

Übersetzung – ENGLISCH

Haushaltsfragebogen

Household question form

Individual question form

Living in Germany

Erläuterung:

Auch Befragte mit ausländischer Staatsangehörigkeit werden mit dem deutschsprachigen Fragebogen befragt.

Die fremdsprachige Fragebogenfassung dient nur als Übersetzungshilfe in Fällen, in denen Verständigungsschwierigkeiten auftreten.

Zum Ausfüllen des Fragebogens bitte **nur** die deutschsprachigen Fassungen verwenden.

Non-German respondents are interviewed using the regular German version of the questionnaire.

The foreign language versions of the questionnaire are used as an additional translation aid only and should not be written on to fill in answers.

Please use **only** the German version of the questionnaire to fill in your answers.

Living in Germany

Survey 2010
on the social situation
of households

Household question form

This questionnaire booklet is directed towards the household as a whole and not towards individuals in the household. The questionnaire should be filled out by the same person in the household who did it last year, if possible.

Your cooperation is voluntary. The scientific meaningfulness of this investigation, however, depends on the cooperation of all persons in all households.

Therefore, we ask that:

- You allow our representative to carry out this interview; **or**
- You carefully fill out the questionnaire booklet yourself.

**Before handing in please enter
in accordance with the address log:**

Household number

--	--	--	--	--	--	--	--

The questionnaire has been filled out by:

First name

--

Person
number

--	--

How is it done?

Please fill in the questionnaire booklet by

- **checking the box with an X**

Example: **Sex:** male
 female

- **entering numbers in the larger lines
(flush right)**

Example: **Date of Birth: ...**

- **writing in the text boxes provided**

Example: **Other reason**

Change of Job

A 'pointing finger' symbol means that there is a further explanation to the question.

Please answer each question in turn.
 Skip questions only when expressly told to do so in the text.

Example:

Are there children in your household?

Yes



No



Skip to Question . . . !

*If you check off "yes" for this question
 then you should go to the next question.*

*If you check off "no" for this question,
 then proceed directly to the question indicated.*

Expenses for house or flat

1. Did you live in this flat the last time we interviewed you about a year ago?

Yes  Skip to question 9!
 No



2. What was the most important reason for moving into this flat?

 Please check **up to three** reasons!

Notice given by the previous landlord
 Acquiring ownership of own home or flat
 Inheritance
 Reasons related to work
 Reasons related to family:
 Marriage
 Separation / Divorce
 Moved out of parents' home
 Other
 Size and costs of the flat:
 Previous flat too small
 Previous flat too large
 Costs for previous flat (rent, interest, mortgage payments) too high
 Other reasons related to the previous flat:
 Previous flat was poorly designed, equipped, etc.
 Previous flat was poorly located
 Previous flat was not elderly/handicapped-accessible
 Previous flat was in a bad neighborhood
 New home better for my personal living situation
 Other reasons

3. And how does your new flat compare to your previous one?

Is the overall situation in your new flat better, about the same, or worse than in the previous flat?

 Please check **only one** per row!

How is that with respect to ...	Better	About the same	Worse
– financial aspects (for example, rent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– the size of the flat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– how the flat is designed, equipped	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– conditions around the flat (noise, exhaust fumes, pollution) ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– access to public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
– relations to neighbors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. When did you move into this flat?

Month Year

5. How would you describe your residential area?

- A residential area with mostly old buildings
- A residential area with mostly newer buildings
- A residential and commercial area with flats, houses, shops and businesses
- A commercial area (shops, banks, offices) with few flats
- An industrial area with few flats

6. What kind of building do you live in?

- Farmhouse
- Free-standing single-family or two-family house
- Single-family or two-family house as row house or duplex
- Building with 3 to 4 flats
- Building with 5 to 8 flats
- Building with 9 or more flats (but no more than 8 floors/stories)
- High-rise (9 or more floors/stories)

7. Is it a rooming house, guesthouse, or a similar accommodation?

- No Yes: - Dormitory for school pupils or teenagers
- Student dormitory
 - Housing/Residence for employees
 - Nursing home, nursing home for the elderly
 - Housing for the elderly
 - Hotel / guesthouse
 - Other

8. When, approximately, was the house built in which your flat is located?

- Before 1919
- 1919 to 1948
- 1949 to 1971
- 1972 to 1980
- 1981 to 1990
- 1991 to 2000
- 2001 or later

Can you also provide the exact year in which the house was built?

