## **SECTION 1**

Family Roster
Education
Non-agricultural enterprise
Employment
Social Organization/Network

## **PART A: HOUSEHOLD ROSTER**

PERSON INTERVIEWED: PREFERABLY THE HEAD OF THE HOUSEHOLD. IF HE/SHE IS NOT AVAILABLE, FIND A "PRINCIPAL RESPONDENT" TO ANSWER THE QUESTIONS IN HIS/HER PLACE. THE PERSON SELECTED MUST BE A MEMBER OF THE HOUSEHOLD WHO IS ABLE TO GIVE INFORMATION ON THE OTHER HOUSEHOLD MEMBERS.

RESPONDENT:	ID CODE:	
-------------	----------	--

- 1-3. I would like to make a complete list of all the people who normally use the same entrance, live and eat their meals together in this dwelling.
- \* First, I would like to have the names of all the members of your immediate family, who normally live and eat their meals together in this dwelling. Start with the head of the household, wife/husband of household head, his/her children in order of age.

ALWAYS WRITE DOWN THE HEAD OF THE HOUSEHOLD FIRST, FOLLOWED BY HIS/HER SPOUSE AND THEIR CHILDREN IN ORDER OF AGE.

WRITE DOWN THE NAME IN CAPITAL LETTERS, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD FOR EACH PERSON.

\* Please give me the names of any other persons related to the head of the household or to his/her wife/husband, together with their families, who normally live and eat their meals this dwelling.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

\* Please give me the names of any other persons not related to the head of household or to his/her wife/husband but who normally live and eat their meals with your family. For instance, tenants, lodgers, servants or other persons who are not relatives.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

\* Are there any other persons not now present but who normally live and eat their meals here? For example, any person studying somewhere else or who is on vacation or who is visiting other people.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

FOR EACH PERSON LISTED IN QUESTION 1, ASK THE QUESTIONS 4-11 AND CLASSIFY THE PERSON ACCORDINGLY IN Q.12. COMPLETE THE ENTIRE LINE BEFORE GOING ON TO THE NEXT PERSON LISTED.\*

4-10. Now I would like to have some information about each of the persons you mentioned.

IF THE RESPONDENT HAS ANY DIFFICULTY WITH HIS AGE OR DATE OF BIRTH (QUESTIONS 5 AND 6), USE THE CALENDAR OF EVENTS TO MAKE AN ESTIMATE.

12. CLASSIFY EACH PERSON ACCORDING TO CRITERIA

LOOK AT THE ANSWER TO QUESTION 11.

- \* ALL PERSONS ALIVE FOR WHOM THE ANSWER IS 9 MONTHS OR LESS ARE QLASSIFIED AS HOUSEHOLD MEMBERS. DECEASED INDIVIDUALS ARE NEVER CLASSIFIED AS HOUSEHOLD MEMBERS. LODGERS ARE NOT CLASSIFIED AS HOUSEHOLD MEMBERS. HIRED WORKERS AND SERVANTS, IF THEY HAVE THEIR OWN FAMILY IN A DIFFERENT PLACE, ARE ALSO NOT CLASSIFIED AS HOUSEHOLD MEMBERS. GUESTS WHO HAVE COME TO VISIT FOR 3 OR MORE MONTHS ARE CLASSIFIED AS MEMBERS OF HOUSEHOLD.
- \* IF THE ANSWER IS MORE THAN 9 MONTHS, ONLY THE FOLLOWING ARE HOUSEHOLD MEMBERS:
- -- THE HEAD OF HOUSEHOLD
- -- INFANTS LESS THAN 3 MONTHS OLD
- \* APART FROM THE CASES LISTED ABOVE, ALL OTHER PERSONS FOR WHOM THE ANSWER IS MORE THAN 9 MONTHS ARE NOT HOUSEHOLD MEMBERS. ENTER CODE 1 FOR EACH HOUSEHOLD MEMBER AND CODE 2 FOR ALL OTHER PERSONS. GO ON TO THE NEXT PERSON LISTED.

	1.	2.	3.	4.		5.	6.	7.	8.	9.	10.
I D C O D E	FIRST NAME	What is [NAME]'s sex?	RELATIONSHIP TO HEAD  HEAD	DATE (BIRTH		How old is [NAME] ?	MARRIED	partner of [NAME] ?  WRITE THE ID CODE.IF THE PERSON IS	of [NAME] live in this household now? If yes, who is he? WRITE THE ID CODE.IF THE PERSON IS NOT	of [NAME] live in this household now? If yes, who is she? WRITE THE ID CODE.IF THE	Which ethnic group does [NAME] belong to?  ALBANIAN1 CROAT2 MONITENEGRIN. 3 MUSLIM SLAV/BOSNIAC/ GORANI4 ROMA5 SERB6 TURK7 YUGOSLAV8 OTHERS9
		FEMALE.2		MONTH	YEAR	YEARS		HOUSEHOLD, WRITE "0".		HOUSEHOLD, WRITE "0".	
1											
2											
3											
4											
5											
6											
7											
8											
10											
11											
12											
13											
14											
15											

## DISPLACEMENT

I	1. Where was [NAME] born? HERE (SITE OF SURVEY).0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA.44 ALBANIA/SERBIA**55	2. This place was  RURAL1	3.  Where did [NAME] live immediately before the conflict (March 1998)?  HERE (SITE OF SURVEY).0  OTHER MUNICIPALITY.1-30  FORMER YUGOSLAVIA44  ALBANIA/SERBIA**55	4. How many times ha [NAME] changed residence since the beginning of the co (March 1998)?	)	for this SECUI HOUSI INHAI	absen	ce? 1 LE.2		6.  Where was [NAME] living during most of this absence?  OTHER LOCALITY BUT SAME MUNICIPALITY0  OTHER MUNICIPALITY.1-30  FORMER YUGOSLAVIA44  ALBANIA/SERBIA**
C O D E	WESTERN EUROPE66 OTHER77	URBAN2 MIXED 3	WESTERN EUROPE66 OTHER77 NOT YET BORN88	IF 0>>NEXT PE	RSON	STUD:	Y R	4	4th	WESTERN EUROPE
1			<u></u>							
		**: in Questio	uestions 1, 3 and 6 Substituted Serbia	to Albania in Serb						
2		questio	mane							
3										
4		-								
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

Since the beginning of the conflict (March 1998), did any new members join this household, (excluding children born 1. YES after March 1998)? 2. NO (»NEXT PART) When did [NAME] join Why did [NAME] join this Where was [NAME] living before joining your WRITE DOWN How long do you think THE ID CODE OF vour household? household? [NAME] is going to remain household? THE NEW a member of your SECURITY.....1 MEMBERS HOUSE INHABITABLE..2 household? SAME MUNICIPALITY......0 WORK.....3 JOINING THE PERMANENTLY 1 OTHER MUNICIPALITY.1-30 MARRIED.....4 HOUSEHOULD DEPENDING ON FORMER YUGOSLAVIA......44 WIDOWED......5 AFTER MARCH HIS/HER JOB OR ORPHANED......6 ALBANIA/SERBIA\*\*.....55 1998 STUDIES STUDY......7 WESTERN EUROPE......66 DOES NOT KNOW 3 OTHER OTHER......77 ID CODE MONTH YEAR \*\*: in Question 4 Substituted Serbia to Albania in Serb questionnaire

		3. Which ethnic group does s/he belong to? ALBANIAN	FAMILY REASON	nold? 1 2	Where is your spouse now living?  SAME MUNICIPALITY0  OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA44 ALBANIA?SERBIA**55 WESTERN EUROPE66 OTHER	has s/he	7. Do you have any children currently living away from home?  1. YES 2. NO >> NEXT PERSON	SAME MUNI OTHE 30 FORM YUGO ALBA55 WEST EURO	CIPALI R MUNI ER SLAVIA NIA/SI	ITY ICIPAL A4 ERBIA*	0 ITY.1. 4 *	9. When did h	e/she left?		
ID CODE						YEARS						YEAR	YEAR	YEAR	YEAR
-	_		,		1			1st	2nd	3rd	4rth	1st	2nd	3rd	4rth
					5 & 8 (4 times in Q. 8) Substituted Si questionnaire	erbia to									

I D CODE	Can you read the	a one-page personal letter ? :LY 1	Have you ever attended school? (INCLUD E PRESCH OOL)  YES1 NO2	have co	the highest grade you mpleted in school?  PRESCH. 0 (>>6) PRIMARY 1 (>>6) GYMNASIUM 2 SECOND. TECHN. 3 VOCATIONAL 4 UNIVERSITY 5	5. What is your field of specialization?  GENERAL	Are you currently	Do you intend to return to school?  YES1 (»17)	8. Why did you leave education?  COMPLETED STUDIES 1 TOO EXPENSIVE 2 NO INTEREST 3 AGRICULTURAL WORK 4 OTHER WORK 5 SCHOOL TOO FAR 6 NO TEACHER 7 NO SUPPLIES 8 SCHOOL UNFUNCTIONAL 9 ILLNESS 10 DISPLACED 11 SAFETY 12 HARASSMENT 13 LANGUAGE 14 OTHER 15 >> GO TO Q.17
L									
H									

