$ possessed of	$\square Not\ possessed\ of$		
(5)Park ing lot	□Self-owned	□Rented	$\square$ None	
(6)Room and area	Housing land area (pin	s): Total room	area(pins):	

# 4. Income and Outlay Part A:

Unit: NT\$

										Ur	nit: NT\$
Income recipient	house	hold							Hou	sehold income can	Sub-
Serial No. and amount Item	hea								not	t be taken apart to	total
	1	2	3	4	5	6	7	8	form	ner income recipient	amount
Code of member in household	101	102	103	104	105	106	107	108			100
1. Compensation of employee	191	192	193	194	195	196	197	198	199		190
(1) Full time payroll	211	212	213	214	215	216	217	218	219		210
(2) Part time and spare time payroll	221	222	223	224	225	226	227	228	229		220
a. Lump-sum retirement pay	081	082	083	084	085	086	087	088	089		080
b. Monthly retirement pay	091	092	093	094	095	096	097	098	099		090
c. Other part time payroll	161	162	163	164	165	166	167	168	169		160
(3) Other receipts or subsides	231	232	233	234	235	236	237	238	239		230
a. Overtime pay	111	112	113	114	115	116	117	118	119		110
b. Awards	121	122	123	124	125	126	127	128	129		120
c. Insurance of GEI, LI, & SI by employers	131	132	133	134	135	136	137	138	139		130
d. Insurance of NHI by employers	701	702	703	704	705	706	707	708	709		700
e. Fringe & death benefits	141	142	143	144	145	146	147	148	149		140
2. Entre preneurial income	241	242	243	244	245	246	247	248	249		240
(1) Agricultural & livestock income	261	262	263	264	265	266	267	268	269		260
(2) Net forest income	271	272	273	274	275	276	277	278	279		270
(3) Net fishing income	281	282	283	284	285	286	287	288	289		280
(4) Net operation surplus	291	292	293	294	295	296	297	298	299		290
(5) Net professional income	321	322	323	324	325	326	327	328	329		320
3. Property income	331	332	333	334	335	336	337	338	339		330
(1) Interest income	341	342	343	344	345	346	347	348	349		340
(2) Investment income	351	352	353	354	355	356	357	358	359		350
(3) Others	361	362	363	364	365	366	367	368	369		360
4. Imputed rent income	391	392	393	394	395	396	397	398	399		390
5. Current transfer receipts	411	412	413	414	415	416	417	418	419		410
(1) From individuals	421	422	423	424	425	426	427	428	429		420
(2) From government	431	432	433	434	435	436	437	438	439		430

Total receipts	401	402	403	404	405	406	407	408	409	400
6. Miscellaneous receipts	491	492	493	494	495	496	497	498	499	490
(5)From abroad	481	482	483	484	485	486	487	488	489	480
b. Others	471	472	473	474	475	476	477	478	479	470
<ul> <li>a. Cash benefit of life and casualty insurance</li> </ul>	461	462	463	464	465	466	467	468	469	460
(4) From enterprises	441	442	443	444	445	446	447	448	449	440
b. Benefit of NHI	941	942	943	944	945	946	947	948	949	940
a. Benefit of GEI, LI, FHI, and SI	981	982	983	984	985	986	987	988	989	980
(3) Benifit of social insurance	451	452	453	454	455	456	457	458	459	450
g. Others	381	382	383	384	385	386	387	388	389	380
f. Lottery bonus	911	912	913	914	915	916	917	918	919	910
e. Insurance of NHI by goverment	951	952	953	954	955	956	957	958	959	950
d. Insurance of GEI, LI, & & FHI by goverment	201	202	203	204	205	206	207	208	209	200
c. Old-age farmer annuity	371	372	373	374	375	376	377	378	379	370
b. Old-age allowance	311	312	313	314	315	316	317	318	319	
a. Lowincome household	301	302	303	304	305	306	307	308	309	300

Part B:

Unit:NT\$

Income recipient	household								Household income c	an Sub-
Serial No. and amount Item	head								not be taken apart t	o total
	1	2	3	4	5	6	7	8	former income recipi	
1 Interest.	541	542	543	544	545	546	547	548	549	540
(1)House loans	511	512	513	514	515	516	517	518	519	510
(2)Others	521	522	523	524	525	526	527	528	529	520
2. Current transfer expenditures	561	562	563	564	565	566	567	568	569	560
(1)To private	571	572	573	574	575	576	577	578	579	570
a. Expenditure of marriage, birth and funeral	551	552	553	554	555	556	557	558	559	550
b. Charities	171	172	173	174	175	176	177	178	179	170
c. Others	181	182	183	184	185	186	187	188	189	180
(2)To government	581	582	583	584	585	586	587	588	589	580
a. House tax and land tax	591	592	593	594	595	596	597	598	599	590
b. Income tax	611	612	613	614	615	616	617	618	619	610
c. Other direct tax	621	622	623	624	625	626	627	628	629	620
d. Lottery payout	891	892	893	894	895	896	897	898	899	890
e. Others	631	632	633	634	635	636	637	638	639	630
(3)Social insurance	641	642	643	644	645	646	647	648	649	640
a. Expenditure on GEI	651	652	653	654	655	656	657	658	659	650
b. Expenditure on LI	661	662	663	664	665	666	667	668	669	660
c. Expenditure on Farmer's health insurance	671	672	673	674	675	676	677	678	679	670
d. Expenditure on Fisher- man's health insurance	851	852	853	854	855	856	857	858	859	850
e. Expenditure on SI	861	862	863	864	865	866	867	868	869	860
f. Expenditure on NHI	681	682	683	684	685	686	687	688	689	680
(4)To abroad	691	692	693	694	695	696	697	698	699	690
Nonconsumption expenditure	601	602	603	604	605	606	607	608	609	600

Note: If the transfer receipts are the major receipts in your household, please give the right code for the County (City) where you have obtained transfer receipts:

Unit: NT\$

Amount

Serial

**No.** 823 824

Item	Serial No.	Amount	Item
1. Food	710		(3) Purchase transportation
(1) Main food	711		(4) Other communications
(2) Supplementary food	715		(5)Insurance of transport equipme
(3) Dairy	723		11. Expenditure on recreation,
(4) Fruits	724		education and culture
(5) Others	725		(1) Traveling expenses
(6) Gifts	726		(2) Recreation service
(7) Board	727		(3) Newspaper, magazine and sta-
2. Beverage	730		tionery
(1)Non-alcoholic	731		(4) Recreation facilities
(2) Alcoholic	732		(5) Expenditure on education,
3. Tobacco	740		cul-ture and researches
4. Clothing and footwear	750		12. Miscellaneous expenditure
(1) Clothing	751		(1) Other goods not listed anywher
(2)Footwear	756		(2) Financial service
5. Rent and water charges	760		(3) Personal care
(1)Rent			(4) Barber and bath
a. Actual paid	761		(5) Food, beverage and tobacco in
b. Imputed rent of self-owned	762		restaurant, ballroom
c. Imputed rent of issued and	7.60		(6) Gifts (food exclusive)
leased	763		(7) Miscellaneous expenses
(2)Repairs	764		(8) Other non-saving premiums
(3)Water charge	765		Total Consumption Expenditure
(4)Household premiums	766		
6. Fuel and light	770		
(1)Electric rate	771		
(2) Gas	775		
(3) Others	777		
7. Furniture and family facilities	780		
(1) Furniture	781		
(2) Textile furnishing	782		
(3)Durable household equipment	783		
(4) Others	784		
8. Household operations	790		
(1) Domestic servants	791		
(2) Service to family	792		
(3)Other household operations	793		
9. Health care and medical	810		
(1) medical equipment and instruction	811		
(2) Treatment in hospital, hospital service, and health insurance	812		
(3) Expenditure of medical article	813		
(4) Personal accident and medical premiums	814		
(5) Medical consumption of NHI	816		
		l	

10. Transport and communication

equip ment

 $(1) \, Purchase \, of \, personal \, transport$ 

(2) Expenses on operations and

maintenance of personal trans-port equipment