9. Has the size of your flat changed within the last year, e.g. due to reconstruction or different usage

Yes

No

10. How large is the total living space in this flat? m²

11. How many rooms does the flat have?

 Include all rooms with 6 m² or more but **exclude** kitchen and bathroom. . rooms

12. What do you think about the total size of your flat?
Is it for your household ...

– much too small

– a bit too small

– just right

– a bit too large

– much too large

13. How would you characterize the condition of the building in which you live?

In good condition

Partly in need of renovation

In need of complete renovation

Ready for demolition

14. How is your flat equipped?
Does your flat have –

Yes No

– a kitchen

– a bath or shower in the flat

– warm water, a boiler

– central heating or central heating
for the story/floor of the building

– floor heating (full or partial)....

– balcony, terrace, porch

– cellar, storage area

– own yard, garden, access to use of a yard or garden

– alarm system

– air conditioner (controlled ventilation system)

– solar collector, solar energy system

– other alternative energy source (e.g. geothermal heat pump)

– elevator / lift inside building

15. Have you or your landlord done any of the following modernizations in the flat since the beginning of 2009?

- Built in a kitchen
- Built in a bathtub, shower, toilette
- Installed central heating or central heating for the story of the building
- New windows
- Insulation (e.g. wall, roof, basement ceiling)
- Modifications to provide barrier-free living for the elderly (e.g. elevator, ramp, stair lift, bath)
- Other

No, none of these...

Skip to question 18!

16. Did you or your landlord pay the costs for these modernizations?

- Landlord **Skip to question 18!**
- Myself
- Both

17. Did you do the work yourself or did you hire someone (a tradesman or company) to do it?

- Myself
- Hired tradesman or company
- Both

17a. How much did this work cost your household?

euros

18. Did this flat change hands within the last year?

- Yes
- No **Skip to question 20!**

19. What type of change was this?

- I am / we are ...
- now owner(s) because -
 - we bought the flat
 - inheritance or gift
 - no longer owner(s) because -
 - we sold the flat
 - gift / inheritance / other
 - still tenants, but it is now owned by someone else

20. The next questions deal with the costs of living in your flat. First the question: do you live in the flat as main tenant, subtenant, or owner?

- Main tenant **Skip to question 21!**
- Subtenant
- Owner **Skip to question 29!**

Only for tenants:

21. Is the flat offered to you by the owner at a reduced price, for example by your employer, by relatives, or because you work as manager of the building?

Yes

No

22. Is this a flat subsidized by the government ("Sozialwohnung")?

Yes, and I/we still receive the subsidy

Yes, but I/we no longer receive the subsidy ...

No

23. How much is the monthly rent?

euros

I don't pay rent ➔

Skip to question **38!**

24. Are the costs for heating (and usually also warm water) included in the rent?

Yes

No

25. How high are the heating costs per month?

 If you don't know the exact amount, **please estimate!**

euros

Don't know

25a How high are your average monthly electrical costs?

euros

Don't know

26. Are other costs included in the rent, for example for water, garbage removal, etc.?

Yes, included in full ➔

How much are they?

euros per month

Don't know

Yes, included in part ... ➔

No

27. How does your flat compare to similar flats with regards to rent? Is it –

– very inexpensive

– inexpensive

– about average

– a bit too expensive

– much too expensive?

28. Who is the owner of the flat?

Municipal government

Professional organization or union

My company


Private owner

Don't know

Skip now to question **38!**

Only for homeowners:

29. Do you still have financial obligations, for example loans or a mortgage, for this house or flat in which you live?

Yes 

No 

Skip to question **31!**

30. How high are the monthly loan or mortgage payments including interest for this loan or mortgage?

 If you don't know the exact amount, **please estimate!** Please do so also in the next questions.