- D CODE	R E O P O Z D E Z T	9. In what grade are you currentle enrolled in school?  PRESCHOOL 0 PRIMARY 1 YEAR GYMNASIUM 2 1 TO 8 SECOND. TECHN. 3	school are you currently enrolled in?  PUBLIC 1 RELIGIOUS 2 NGO 3 PRIVATE 4	11. What is the language of instruction?  ALBANIAN 1 SERBIAN 2 OTHER 3	12. How far away from your home is the school you are attending?	13. How long of take you to your school	travel to	14. How do you go to school?  WALK1 BICYCLE2 CAR3 BUS4 MOTORBIKE 5 ANIMAL6 OTHER 7		TOR CHILDREN UNDER 12  16.  Why did you miss school?  BAD WEATHER 1 TOO EXPENSIVE 2 NO INTEREST 3 AGRICULTURAL WORK 4 OTHER WORK 5 MARRIAGE/ENGAGED 6 SCHOOL TOO FAR 7 NO TEACHER 8 NO SUPPLIES 9 SCHOOL UNFUNCTIONAL 10 ILLNESS 11 DISPLACED 12 SAFETY 13 HARASSMENT 14 OTHER 15
		UNIVERSITY 5		OTHER 3	KM	HOURS	MINUTES	_	(>>17)	_
										Ī
$\vdash$										

																			CAREGIVER AN
		17.	18.	19.	20.	21.	22.	23.	24.	25.		26.	27.	28.	29.	30.	31.	32.	33.
	R	Were you	How muc	h has your	household	spent on y	our education	on in the las	st 12 month	s for:		Did your	household	have to	Did anybody	Who has	paid for so	ome or	How much
	ΙE	enrolled in										provide -	in money	or kind -	outside of your	all of you	r educatio	nal	money did this
			IF NOTHI	NG WAS	SPENT, PL	JT 0							e following		household, such as	expenses			person (these
ı١،		last					OTAL, WRIT		LIMNIC A	H VND		uny or un			relatives or		12 months	2	people)
D.		academic			COLUMN T		JIAL, WINI	L 00 IIV CC	LOWING A-	IIAND					friends, pay any	lile pasi	12 1110111115	:	contribute for
٦٢			ENIEKI	OTALIN	JOLUWIN I	OTAL									of your				
1_		year?													educational	RELATIVE			your educational
С	D														expenses during the past	RELATIVE	1		expenses
0	E		REPORT	CURREN	CY USED	BY RESPO	NDENT:					YES			12 months?		2		during the past
D	N		1. DEM	2. DIN	IAR							NO	2		12 months:	HUMANITA			12 months?
E	T																ATION3		
																NEIGHBOR			
																			»»NEXT
			Α.	B.	C.	D.	E. Other	F.	G.	H. Other	TOTAL	A. School	В	C.	1	OTHER	5		PERSON
		YES1	Fees?	Extra	Uni-	Text-	educational		Value	expenses	1.01712		School	Help with	YES1	011121	0		FLIXOUN
		NO2	. 000.	tuitions?	forms	books?	materials	transpor-	of in-kind	(extra			mainte	teaching					SAME
		(NEXT		taltions.	and	BOOKO.	(exercise	tation	contribu-	classes,		conflict)?		todoming	(NEXT				CURRENCY
		PERSON)			other		books,	and/or	tions	optional		corinict):	nance:		PERSON)				AS IN 18
		I LIKBOIT,			clothing?		pens)?	lodging?	110113	fees)?			ı		I LIKBOIT,	1ST	2ND	3RD	AMOUNT
					olottillig:		pono).	louging:		1000):					<u>.</u>		2112	J. J. L.	11100111
-	+																		
-	+																		
	1																		
														1					
$\vdash$	+				<u> </u>	<u> </u>	1				<u> </u>	<b> </b>						<u> </u>	
										I									
					1	1					1							1	

_		1-	T <sub>2</sub>	Ι.	1_	1_		-	1-	I
	1.	2.	3.	4.	5.	6.			9.	10.
		During the past 7	During the past	During the past 7	CHECK THE				Have you	What is the main reason you did not
D		days, have you	7 days, have you	days, have you	ANSWERS TO	reported no work		did not work in the last 7 days?	looked for	look for a job in the last 7 days?
		performed any	performed any	performed any	QUESTIONS 2,	in the past 7	job even		work in the	(MOST IMPORTANT REASON)
С	R	activity for	activity on a farm	activity privately	3 AND 4.	days, have you	though you	»PART A2	last 7 days?	>>A2
0	E	someone who is	operated by a	or in a business	(WORK IN	ever sold goods	did not work			>>AZ
D		not living in this	member of your	belonging to you	LAST 7 DAYS)		in the last 7	SICK1		STUDENT1
E		house, for	household,	or someone in		helped someone		MATERNITY2		HOUSEWIFE/CHILDCARE2
-	0	example, an	(cultivating			for their business.		HOUSEHOLD		TOO OLD/RETIRED. 3
	_	enterprise,	crops, or other	this house, for		sold some		MEMBER ILL.3		HANDICAPPED 4
				example, as a		homemade		VACATION4		WAITING FOR REPLY FROM
		company, the	farming tasks)	shop-keeper,				STRIKE/		EMPLOYER. 5
	E	public sector, a	or have you	barber, mason,		products,		SUSPENSION.5		WAITING FOR RECALL BY
		NGO or any other	cared for	carpenter or taxi		repaired cars?		TEMPORARY WORKLOAD		EMPLOYER 6
	Т	individual?	livestock	driver?		CHECKING		REDUCTION6		WAITING FOR BUSY SEASON. 7
	?		belonging to a			QUESTION		TEMPORARY CLOSURE 7		OTHER HH MEMBER DOES NOT WANT
			member of your					PERMANENT CLOSURE 8		YOU TO WORK 8
			household?					OTHER .9		NO SOURCE OF EMPLOYMENT IN THE
	I					YES1		OTHER .9		COMMNUNITY 9
	I				ANY YES1	UPDATE 4 AND 5	YES1		YES1	NO JOB FOR YOUR ETHNIC GROUP
						-				10
		YES1	YES1	YES1	(»PART B1)	(>> PART B1)	NO2		(PART A2)	OTHER 11
		NO2	NO2	NO2	ALL NO2	NO2	(»Q.9)		NO2	OIIIIX
	ı		1		1	I			ı	
-	-	•	•	•	•	•	-			•

I would like to ask you some questions about all the activities you performed in the last 7 days whether work on a farm, *privately, in a household business*, or for someone else. Let's start with the work that you did in **the past 7 days**.

I D C O D E	100 <+->-+>	1.  What did you do?  USE ONE LINE PER ACTIVITY, REPLON ALL LINES FOR DIFFERENT ACTIVITY PERFORMED BY THE SAME PERSO	EAT THE ID TIVITIES	2. What kind of trade or business is it conwith?	nnected	3. In this work were you working on:  FARM OWNED OR RENTED BY HOUSEHOLD MEMBER 1(»Q.5)  OWN ACCOUNT/HOUSEHOLD ENTERPRISE2(>>Q.5)  WORK FOR NON-HOUSEHOLD MEMBER3	4. For how many different employers did you do this activity in the last 7 days?
		WRITTEN DESCRIPTION	OCCUPATION CODE	WRITTEN DESCRIPTION	INDUSTRY CODE		NUMBER
		DESCRIPTION	CODE	DESCRIPTION	CODE		NUMBER
	Α						
	В						
	С						
	D						
	Е						
	F						
	G						
	Н						
	I						
	J				_		
	K				_		
	L				_		
	M						
	Ν						
	0						

for

I D C O D E	A C T I V I T Y C O C	5. For how many days in the last 7 days did you do this activity, for any employer?	days did	7. For how many weeks in the last 12 months did you do this activity?	8. During these weeks, how many hours per week did you usually do this work?	pid you do any other work in the last 7 days, or did you have any other permanent job from which you were temporarily absent?  YES1 ("NEXT"	10.  FOR EACH PERSON, CHECK FOR FIRST AND SECOND HIGHEST ANSWERS TO Q. 6 (HOURS WORKED IN LAST 7 DAYS) FOR THIS INDIVIDUAL. (IF HE OR SHE REPORTED ONLY ONE ACTIVITY, MARK IT AS CODE 1.) ACTIVITY FOR WHICH ANSWER TO 6 IS HIGHEST
		DAYS	HOURS	WEEKS	HOURS	LINE)	
		PER WEEK	PER WEEK	PER YEAR	PER WEEK	NO2	(PART C1)
	ΙΛ		I	Ī	I		
	Α						
	В						
	С						
	D						
	Е						
	F						
	G						
	Н						
	ı						
	J						
	K						
	L						
	М						
	N						
	0						
	٧						