Loan or mortgage payments and interest euros per month

31. How high were the maintenance costs for this flat / house in the last calendar year? euros per year

32. What were the costs for heating last calendar year? euros per year

32a How high were your electrical costs in the last calendar year? euros per year

33. And how high were the costs for water, garbage removal, street cleaning, etc. last year? euros per year

34. Do you pay fees for the management or maintenance of the building?

Yes  euros per month

No

35. If you compare this with a rental flat, are those costs ...

– very inexpensive

– inexpensive

– about average

– a bit too expensive

– much too expensive? ..

36. And if you lived in this flat or house as tenant: what do you estimate would be the monthly rent without heating costs?

About euros Don't know

37. Did you receive a financial support through the government homeowners' assistance program to build / buy a private home ("staatliche Eigenheimzulage") during the last calendar year?

How much financial support did you receive through this program in the year 2009?


Yes  euros in the year 2009

No

Now questions which apply to everyone!

38. Did you or someone in your household receive income from renting out or leasing land or a house / flat last year?

 Please state actual income, not the tax value for own use.

Yes


No 

Skip to question 42!

39. About how high was the total income from renting out or leasing out last year?

Please state the gross amount including funds put aside for future use/ maintenance/renovations.

euros in the year 2009

40. How much did you spend on the properties you rented out in the last calendar year?

Please state separately:

- Maintenance and repair costs
- Loan, mortgage and interest payments.

Maintenance costs euros in the year 2009

Loan, mortgage and interest payments euros in the year 2009


41. Will you be able to deduct these costs incurred in the last year from your taxes or declare them as a loss? If so, how much?


 If you don't know the exact amount, **please estimate!**

Yes euros in the year 2009

No

42. Are you currently paying back loans and interest on loans that you took out to make large purchases or other expenditures?

 Please do not include loan, mortgage or interest payments which you have already stated in previous questions.

Yes


No 

Skip to question 45!

43. How high is the monthly rate that you pay on these loans?

 If you don't know the exact amount, **please estimate!**

Loan repayment (include interest payments) euros per month

44. Does repaying these loans place a major burden on your household, a minor burden, or no burden at all?

Major burden

Minor burden

No burden

45. Did you or another member of the household own any of the following savings or investment securities in the last year?

- Savings account
- Savings contract for building a home
- Life insurance
- Fixed interest securities (e.g. saving bonds, mortgage bonds, federal savings bonds)
- Other securities (e.g. stocks, funds, bonds, equity warrant)
- Company assets (for your own company, other companies, agricultural assets)

No, none of these



Skip to question 47!

Can you declare the money spent on loan repayment as losses for the last year?

If you don't know the exact amount, please estimate!

Yes ... ➔ euros

No

46. How high was your total income from interest, dividends and profits from all investments in the last calendar year?

Last year euros

If you don't know the exact amount, please estimate according to the following list:

- less than 250 euros
- 250 up to but less than 1,000 euros
- 1,000 up to but less than 2,500 euros
- 2,500 up to but less than 5,000 euros
- 5,000 up to but less than 10,000 euros
- 10,000 euros or more

47. Did you or another member of the household receive a large sum of money or other forms of wealth (car, house, etc.) as inheritance, gift, or lottery winnings last year? We refer to money or other forms of wealth worth more than 500 euros.

Yes

No ➔

Skip to question 49!

As:

- Inheritance
- Gift
- Lottery winnings

48. How much were these worth?

euros


49. Did you or one of the members of your family receive any of the following benefits last year?

		Number of months received in 2009	Average amount per month	
Child allowance ("Kindergeld")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	(no benefit) euros
	No <input type="checkbox"/>			
Child benefit ("Kinderzuschlag")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			
Unemployment benefit II including social benefit and costs of housing ("Arbeitslosengeld II einschließlich Sozialgeld und Unterkunftskosten")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			
Support for care of sick family members ("Leistungen der Pflegeversicherung")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			
Regular support for living costs / Support for special situations ("Laufende Hilfe zum Lebensunterhalt / Hilfe in besonderen Lebenslagen")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			
Basic protection for old age / reduced capacity to work ("Grundsicherung im Alter und bei Erwerbsminderung")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			
Housing allowance ("Wohngeld oder Lastenzuschuss") if not included in ALG II / social assistance	Yes <input type="checkbox"/> ⇒	<input type="text"/>	<input type="text"/>	euros
	No <input type="checkbox"/>			

50. And how is that today? Do you or another member of the household currently receive any of the following types of governmental (state) support?

		Amount per month	
Child allowance ("Kindergeld")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	no benefit euros for <input type="text"/> children
	No <input type="checkbox"/>		
Child benefit ("Kinderzuschlag")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		
Unemployment benefit II including social benefit and costs of housing ("Arbeitslosengeld II einschließlich Sozialgeld und Unterkunftskosten")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		
Support for care of sick family members ("Leistungen der Pflegeversicherung")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		
Regular support for living costs / Support for special situations ("Laufende Hilfe zum Lebensunterhalt / Hilfe in besonderen Lebenslagen")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		
Basic protection for old age / reduced capacity to work ("Grundsicherung im Alter und bei Erwerbsminderung")	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		
Housing allowance ("Wohngeld oder Lastenzuschuss") if not included in ALG II / social assistance	Yes <input type="checkbox"/> ⇒	<input type="text"/>	euros
	No <input type="checkbox"/>		


51. Do you or another household member currently receive regular financial support from family members or relatives?

 including former spouse.

Yes euros per month


No

52. If you take a look at the total income from all members of the household: how high is the monthly household income today?

 Please state the net monthly income, which means after deductions for taxes and social security. Please include regular income such as pensions, housing allowance, child allowance, grants for higher education support payments, etc.

 If you do not know the exact amount, please estimate the amount per month. euros per month

53. Do you or another household member currently provide regular financial support to family members or relatives?

 including former spouse.

Yes euros per month

No

54. Do you usually have an amount of money left over at the end of the month that you can save for larger purchases, emergency expenses or to build up savings? If yes, how much?

Yes euros per month

No

55. Were your household's total income and expenditures last year, in 2009:

- equal, meaning that you were not able to put away savings but you also didn't have to go into debt or use money out of savings?
- or was your income higher than your expenditures, meaning that you were able to put away savings?
- or were your expenditures higher than your income, meaning that you had to go into debt or use money out of savings?

Income and expenditures were equal

Income was higher than expenditures, resulting in ability to put away savings euros Don't know ...

Expenditures were higher than income, resulting in a deficit euros Don't know

How did you cover the deficit: by going into debt or by using your savings?

Going into debt


Using savings

Both

Don't know

Does your household have ...?


56. Does someone in your household need care or assistance on a constant basis due to age, sickness or medical treatment?

Yes
 

No 

Skip to question 62!

57. Who is that and which activities does he/she need help with?

 Please state the first name.
If there is more than one person in need of care in the household, please list the one who is most in need of care.

person in need of care
first name




Needs assistance with ...

- Errands outside of the house
- Running the household, preparing meals and drinks
- Minor care, such as help with dressing himself, washing up, combing hair, shaving
- Major care, such as getting in and out of bed, bowel movements

58. Does the person in need of care receive nursing care assistance ("Pflegeversicherung")?

Yes based on: care level 1 care level 2 care level 3
No

59. From whom does this person receive the necessary assistance?

- From: – relatives in the household 
- public or church nurse, social worker
- private care service
- friends
- neighbours
- relatives not in the household

Please give us the name of the person in the household who is the main provider.


Does this person receive payment for this?

Yes No


60. Beside this person, are there other people in the household who are in need of help or care?

No Yes  other person(s)

61. Does the assistance or care create regular costs?

Yes  euros per month
No

62. Do you regularly or occasionally employ household help?

Yes, regularly  **How much do school, care, and the activities described above cost you?** euros per month
Yes, occasionally
No

63. Do children who were born in 1994 or later live in your household?

Yes

No →

Skip to question 71!

64. In what year were these children born?

Please state the birth year separately, starting with the oldest child who was born in 1994 or later and then each according to age, the youngest last.