		MAIN JOB					
	1.	2.	3.	4.	5.	6.	7.
I D C O D E	FOR EACH PERSON, LOOK AT THE ANSWERS TO QUESTION 10 OF PART B1. WRITE DOWN THE OCCUPATION WITH CODE 1 IN THAT QUESTION (MAIN OCCUPATION IN THE LAST 7 DAYS)	Now I would like to ask you about your work as [ OCCUPATION FROM Q. 1]. Where did you carry out most of this work in the last 7 days?  FARM OWNED OR RENTED BY HOUSEHOLD MEMBER	In this work were you  (READ ALL RESPONSES)  an employer?1(»17) a private worker or unpaid worker in a house- hold farm or nonfarm business?2(»17) a paid worker in a household farm or nonfarm business?3(»6) an employee of someone who is not a member of your household?4	Is your employer for this Work (READ ALL RESPONSES) a private company. 1 a village employmentprogram? 2 UNMIK, public sector?3 a socially-owned enterprise or cooperative?4 a NGO or humanitarian organization /interna. 5 a private individual?6	How many people altogether work at the place where you do this work?  WRITE 222 IF >100	wages, salary or other payments either in cash or in other forms from this employer for this work?  YES1 (»Q.8)	What is the main reason you receive no payment for this work?    **10
	OCCUPATION CODE			individual?6	NUMBER	NO2	
1							
H							
$\vdash$							

LABOR MODULE

ALL PERSONS WITH 1 IN Q.5 OF PART A
PART C1: MAIN AND SECONDARY JOB IN THE LAST 7 DAYS

How much was your last payment? IF RESPONDENT HAS NOT YET BEEN PAID, ASK: What payment to do you expect? What period of time did this payment cover?  How much was your last payment? How many hours did you work (or will you work) for this payment to do you expect? What period of time did this payment cover?  How much was your last payment? How many hours did you work (or will you work) for this payment to do you expect? What period of time did this payment cover?  How much was your last payment?  Do you work (or will you work of those payments? Over what time only employer for those payments? Over what time only employer for whom you did this work in the last 7 days, how many whom you did this work for this employer?  What is the value of those payments? Over what time only employer for whom many did this work in the last 7 days, how many days did you work for this employer?  What is the value of those payments? Over what time only employer for whom you did this work in the last 7 days, how many days did you work for this employer?  What is the value of those payments? Over what time only employer for whom you did this work in the last 7 days, how many days did you work for this employer?  What is the value of those payments? Over what time only employer for whom you did this work in the last 7 days, how many days did did this work for this employer?  You work for this employer?  What is the value of those payments? Over what time only ayou work in the last 7 days, how many days did did this work in the last 7 days.  You work of this employer?  Weaks you work of this employer?  Weaks you work in the last 7 days, how many days did did this work in the last 7 days.  You work of this employer?	17.							***************************************					
D last payment? IF RESPONDENT HAS NOT YET BEEN PAID, ASK: What payment to do you expect? What period of time did this payment cover?  1. DEM 2. DINAR CURRENCY: TIME  NO 2  TIME  No 2  No 2  TIME  Nor yet what time any only chose payments? Over what time any only chose payments? Oonly employer for whom you did this work in the last 7 days, how many how many how many how many days did did this work in the last 7 days. How many	17.	16.	15.	14.	13.	12.	-	11.	10.	9.		8.	
1. DEM 2. DINAR 2. DINAR CURRENCY: YES1 YES1 DAYS HOURS WEEKS HOURS PER PER	B1 DID THE	weeks you worked for this employer in the last 12 months, for how many hours did you usually work per week?	last 12 months, for how many weeks did you work for this employer?	last 7 days, how many hours did you work for this employer?	last 7 days, how many days did you work for this	only employer for whom you did this work in the last 7	its?	those paymer Over what tim interval?	receive any payment for this work in any other form (meals, tips,	hours did you work (or will you work) for the pay you just reported? Please include any hours of paid vacation or	:NT BEEN nat you period	last payment? IF RESPOND! HAS NOT YET PAID, ASK: W payment to do expect? What of time did this	C O D
2. DINAR CURRENCY:	DAYS?						1. DEM				I. DEM		
YES1         YES1         YES1         DAYS         HOURS         WEEKS         HOURS           TIME         NO2         TIME         (»17)         PER         PER         PER         PER										2			
TIME NO2 TIME (%17) PER PER PER PER								CURRENCY:				CURRENCY:	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	YES1 NO2						ттмг				ттме		
	NO2 (»PART A2)					, ,		AMOUNT		HOURS		AMOUNT	
	(								(==7				
													1
		<del>                                     </del>						<del></del>					
<del>                                     </del>													
		<u> </u>											$\vdash$

HOUR....2 DAY....3 WEEK....4 FORTNIGHT...5 MONTH......6 QUARTER....7 HALF YEAR...8 YEAR....9

22.	23.	24.
people altogether wo at the place where you do this work?  public	receive rk wages, salary or	What is the main reason you receive no payment for this work?  »Q.27  APPRENTICESHIP OR UNPAID TRAINEESHIP1 LABOR EXCHANGE.2 PAYING OF DEBT.3 OTHER4
	ployer for this EAD ALL SES) the company.1 ge employment m? 2 public3 .lly-owned orise or ative?4 or tarian zation 5 .te dual?6  How many people altogether wo at the place where you do this work?  WRITE 222 IF >100	ployer for this EAD ALL SES) altogether work at the place where you do this work?  public3 .lly-owned partive?4 or tarian zation 5 .te dual?6  How many people altogether work wages, salary or other payments either in cash or in other forms from this employer for this work?  WRITE 222 IF >100  YES1 (>25)

	25.		26.	27.	28.		29.	30.	31.	32.	33.
D C O D E	How much wa last payment? IF RESPOND HAS NOT YE BEEN PAID, A What paymen you expect? V period of time this payment of	ENT T ASK: t to do What did	How many hours did you work (or will you work) for the pay you just reported? Please include any hours of paid vacation or sick leave.	Do you receive any payment for this work in any other form (meals, tips, transport)?	What is the va those paymer Over what tim interval?	its?	Is this the only employer for whom you did this work in the last 7 days?	last 7 days, how many days did you work for this	last 7 days, how many hours did you work for this	how many weeks did you work for this	During the weeks you worked for this employer in the last 12 months, for how many hours did you usually work per week?
ı		. DEM DINAR TIME UNIT	HOURS	YES1 NO2 (»29)		. DEM DINAR TIME UNIT		DAYS PER WEEK	HOURS PER WEEK	WEEKS PER YEAR	HOURS PER WEEK
1											
ᅥ											

LABOR MODULE PART A2: LABOR FORCE PARTICIPATION

ALL PERSONS 10 YEARS AND OLDER

IF THE PERSON DID NOT REPORT WORK IN THE PAST 7 DAYS, PLEASE ASK THE FOLLOWING QUESTIONS.

JETHE PERSON REPORTED SOME WORK IN PART B1 AND C1. PLEASE GO TO PART B2

	IF THE	PERSON REPORTE	ED SOME WORK IN	N PART B1 AND C1,	, PLEASE GO TO	) PART B2.				
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
- 1	1	During the past 12	During the past	During the past	CHECK THE	Although you	Do you have	What is the main reason that	Have you	What is the main reason you did not
D	D	months, have you	12 months, have		ANSWERS TO	reported no work	a permanent	you did not work in the last 12	looked for	look for a job in the last 12 months?
		performed any	you performed	you performed	QUESTIONS 2,	in the past 12	job even	months?	work in the	(MOST IMPORTANT REASON)
С	R	activity for	any activity on a		3 AND 4.	months, have you	though you		last 12	>> PART D
0	Е	someone who is	farm operated by	privately or in a	(WORK IN	ever sold goods	did not work		months?	STUDENT1
D	S	not living in this	a member of	business	LAST 12	in the street,	in the last 12	»PART D		HOUSEWIFE/CHILDCARE2
E			your household,	belonging to you	months)		months?	SICK1		TOO OLD/RETIRED. 3 HANDICAPPED 4
		example, an	(cultivating	or someone in		for their business.		MATERNITY2		WAITING FOR REPLY FROM EMPLOYER.
		enterprise,	crops, or other	this house, for		sold some		HOUSEHOLD		5
			farming tasks)	example, as a		homemade		MEMBER ILL.3		WAITING FOR RECALL BY EMPLOYER
			or have you	shop-keeper,		products,		VACATION4		6 WAITING FOR BUSY SEASON. 7
		NGO or any other	cared for			repaired cars?		STRIKE/		OTHER HH MEMBER DOES NOT WANT YOU TO
		individual?	livestock	barber, mason,		CHECKING		SUSPENSION.5		WORK 8
	'	marviduai:	belonging to a	carpenter or taxi		QUESTION		TEMPORARY WORKLOAD		NO SOURCE OF EMPLOYMENT IN THE
			member of your	driver?		QUESTION				COMMNUNITY 9 NO JOB FOR YOUR ETHNIC
			household?					REDUCTION6 TEMPORARY CLOSURE 7		GROUP10
			nousenoia?							CHILDREN11
						YES1		PERMANENT CLOSURE 8 OTHER .9		OTHER 12
					ANY YES1	UPDATE 4 AND 5		OTHER .9	YES1	IF 11 (CHILD) GO TO NEXT PERSON
		YES1	YES1	YES1	(»PART B2)	(>> B2.)	NO2		(PART D)	OTHERWISE >>PART D
		NO2	NO2	NO2	ALL NO2	NO2	(»Q.9)		NO2	
										_
								_		
$\vdash$										

I would like to ask you some questions about the activities you performed in the last 12 months whether work on a farm, *privately, in a household business*, or for someone else. I would like to know about all the other activities you have had in the past 12 months, the ones you mentioned for the past 7 days and others which you did not perform in the past 7 days. START WITH THE ONES MENTIONED IN THE PAST 7 DAYS (COPY THE ANSWERS TO 1.2.3 IN PART B1).