Please state: → First name: [] [] [] []
Year of birth: [][][][] [][][][] [][][][] [][][][]

65. What of the following institutions do these children currently attend?

Elementary school ("Grundschule inkl. Förderstufe")
General secondary school ("Hauptschule")
Intermediate secondary school ("Realschule")
Upper secondary school ("Gymnasium")
Comprehensive school ("Gesamtschule")
Full-time professional school ("Berufsschule")
Other type of school
Does not attend any of these institutions

66. Does the child usually attend this school all day?

Yes
No

67. Does the child currently attend one of the following childcare facilities?

Kinderkrippe, Kindergarten, Kindertageseinrichtung, Hort

And how long does the child usually attend this facility?
Actual hours per day [] [] [] []

Does not attend any of these facilities

68. Are there any other people who regularly take care of the child (aside from members of the household)?

Yes, babysitter ("Tagesmutter") outside the home
Yes, paid caregiver ("Betreuungsperson") comes into the home
Yes, relatives
Yes, friends/acquaintances/neighbours
No

Please transmit
name of children:



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69. Does your child currently participate in any of the following activities?

Children not yet attending school:

Children's gymnastics, sports, swimming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Early childhood music lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Painting for children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other parent-children groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, none of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Children attending school:

Extra-curricular activities at school

Sport-AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Musik-AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kunst-AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theater-AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others AG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Activities outside school:

Sports, dance, gymnastics, ballet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Music or singing lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drawing or painting lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth fire department, Red Cross or similar aid organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children's groups (such as Pathfinders or Falcons)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular visits to youth centers or youth houses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No, none of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

70. How much do school, care, and the activities described above cost you?

Average monthly cost in euros	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
No costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To describe a household's economic situation, it's not enough to just ask about income types. We also need to look into household expenditures.

71. So to start with, we would like to ask you: Which of the following does your household have?


Please tick all items that apply, and if purchased last year please state the total price!

















For installment purchases, please do not state the purchase price but only the total payments made in 2009!

	Yes, my household has this	Was any of this purchased in the last year, in 2009, and how high were the total costs?		Did you take advantage of the "cash-for-clunkers" program?	
		Yes	Total costs	Yes	No
Car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	<input type="checkbox"/> <input type="checkbox"/>
Motorcycle, moped	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Microwave oven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Dish washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Deep freezer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Washing machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Stereo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Color television	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
DVD player with no recorder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
DVD recorder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
PC / laptop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Broadband Internet connection (e.g. DSL, cable, powerline, UMTS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Other, slower Internet connection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Telephone (landline)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Cellular, mobile telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Fax machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
ISDN connection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	
Do you or another household member have a summer house or vacation apartment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	euros	

72. In the following you see a list of possible expenditures that we have not asked about so far in this survey.

**Did you or another household member make any of the following expenditures?
If yes: how much in total did these expenditures cost your household in 2009?**

 You can state the expenditures for 2009 either as monthly averages or as total yearly expenditures!

		Expenditures in 2009:		
		per month	per year	
Food, groceries at home	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Food / drinks outside the home	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Clothing / shoes	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Body care / cosmetics / hairdresser	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Health (e.g., medicines, courses, consultation fee)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Telecommunication (landline, cellular phone, Internet)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Education / further training	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Culture (theater, cinema, concerts, museums, exhibitions)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Leisure activities, hobbies, sports, yard and garden, animals	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Vacation trips including short holidays	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Life insurance, private pension insurance	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Other insurance policies (e.g. car, legal, household goods)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Motor vehicle repairs (including motorcycle)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Transport (car, train, bus, etc.)	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Furniture, household appliances not mentioned previously	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			
Other expenditures	Yes <input type="checkbox"/> 	<input style="width: 100px; height: 20px;" type="text"/>	or	<input style="width: 100px; height: 20px;" type="text"/> euros
	No <input type="checkbox"/>			

Other expenditures
please specify:

Thank you!

Please don't forget to fill out the "Individual Questionnaire"

Durchführung des Interviews

A Wie wurde die Befragung durchgeführt?

Mündliches Interview

Befragter hat den Fragebogen selbst ausgefüllt,
und zwar:

– in Anwesenheit des Interviewers

– in Abwesenheit des Interviewers

Teils mündlich, teils selbst ausgefüllt

B Interviewdauer:

Das mündliche (Teil-)Interview dauerte Minuten

Befragter brauchte zum Selbstausfüllen Minuten

(bitte erfragen)

C Sonstige Hinweise:

Listen-Nr.

Lfd. Nr.

Ich bestätige die korrekte Durchführung
des Interviews:

Tag

Monat

Abrechnungs-Nummer

Unterschrift des Interviewers