A   What did you do?	<u> </u>	ou u		CI VVIIII IIIL C	ONES MENTIONED IN THE PAST 7 DA	113 (COF I		
C		Α	1.		2.		1	
D   T   C   C   V   V   C   C   C   C   C   C			What did you do?		What kind of trade or business is it cor	nnected	I III IIIIS WOIK WEIE YOU WOIKIIIQ OII a	
C	D		,		with?			many
C   V   D   T   T   C   D   T   T   C   D   T   T   C   D   D   T   T   D   D   D   T   D   D		Ι:			***************************************			different
D D T T DUSINESS belonging to you or a member of your household, or were you working for someone who is not disa activity in the last 12 months?  FARM OWNED OR RENTED BY HOUSEHOLD MEMBER 1(%0.5) OWN ACCOUNT/HOUSEHOLD MEMBER 1(%0.5) O	C							
D E T Y COUNTY TO THE SAME PERSON  WESTER DOWN DESCRIPTION  A MILLINES FOR DIFFERENT ACTIVITIES PERFORMED BY THE SAME PERSON  WRITTEN DESCRIPTION  A MEMBER 1(>0.5) OWN ACCOUNT/HOUSEHOLD ENTERPRISE		V						
E V V VOU WORKING for someone who is not a member of your household?  FARM OWNED OR REINTED BY HOUSEHOLD MEMBER 1 (%).5) OWN ALCCUINT/HOUSEHOLD MEMBER 1 (%).5) OWN ACCOUNT/HOUSEHOLD MEMBER 1 (%).5							business belonging to you or a	
C   USE ONE LINE PER ACTIVITY, REPEAT THE ID ON ALL LINES FOR DIFFERENT ACTIVITIES PERFORMED BY THE SAME PERSON   WRITTEN DESCRIPTION   DESC							member of your nouseriola, or were	
A B B C C C C C C C C C C C C C C C C C	=	Υ					you working for someone who is not	
B B C C C C C C C C C C C C C C C C C C							a member of your household?	12 months?
USE ONE LINE PER ACTIVITY, REPEAT THE ID ON ALL LINES FOR DIFFERENT ACTIVITIES PERFORMED BY THE SAME PERSON  WRITTEN OCCUPATION CODE DESCRIPTION  A DESCRIPTION  BY HOUSEHOLD MEMBER 1(>Q.5) OWN ACCOUNT/BOUSEHOLD ENTERPRISE		С					EXDM OWNED OF BENTED	
USE ONE LINE PER ACTIVITY, REPEAT THE ID ON ALL LINES FOR DIFFERENT ACTIVITIES PERFORMED BY THE SAME PERSON  WRITTEN DESCRIPTION  OCCUPATION  OCCUPATION DESCRIPTION  OCCUPATION  OCCUPATI		0						
ON ALL LINES FOR DIFFERENT ACTIVITIES   OWN ACCOUNT / HOUSEHOLD   ENTERPRISE								
DIVIDITION ACTIVITIES PERFORMED BY THE SAME PERSON  WRITTEN DESCRIPTION  OCCUPATION OCCUPATION DESCRIPTION  OCCUPATION								
PERFORMED BY THE SAME PERSON							· ·	
WRITTEN   OCCUPATION   CODE   DESCRIPTION   MRITTEN   INDUSTRY   CODE   NUMBER			PERFORMED BY THE SAME PERSO	N				1
Number   N								
A			WRITTEN	OCCUPATION	WRITTEN	INDUSTRY	MEMBER3	
B C C C C C C C C C C C C C C C C C C C			DESCRIPTION	CODE	DESCRIPTION	CODE		NUMBER
B C C C C C C C C C C C C C C C C C C C								
C		Α						
D		В						
E		С						
F G		D						
G		Е						
H		F						
		G						
K		Н						
K		I						
L		J						
N N		K						
N N		L						
		М						
		N						
		0						

I woul some

D T many these weeks, how weeks, how the last 12 months did D T you do this did you weeks in the last 12 months in the last 12 months, or did you have any other permanent job months of the last 12 months, or did you have any other permanent job months in the last 12 months, or did you have any other permanent job months. THE NUMBER IN the last 12 months, or did you have any other permanent job months.	<u>y</u>	ou u					
WEEKS NOOKS NOOKS	COD	A C T I V I T Y C O	For how many weeks in the last 12 months did you do this activity?	During these weeks, how many hours per week did you usually do this work?	MULTIPLY THE NUMBER IN 5. BY THE NUMBER IN 6 TO OBTAIN HOURS IN THE LAST 12 MONTHS.	other work in the last 12 months, or did you have any other permanent job from which you were temporarily absent?  YES1 (*NEXT	FOR EACH PERSON, CHECK FOR FIRST AND SECOND HIGHEST ANSWERS TO Q.7(HOURS WORKED IN LAST 12 MONTHS) FOR THIS INDIVIDUAL. (IF HE/SHE REPORTED ONLY ONE ACTIVITY, MARK IT AS CODE 1).  ACTIVITY FOR WHICH ANSWER IN 7 IS HIGHEST
PER YEAR PER WEEK PER YEAR NO2 (PART C2)			WEEKS	HOURS	HOURS	LINE)	
			PER YEAR	PER WEEK	PER YEAR	NO2	(PART C2)

,	A			
I	В			
(	С			
	D			
	E			
	F			
(	G			
I	Н			
	I			
,	J			
I	K			
	L			
	М	·		
	N			
(	0	·		

			MAIN JOB											
	1.		2.	3.	4.	5.	6.	7.						
C O D E	FOR EACH PERSO THE ANSWERS TO OF PART B2. WR THE OCCUPATION 1 IN THAT QUEST OCCUPATION IN T MONTHS)	O QUESTION 9 TE DOWN N WITH CODE ION (MAIN	Now I would like to ask you about your work as [ OCCUPATION FROM Q. 1]. Where did you carry out most of this work in the last 12 months?  FARM OWNED OR RENTED BY HOUSEHOLD MEMBER	In this work were you (READ ALL RESPONSES)  an employer?1(*16) a private worker or unpaid worker in a house- hold farm or nonfarm business?2(*16) a paid worker in a household farm or nonfarm business?3(*16) an employee of someone who is not a member of your household?4	Is your employer for this work (READ ALL RESPONSES) a private company.  1 a village employmentprogram? 2 UNMIK, public sector?3 a socially-owned enterprise or cooperative?4 a NGO or humanitarian organization 5 a private	How many people altogether work at the place where you do this work?  WRITE 222 IF >100	,	What is the main reason you receive no payment for this work?    **10						
		OCCUPATION			individual?6	11 >100	(»Q.8)							
	OCCUPATION	CODE				NUMBER	NO2							
	T	I	ī	1	T	1	T							
$\vdash$							1							
$\vdash$														
-														
$\vdash$														
$\vdash$														

	8.	9.	10.	11.		12.	13.	14.	15.	16.
I D C O D E	How much was your last payment?	How many hours did you work for the pay you just reported? Please include any hours of paid vacation or sick leave.	any payment for this work in any other	What is the va those paymen Over what tim interval?	ts?		0	many weeks did	weeks you worked for this employer in the last 12 months, for how many hours did you usually work per	CHECK QUESTION 9 IN PART B2. DID THE INDIVIDUAL REPORT MORE THAN ONE KIND OF WORK IN THE PAST 12 MONTHS
						l			week?	2
	1. DEM 2. DIN			2	1. DEM DINAR					?
	CURRENCY:	¬		CURRENCY:	DINAR	ł				
	CORRENCT.	=	YES1	CORRENCT:		YES1	MONTHS	WEEKS	HOURS	YES1
	TIME	1	NO2		TIME	(>> 16)	PER	PER	PER	NO2
	AMOUNT UNIT	HOURS	(»12)	AMOUNT	UNIT	NO2	YEAR	YEAR	WEEK	(»PART D)
_		<del> </del>								
		-								

HOUR....2 DAY....3 WEEK....4 FORTNIGHT...5 MONTH......6 QUARTER....7 HALF YEAR...8 YEAR...9

	17.		18.	19.	20.	21.	22.	23.
I D C O D E	9 OF PART B2. WRITE DOWN C THE OCCUPATION WITH CODE O 2 IN THAT QUESTION D (SECONDARY OCCUPATION IN		Now I would like to ask you about your work as [ OCCUPATION FROM Q. 17]. Where did you carry out most of this work in the last 12 months? FARM OWNED OR RENTED BY HOUSEHOLD MEMBER	In this work were you  (READ ALL RESPONSES)  an employer?1("part D) a private worker or unpaid workerin a house- hold farm or nonfarm business?2("part D) a paid worker in a household farm or nonfarm business?3("24) an employee of someone who is not a member of your household?4	Is your employer for this work (READ ALL RESPONSES) a private company.1 a village employment program? 2 UNMIK, public sector?	How many people altogether work at the place where you do this work?  WRITE 222 IF >100	Do you receive wages, salary or other payments either in cash or in other forms from this employer for this work?  YES1 (>>24) NO2	What is the main reason you receive no payment for this work?    "Q.26     APPRENTICESHIP OR UNPAID TRAINEESHIP1 LABOR EXCHANGE.2 PAYING OF DEBT.3 OTHER4
	OCCUPATION	CODE				NOMBER		
	·							

	24.		25.	26.	27.		28.	29.	30.	31.
D C O D E	What period of time did this payment cover?		How many hours did you work for the pay you just reported? Please include any hours of paid vacation or sick leave.	this work in any other form (meals, tips,	What is the value of those payments? Over what time interval?		Is this the only other employer for whom you did this work in the last 12 months?	how many months did	months, for how many weeks did you work for this employer?	During the weeks you worked for this employer in the last 12 months, for how many hours did you usually work per week?
	2.		HOURS	YES1 NO2 (»28)		. DEM DINAR TIME UNIT	YES1 (»D) NO2	MONTHS PER YEAR	WEEKS PER YEAR	HOURS PER WEEK
	l		1				Ī			<u> </u>
-										
<u> </u>										

HOUR...2 DAY....3 WEEK....4 FORTNIGHT...5 MONTH......6 QUARTER....7 HALF YEAR...8 YEAR...9

LABOR MODULE
PART D: LFP\_IN 1991
ALL PERSONS ABOVE 20 YEARS OLD

RŢ D:	D: LFP IN 1991  Perfore challishment of outcomy (1991)											
				Before abolishment of autonomy (	1991)							
1		2		3		4	5					
D C O D E	A C T - > - F Y C	I would like to ask you some questions a kinds of activities you were performing be abolishment of autonomy, in 1991. This work on a farm, privately, for a househo or for someone else.  What kind of work did you do?	pefore the sincludes Id business, In Seri section 1991"	What kind of trade or business wa connected with?  Dian Questionnaire the title of this and question 2 say "Before instead of "Before abolishment of my (1991)"	a una work		Which of these activities was the most important at that time, in the sense that you worked the most hours in it? And which was the next most important?  **PART E**  ACTIVITY REPORTED**  AS MOST IMPORTANT1					
	0						ACTIVITY REPORTED AS					
	D						NEXT MOST IMPORTANT.2					
	Ε						OTHER ACTIVITIES3					
			N OCCUPATION CODE AND GO NEXT									
		PERSON STUDENT WRITE 888, GO NEXT PER:	SON			YES1						
			ERSON , I DID NOT WORK: WRITE 666			(»NEXT						
		ONE LINE PER ACTIVITY	OCCUPATION		INDUSTRY							
		WRITTEN DESCRIPTION	CODE	WRITTEN DESCRIPTION	CODE	NO2						
	Α											
	В											
	С											
	D				†							
$\vdash$	Е											
	F											
$\vdash$	G				†							
$\vdash$	Н				+							
-	l											
	J				+							
	K				+	-						
	L											
	_											

PART E: MAIN ACTIVITY IN 1991 Now I would like to ask you about your main activity in 1991 as IREAD OCCUPATION In this work were you... Were vou Was your employer for this How many Were vou FOR EACH PERSON WORKING FROM Q. 1]. If you did this work for more than (READ ALL RESPONSES) work... (READ ALL entitled to working in people BEFORE 1991, LOOK AT THE altogether the same RESPONSES) the one employer at that time, please think about ANSWERS TO QUESTION 5 OF your work for the employer for whom you farm or worked at the benefits of PART D. WRITE DOWN THE business in a private company.1 worked the most hours. Where were you place where social OCCUPATION WITH CODE 1 IN the last 12 a village employment vou did this security carrying out most of this work? an employer?....1 THAT QUESTION (MAIN program?... months? work. in system in a worker privately or OCCUPATION TEN YEARS AGO) government, public 1991? this work? FARM OWNED OR RENTED BY unpaid worker in a housesector?.....3 HOUSEHOLD MEMBER.....1 hold farm or nonfarm a socially-owned OTHER FARM.....2 business?....2 enterprise or a paid worker in a cooperative?....4 OTHER HOME.....4 household farm or nonfarm a NGO or VEHICLE....5 WRITE business?.....3 humanitarian FROM DOOR TO DOOR.....6 222 an employee of someone who organization YES...1 IF >100 IN THE STREET, NO FIXED PLACE..7 is not a member of your a private IN THE STREET, FIXED PLACE.... 8 (»Q. 6) YES...1 household?.....4 (>>5) individual?....6 OCCUPATION IN A MARKET NO...2 NO...2 OFFICE/FACTORY.....10 OTHER .....11 OCCUPATION CODE NUMBER

LABOR MODULE
PART E: MAIN ACTIVITY IN 1991

\RT <u>E: N</u>	IAIN ACTIVIT	Y IN 1991						
	8.	9.	10.	11.	12.	13.	14.	
D C O D E		LOST JOB, LAID OFF OR BUSINESS FAILED1 DECIDED TO CONCENTRATE ON OTHER JOB ALREADY DOING. 2(»NEXT PERSON) FOUND JOB WITH BETTER PAY	you lost that job?  PLANT CLOSED DOWN OR MOVED1  POSITION OR SHIFT ABOLISHED2  FIXED DURATION JOB COMPLETED3	Did you find work to replace that job?	weeks after losing that	How many jobs have you had since then?	How lon you bee work sin losing th	n without ce
	YES1 (>> NEXT PERSON)	MOVED, DISPLACED	OWN BUSINESS FAILED4 FIRED5 DISCRIMINATION FOR ETHNIC REASONS 6 WAR (DISPLACED, DESTRUCTION)7	YES1 NO2		»NEXT PERSON	TH. YE. LE MOI	MORE AN 2 ARS, AVE NTHS ANK
	NO2			(»14)	WEEKS	NUMBER	YEARS	MONTHS

1.	2.			3.	
Over the past 12 months, has anyone in your household operated any non-agricultural business which produces goods or services (for example, artisan, metalworking, construction, repair work; also include processing and selling your outputs from your own crops if done regularly) or has anyone in your household owned a shop or operate a trading business?		usiness does your household operate? BE TO DETERMINE INDUSTRIAL SECTOR IN WHICH ENTERPRISE OPERATES.		Who is most informed about and/or in charge of day of the business?  COLLECT THE INFORMATION ON THIS PAGE FOR BUSINESSES BEFORE PROCEEDING TO PART COMPLETE PARTS B -F FOR THE FIRST BUSINING SECOND, ETC., UNTIL ALL BUSINESSES ARE SOOM ON PARTS C -E FOR THREE ENTERPHOUSEHOLD HAS MORE THAN THREE ENTERPHOUSE HAS MORE THAN THREE ENTERPHOUSE HAS MORE THAN TH	OR ALL B. THEN ESS, THEN THE URVEYED. (THERE PRISES. IF THIS PRISES, FILL OUT A DR THE
YES1				INFORMED ABOUT AND/OR IN CHARGE OF THE PART A AND TRY TO COME BACK LATER TO TAPERSON.	E BUSINESS, FILL
NO2	business				
(»NEXT MODULE)	ID	FULL WRITTEN DESCRIPTION	CODE	FIRST NAME	ID CODE
	1				
	2				
	3				
	4				
	5				
	6				

	1.	2.	3.		4.	5.	6.	7.	8.
ENTERPR-SE CO	[READ ANSWER TO PART A, Q.3?	RESPONDEN T IS NOT THE PERSON INDICATED	business d ANSWER Q.2]. For has the busin operation	your oing [READ TO PART A, how long siness been	Where do you operate the business?  HOME, INSIDE THE RESIDENCE1 HOME OUTSIDE THE RESIDENCE2 INDUSTRIAL SITE3 TRADITIONAL MARKET4 COMMERCIAL DISTRICT SHOP5 ROADSIDE6 OTHER FIXED PLACE7 MOBILE8	the members of your household	In how many households do the other owners live?		Has this business been in operation during the past 7 days?
D E	YES1					YES1			YES1
	(»3)	ID				(»8)			NO2
	NO2	NUMBER	YEARS	MONTHS		NO2	NUMBER	PERCENT	
1									
2									
3									

\ I C	EMPLOTMENT								FERSC		DRIVIED ABOUT
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.
	CHECK ANSWER	Have you	Please list for me the	ENTER	During the	How many of	Are there any	Please list for me the	ENTER	During the	How many of
b	TO PART B, Q.8.	yourself spent	names of all other	THE ID		them did you		names of all household		past 12	them did you
u			household members	CODES	how many		who have spent		CODES		pay, in cash
S			who have worked in	FOR ALL	people did	or in kind?	time working in		FOR ALL	many people	or in kind?
i			this business during	PEOPLE	this business				PEOPLE	did this	
n		the past	the past 7 days.		employ who				LISTED IN	business	
e		7days?		3.	are not members of		months but not during the past	not during the past 7 days).	8.	employ who are not	
S					this		7days?	uays).		members of	
					household?					this	
			IF MORE THAN 6					IF MORE THAN 6		household?	
			OTHER					OTHER			
С			WORKERS, LIST					WORKERS, LIST			
0			THE 6 MOST		IF 0, »7			THE 6 MOST		IF 0,	»»PART D
D E	ANSWER IS 11	YES1	IMPORTANT		IF 0, #1		YES1	IMPORTANT		»PART D	""I AICI D
-	ANSWER IS 22	NO2					NO2				
	(»12)		NAME	ID CODE	NUMBER	NUMBER	(»10)	NAME	ID CODE	NUMBER	NUMBER
	•	•	•			•	•				
1											
					1						
					1						
					+					-	
2											
3											
									_		
					1					†	

	12.	13.	14.	15.	16.
b u s i n e s s	this business at	Please list for me the names of all other household members who have worked in this business during the past 12 months.  IF MORE THAN 6	ENTER THE ID CODES FOR ALL PEOPLE LISTED IN 13.	During the past 12 months, how many people did this business employ who are not members of this household?	How many of them did you pay, in cash or in kind?
C O D E	YES1	OTHER WORKERS, LIST THE 6 MOST IMPORTANT		IF 0, »PART D	»»PART D
	NO2	NAME	ID CODE	NUMBER	NUMBER
1			<u> </u>	<u> </u>	
2					
3					

	1.	2.	3.		4.	5.		6.	7.		8.	9.
	The next questions are about the	During the	During the p		During the past 7 days,	What was the			What was th			During the
E	10101140 )04 04111 110111 )041	past 7 days,		•	has the business made	these transa			-		-	months that
N	business. Please include all	for how	the busines		any transactions using	value of good		has your	consumed b		, -	the business
T	revenues in your answers (that is	many days	from the sal		something other than	services rece			household o	ver the pas	-	was in
E	the total cash and in-kind value o	was the	products, go		money? For example, ha	. ,			7 days?		months was	
R	goods and sorvices that you	business in	services?		the business received	of your own		any goods			the	how many
Р	rocorro mom ano caro er gocae	operation?			payments in the form of	that you used		or services			business in	, ,
R	and services) before subtracting				goods and services, or	payment) ov	er the past				operation?	month did
	any business expenditures and				have you paid for the	7 days?		by this				this business
S	any expenses for your household.				purchase of any items			business?				usually
E					with your own products?							operate?
С	CHECK ANSWER		CIIDDEM	CY: 1 DEM		CIIDDENC	Y: 1 DEM		CIIDDENIC	Y: 1 DEM		
0	TO PART B, Q.8		Continu	2. DINAR			2. DINAR		CORREIN	2. DINAR		
D	1017411 B, Q.0			Z. DIMAK			Z. DIMAK			Z. DIMM	1	
ΙĒ	ANSWER IS 11				YES1			YES1				
-	ANSWER IS 22			CURR-	NO2		CURR-	NO2		CURR-	1	
	(»8)	DAYS	AMOUNT	ENCY	(»6)	AMOUNT	ENCY		AMOUNT	ENCY	MONTHS	DAYS
		•	•			•		•	•			
1												
2												
3												
							<u> </u>					

PART D2: REVENUES AND OPERATION SCHEDULE PERSON MOST INFORMED ABOUT EACH ENTERPRISE

	10.												11.		12.	13.	14.	15.		16.	17.	
E N T E R		ne last en the						•	_			?	In a 'high sale what is your le per month?		'average sales' month,	sales' month, what is your level of sales	something other than money? For example, has the business received	these trans value of go services re payment ar of your owr	actions (the ods and ceived as nd the value products	past 12 months, did your household ever consume	What was the the goods or that your hou consumes du month with 'a sales'?	services isehold uring a
P R I S E			H	READ	••••				.1								goods and services, or	that you us payment) d month with sales'?	uring a	any goods or services produced by this business?	»»PART	E
C O D E				OW ONE:									CURRENCY	1. DM 1. DINAR		IE SAME ' AS IN Q. 11	YES1	CURRENCY	1.DEM 2. DINAR	YES1	CURRENCY	1.DEM 1 DINAR
	99 OCI		DEC	JAN	00 FEB	MAR	APR	MAY	E	JUL		00 SEP	AMOUNT	CURRENCY	AMOUNT	AMOUNT	NO2 (»16)	AMOUNT	CURRENCY	NO2 (»PART E)	AMOUNT	CURR.
1																					'	
3																						
		ı	<u> </u>		Н	OUR	2	Dž	AY	3	WEE	ж	.4 FORTI	IIGHT5	MONTH	6 QU.	ARTER7 HALF YE	AR8	YEAR9	<u> </u>		

PART E: EXPENDITURES ON INPUTS

PERSON MOST INFORMED ABOUT EACH ENTERPRISE

	1.	2.	3.
ENTERPRISE	CHECK ANSWER TO PART B, Q.8.	During the past 7 days, how much have you spent in total on the purchase of inputs (labor, raw materials, items for resale, transport, electricity, water fuel, rental, maintenance, taxes, registration fees, insurance, etc.)?	you spent in total on the purchase of inputs (labor, raw materials, items for resale,
C O		CURRENCY: 1 DEM 2. DINAR	
D			
Ε	ANSWER IS 11		
	ANSWER IS 22		
	(»3)	AMOUNT	AMOUNT
4			
1			
2			
3			-

WORKSHEET FOR C LABOR RAW MATERIALS RESALE ITEMS TRANSPORT ELECTRICITY WATER FUEL	ALCULATING TOTALS	S IN 2 AND 3
RENT		
TAXES		
TOTAL		
	7 DAYS IN Q2	12 MONTHS IN Q.3

		1.	2.	3.	4.
ENTERPRISE CODE	I T E M S	I would now like to ask you questions about the assets (that is, equipment, buildings, vehicles, tools, etc.) that you use in your business.  At present, does this business own this [ITEM]?  YES1 NO2 (*NEXT ITEM, Q.1.	Is this enterprise the sole owner of this [ITEM], or is ownership shared with another business, or with another individual?  SOLE OWNER1 SHARED WITH ANOTHER BUSINESS 2 SHARED WITH ANOTHER INDIVIDUAL 3	If you wanted to sell the [ITEM], how much could you sell it for today?  *NEXT ITEM, Q.1. IF LAST ITEM, »4	During the past 12 months, did this business acquire any business assets (like those we just talked about)?  YES1 NO2 (*BUSINESS 2)
		IF LAST ITEM, »4)		AMOUNT	
1	Land		I		
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				
2	Land				
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				
3	Land				
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				

A. Illanoi da a a coa			151	2ND 3RD
1. How does yo	our household generally find o	ut what is going on in Kosovo?		
	Television Radio	1 2		
	Newspaper	3		
	Organization (politic and or social)	cal, economic 4		
	Coworkers	5		
	Relatives, friends an	-		
	Others Do not find out	7 8		
	nbers of your household active inizations and/or associations?		YES1	
groups, orga	inizations and/or associations:	•	NO2	
-	•			No. 1
Cooperative	• .			No. 2 No. 3
Trade union.	association	may ad "Dalking! Dark " in	:	No. 4
	Sarhi	an Questionnaire		No. 5
	e group			No. 6 No. 7
Women's gro	oup			No. 8
	oup			No. 9
	sed group			No. 10 No. 11
Sports group	)			No. 12
			**	No. 13 No. 14
	y			No. 14 No. 15
				_
	ast 12 months, have members ers of your community come to cern?			
	Yes, once	1		
	Yes, twice or three t	times 2		
	Yes, regularly No	3 4		
		-		
other member	past 12 months, have member ers of your community to appro for assistance with a commo	oachan official (government		
- ,		1	<u> </u>	-
	Yes, once Yes, twice or three t	times 2		
	Yes, regularly	3		
	No	4		
If a member	of your household suffered fro	om a serious illness or died	1st	2nd 3rd
	no would you turn to for assista			
				•
RECORD FI	RST THREE CHOICES			
	HUMANITARIAN GROUP	1		
	RELATIVES IN KOSOVO RELATIVES ABROAD	2		
	NEIGHBORS	4		
	FRIENDS	5		
	COMMUNITY LEADERS	6 7		
	RELIGIOUS LEADERS			
	OTHERS	8		
lf you cutter	OTHERS	8	1st	2nd 3rd
,		8 I harvest, loss of	1st	2nd 3rd
employment)	others ed an economic loss (e.g. bad), who would you turn to for as	8 I harvest, loss of	1st	2nd 3rd
employment)	OTHERS ed an economic loss (e.g. bad	8 I harvest, loss of	1st	2nd 3rd
USE SAME	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of ssistance?		2nd 3rd
employment	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of ssistance?	YES1	
employment;  USE SAME (	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of ssistance?	YES1	2nd 3rd  (>> GO TO NEXT MODULE)
employment;  USE SAME (	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of sistance?  Der of your household been  Corruption/extortion	YES1	, (>> GO TO NEXT
employment;  USE SAME (	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of sistance?  ber of your household been  Corruption/extortion Harassment/threats	YES1	, (>> GO TO NEXT
USE SAME	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of sistance?  Der of your household been  Corruption/extortion	YES1	, (>> GO TO NEXT
USE SAME	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	I harvest, loss of sistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression	YES1	, (>> GO TO NEXT
USE SAME	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	8 I harvest, loss of sistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery	YES1	, (>> GO TO NEXT
employment, USE SAME ( 7. Over the pa the victim of.	ed an economic loss (e.g. bac ), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb	I harvest, loss of sistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping	YES1	, (>> GO TO NEXT
employment, USE SAME ( 7. Over the pa the victim of.	ed an economic loss (e.g. bad), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb?	It harvest, loss of sistance?  Deer of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping turn to for assistance?	YES1	, (>> GO TO NEXT
employment, USE SAME (  Over the pa the victim of.	ed an economic loss (e.g. bad), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb?	8 I harvest, loss of sistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping turn to for assistance?	YES1	, (>> GO TO NEXT
employment, USE SAME ( 7. Over the pa the victim of.	ed an economic loss (e.g. bad), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb?	8 I harvest, loss of sisistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping turn to for assistance?  1 2 3	YES1	, (>> GO TO NEXT
employment; USE SAME ( 7. Over the pa the victim of.	ed an economic loss (e.g. bad), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb?  situation(s), who did you first to KFOR INTERNATIONAL POLICE UNMIK POLICE KPC	tharvest, loss of sistance?  Der of your household been  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping  curn to for assistance?	YES1	, (>> GO TO NEXT
employment; USE SAME ( 7. Over the pa the victim of.	ed an economic loss (e.g. bad), who would you turn to for as CODES AS IN QUESTION 5 st 12 months, have any memb?	tharvest, loss of sistance?  Corruption/extortion Harassment/threats Physical aggression Theft/robbery Sexual aggression Kidnapping turn to for assistance?	YES1	, (>> GO TO NEXT

## SECTION 2 Agriculture

1. Does any member of your household currently owns and/or operates land, forest, meadow, pasture? YES..1 (INCLUDE ALSO THE DWELLING PLOT) NO...2 (»PART A2) 10. Please tell me What is the What kind of land is this? If plot is fallow, what was the Was Was this If the plot was What is the If you about each plot of PROBE FOR ANY PLOT GIVEN. this plot plot irrigated, from status of the area of the were to land that a irrigated what source? plot? plot? irrigated sell this Crop rotation.....1 member of your during durina plot of Lack of inputs.....2 DWELLING..1 household has OWNED..1 the the 1999 land Lack of manpower..3 ANNUAL CROPS AND RENTED..2 access to? Own well..1 2000 1997today, Lack of equipment.4 VEGETABLE GARDENS....2 BORROWED/GI Please describe or 0 1998 season? Public how Economic TEMPORARY MEADOWS (LESS give me the name FT..3 pipeline..2 season? much profitability .....5 THAN 5 YEARS)..3 of each plot. Stream 3 could you Mines .....6 ORCHARDS....4 SQUARE Main sell it for? Other risks ...... 7 VINEYARDS..... 5 METERS.....1 COMPLETE THIS Irrigation PERMANENT PASTURES 6 HECTARES..2 IF 2 OR 3. QUESTION FOR Scheme....4 FORESTS 7 ARES.....3 ALL PLOTS. THEN GO TO 11 Other ..5 Currency WATER SURFACE .... 8 **ASK QUESTIONS 3-**DEM 1 LEFT FALLOW ....9 10 FOR EACH PLOT DINAR 2 BEFORE GOING TO YES.1 YES.1 THE NEXT PLOT. UNIT NO..2 NO..2 IF 9 GO TO 5, OTHERWISE IF 2 GO GO TO 6 CODE TO 9 NEXT PLOT NAME OF PLOT AMOUNT 10 11 12 13 14 15

	11.	12.	13.	14.	15.			USE CODES
P L O T C O D E	From whom was this plot rented or borrowed?  RELATIVE1 FRIEND2 OTHER HOUSEHOLD3 LOCAL AUTHORITY4		What share of the output is given to the	How much money did you or will you give to the owner for the use of this land during the last cropping season?  IF NO MONEY PAYMENT, WRITE ZERO. Currency	How muc will you g owner in use of thi the last c season? IF NOTH- IN KINE IN ALL O	ive to the kind for its land or ropping HING GO, WRIT COLUMOP CO	the during IVEN TE 0 MNS.	USE CODES WITH STAR WHENEVER POSSIBLE  UNIT CODES: KILO*1 GRAM*2 LITER*3 BUNCH4 TIN5 PIECES6 CARTONS. 7 BOTTLES. 8
	PRIVATE ORGANIZATION.5 GOVERNMENT6			DEM 1 DINAR 2	FROM S	SECTIO	N B1	
	OTHER7		PER-			UNIT	CROP	
			CENTAGE		AMOUNT	CODE	CODE	
1								
2								
3								
4								
5 6								
7								
8								
9								
10								
11								
12								
13								
14 15								

1. During the last cropping season 1999-2000 YES..1 has your household rented out or lent out any of its own land to another household? NO...2 (»PART B1) USE CODES 10. WITH STAR Who in this Please tell me If you were How During the last cropping What What is the What kind of land is this? To whom is this plot How much How much did WHENEVER household is about each plot to sell this many rented out or lent out? season what kind of share of money did you area of the vou or will vou POSSIBLE DWELLING 1 most familiar 0 of land plot of land years has the output or will you plot? rental or use receive in kind for ANNUAL CROPS AND with this plot belonging to today, how it been RELATIVE....1 arrangement was made is given to receive for the the use of this UNIT VEGETABLE GARDENS....2 your household of land? FRIEND.....2 with the renter using the use of this land CODES: much since this vour land during the TEMPORARY MEADOWS (LESS WRITE C that was rented household during the last AREA could you plot was OTHER land? last cropping KILO\*... THAN 5 YEARS)....3 DOWN ID 0 or lent out to HOUSEHOLD....3 CODES: sell it for? fallow, or by the cropping season? ORCHARDS....4 CODE OF GRAM\*... D another cleared LOCAL tenants? season? VINEYARDS 5 HOUSEHOLD RENTAL....1 household? SOUARE AUTHORITY....4 from the PERMANENT PASTURES 6 LITER\*... MEMBER. SHARECROP..2 IF NOTHING Please describe METERS...1 PRIVATE bush? FORESTS 7 **ASK THIS** ORGANIZATION.5 NO PAYMENT.3 IF NO RECEIVED IN HECTARES.2 or give me the WATER SURFACE....8 BUNCH... **PERSON** EXCHANGE OF THIS MONEY name of each GOVERNMENT...6 KIND. WRITE 0 ARES....3 QUESTIONS PAYMENT, ...7 PLOT FOR IN ALL OTHER plot. Currency TIN. .... 4-12. ANOTHER..4 COLUMNS. DEM 1 OTHER .....5 DINAR 2 Currency PIECES.. DEM 1 NAME AREA PERCEN-DINAR 2 UNIT CROP CARTONS. CODE CODE CODE OF PLOT ID CODE AMOUNT YEARS TAGE AMT BOTTLES. 16 17 18 19 20 21 22 23

1. Did any member of your household plant/cultivate any crop during the season 1999-2000?

YES 1 GO TO SECTION B2

Now, I would like to speak about your household's agricultural production С In the 1999-2000 season, What surface How much of CHECK IF What surface has How much CHECK How was this have you planted/cultivated any [CROP]? ROPCOD [CROP] has been planted with this of [CROP] IF THE of land has THE HARVEST has your HARVE cultivated? been planted your crop? with this household IS BIGER household ST IS harvested BIGGER THEN 0 crop? harvested, during the , during THEN 0 last cropping the last Ε season? cropping season? IN PURE SQUARE STANDS..1 METERS..1 INTERCROPE HECTARES.2 D-MAIN ARES......3 CROP..2 INTERCROPE YES..1 SECONDARY YES 1 NO..2 NO 2 CROP ..3 GOTO Code of

Annual crops  1 Winter who	at					NO2
1 Winter who	at					
I I I I I I I I I I I I I I I I I I I						
2 Maize						
3 Barley						
4 Oats						
5 Rye						
6 Potato						
7 White bear	ıs					
8 Peas						
9 Lentils						
10 Vetches						
11 Sugar bee	S					
12 Soybean						
13 Sunflower						
14 Rapeseed	(Colza)					
15 Tobacco						
16 Cabbage						
17 Cauliflowe						
18 Spinach						
19 Salad crop	S					
Other leafy	veg.					
21 Melons						
22 Watermelo	ns					
23 Cucumber						
Pumpkin, s	quash					
25 Stawberry						
26 Pepper						
27 Tomato						
28 Eggplant						
29 Carrot						
30 Garlic						

	2.		3.	4.		5.	6.	7.		8.	9.
C R O P C O D E	In the 1999-2000 season, have you planted/cultivated any [CROP] ?		How was this [] cultivated?	What s of land been p with thi crop?	has lanted	How much of [CROP] has your household harvested, during the last cropping season?	CHECK IF THE HARVEST IS BIGER THEN 0	been plante		household harvested , during the last cropping	IF THE HARVE ST IS
	YES 1			TANDS1 METERS1 NTERCROPE - ARES3 ROP2 NTERCROPE -			YES1 NO2			season?	
	0000	NO 2	CROP3				GO TO	Code of		1	
	CROP NAME	(>> NEXT CROP)	IF 3 >> Q.7	SURF ACE	UNIT	Kg	NEXT CROP	main crop	%	Kg	YES1 NO2
31	Onione										
32	Onions Red beet										
33	Radish										
Endd	ler crops - Mead	owe and Pa	noturos								
34	Alfalfa	OWS AND FE	stures								
35	Clover										
36	Mixed grasses										
Perm	nanent crops: Vi	ineyards, O	rchards								
37	Apple										
38	Pear										
39	Quince										
40	Apricot										
41	Cherry (sour)										
42	Peach										
43	Plums										
44	Other trees										
45	Wine grapes										
46	Table grapes										
47	Raisins										

1. Do you c	wn any forest?		1. YES		
				2. NO	GO TO 6
2.	3.	4.	5.		

2.	3.	4.	5.		
LIST ALL PLOT CODES WITH FOREST IN PART A1, Q.4	Could you please tell me what is the approximate age of the forest in this plot (number of years)?		What produc forest in last	ts did you obta 12 months?	in from the
		1. YES	TIMBER	FUEL WOOD	BARK
		2. NO			
		(>> NEXT			
	YEARS	PLOT)	CUB. MTRS	CUB METERS	T

6. Did you have access to	1. YES	
any public authorized forest?	2. NO	GO TO SECTION C

7. What products did you obtain from the forest in last 12 months?							
TIMBER	FUEL WOOD	BARK					
CUB. MTRS	CUB. MTRS	T					

Now I would like to ask you about the various inputs you are using for cultivation, starting with seeds.

SEEDS	like to ask y	ou about the variou	is iriputs you	are using i	or cultivation	, starting with	secus.	
1.	2.	3.	4.	5.	6.	7.	8.	9.
REPORT THE CULTIVAT ED CROP CODE	Did you use seeds for cultivating this crop?	season, What	What was the total quantity of seeds used?	-	did your household spend on seeds in	Where did you buy the seeds?	For [CROP], how much did you receive from other sources in the 1999- 2000 season?	RELATIVES IN KOSOV RELATIVES ABROAD BANK 4
SEE B1. Q2	YES1 NO2 2>>NEXT ROW	1.COMMERCIAL CERTIFIED 2.COMMERCIAL, NON-CERTIF. 3.OWN	kg	if 0, >> 8 kg	CURRENCY 1.DM 2.DINAR	CODES FROM THE RIGHT	if 0, >> NEXT ROW kg	MAIN SOURCE
						State of Serb se in Question nnaire		

Codes for bought inputs:						
1 Local Private Stockiest						
2 Municipality Private Stockiest						
3 Neighbor						
4 Co-operative/Combinat						
5 Other						

#### **FERTILIZERS**

1.  REPORT THE CULTIVAT ED CROP CODE	2. Did you use fertilizer for	3. In the 1999-2000 season, What type of fertilizers did you use on [CROP]?	4. What was the total quantity of fertilizer used?	fertilizer did your household	did your household spend on fertilizer in the 1999- 2000 season?	Where did you buy the fertilizer?	8. For [CROP], how much did you receive from other sources in the 1999- 2000 season?	9.  Who provided the fertilizer for [crop]?  HUMANITARIAN GF RELATIVES IN KORELATIVES ABROABANK 4  SOCIALLY OWNED ENTERPRISE/States  EMPLOYER 6 OTHERS 7	OSOVO 2 ND 3	
SEE B1. Q2	YES1 NO2 2>>NEXT ROW	FERTILIZER CODE ON THE RIGHT	kg	if 0, >> 8 kg	CURRENCY 1.DM 2.DINAR	CODES FROM THE RIGHT	if 0, >> NEXT ROW kg	MAIN SOURCE		<b>—</b>
					En	added State of terprise in Que lestionnaire		ocially Owned de 5) in Serbian	Fertilizer  1. Compound 15.15.15  2. Compound other  3. Nitrogen CAN  4. Nitrogen Urea  5. Nitrogen Other  6. Super Phosphate  7. Phosphate other	Codes for bought inputs:  1 Local Private Stockiest  2 Municipality Private Stockiest  3 Neighbor  4 Co-operative/Combinat  5 Other
									Potash muriate     Potash sulfate	

MANURE								
1.	2.	3.	4.	5.	6.	7.	8.	9.
REPORT THE CULTIVAT ED CROP CODE	manure for	In the 1999-2000 season, What type of manure did you use on [CROP]?	What was the total quantity of manure used?	manure did your household	household spend on manure in	Where did you buy the manure?	For [CROP],ho w much did you receive from other sources in the 1999-2000 season?	Who provided the manure for [crop]?  HUMANITARIAN GROUP 1 RELATIVES IN KOSOV 2 RELATIVES ABROAD BANK 4 SOCIALLY OWNED ENTERPRISE/State o Serbia** 5
					CURRENCY		if O,	EMPLOYER 6 OTHERS 7
	YES1				1.DM		>> NEXT	OTHERS /
SEE B1.	NO2	MANURE CODE		if 0, >> 8	2.DINAR	CODES FROM THE RIGHT	ROW	
Q2	2>>NEXT	ON THE RIGHT				THE RIGHT		
	ROW		kg	kg			kg	MAIN SOURCE
				Ent		of Serbia to So pestion 9 (Cod		
			ĺ					

Codes for bou	ight inputs:
---------------	--------------

- 1 Local Private Stockiest
- 2 Municipality Private Stockiest
- 3 Neighbor
- 4 Co-operative/Combinat
- 5 Other

3

### Manure

- 1. Large ruminant
- 2. Small ruminant
- 3. Other animal
- 4. Green manure

#### **PESTICIDES**

PE2 HCIDE	<u> </u>								
1.	2.	3.	4.	5.	6.	7.	8.	9.	
THE CULTIVAT	pesticides for cultivating	In the 1999-2000 season, What type of pesticide did you use on [CROP]?	the total quantity of	pesticide	did your household spend on pesticide in	you buy the pesticide?	For [CROP], how much did you receive from other sources in the 1999- 2000 season?	Who provided the pesticide for [crop]?  HUMANITARIAN GROUNT RELATIVES IN KOSON RELATIVES ABROAD BANK 4  SOCIALLY OWNED EN OF Serbia** 5  EMPLOYER 6 OTHERS 7	OVO 2 3
SEE B1. Q2	YES1 NO2 2>> NEXT ROW	PESTICIDE CODE ON THE RIGHT	kg	if 0, >> 8 kg	CURRENCY 1. DM 2. DINAR		if 0, >> NEXT ROW kg	MAIN SOURCE	
									Pesticide
						Socially Owne ode 5) in Serb			1. Insecticide
				uestionnaire		ode 5) ili Seit	лап		2. Fungicide
									3. Herbicide
								I	Codes for bought inputs:
									1 Local Private Stockiest
									2 Municipality Private Stockiest
									3 Neighbor
									4 Co-operative/Combinat
									5 Other

LABOR

Now I would like to ask you some questions about labor that you hired during the 1999-2000 season.

1.	2.	3.	4.	5.	6.	7.	8.	
REPORT THE CULTIVAT ED CROP CODE	Did you hire any labor for cultivating this crop?	What kind of tasks did you hire labor for on in the 1999-2000 season?	How many workers in total did you pay for [TASK]	How many work-days did you pay in total for [task]?	the daily wage in	Did you also pay workers in-kind?	What was the main payment in kind?	
	YES1	TASKS CODES	[		CURRENCY	1.YES	PAYMENT	
	NO2				1.DM	2. NO	CODES	
SEE B1. Q2	2>> NEXT ROW		WORKERS	MANDAYS	2.DINAR AMOUNT	>> NEXT ROW	ON RIGHT	PAYMENT IN KIND
QL								1. MEALS
								2. % CROP
								3. BOARDING
								1
								4. TRANSPORT
	I.	l	<u> </u>	I	I	1	<u> </u>	I

TASKS

1.PREPARING LAND

2. SOWING

3. APPLYING INPUTS

4. WEEDING, BUTTING

5. CROP SPRAYING

6. WATERING

7. HARVESTING

8. OTHERS

#### **MACHINERY**

Now I would like to ask you some questions about machinery and equipment that you rented during the 1999-2000 season.

1.	2.	3.	4.	5.	6.	7.	8.	
REPORT THE CULTIVAT ED CROP CODE	Did you hire any machinery or equipment for cultivating	What kind of tasks did you hire machinery for in the 1999- 2000 season?	Who performe d the [TASK]?	For how many HA in total did you pay? [TASK]?	the value of the rent in	Did you also pay operators in- kind?	the main	
SEE B1. Q2	this crop?  YES1  NO2  2>> NEXT	TASKS CODES ON RIGHT	PROVIDER CODE ON RIGHT	на	CURRENCY 1. DM 2.DINAR	1.YES 2. NO 2>>NEXT	PAYMENT CODES ON RIGHT	PAYMENT IN KIND
	ROW					ROW		1. MEALS
								2. % CROP
								3. FUEL
								4. OTHER
								PROVIDER
								1. PRIVATE, VILLAGE
								2. PRIV., REGION
								3. COOPERATIVE
								4. OTHER
								_
	1	l			1	<u> </u>	1	

TASKS
1.PLOUGHING
2. DISKING
3. CULTIVATING
4. COMBINE HARVESTING
5. MOWING
6. TRANSPORT
8. OTHERS

INPUTS PART C:

#### SEEDLINGS

SEEDLING	•							
1.	2.	3.	4.	5.	6.	7.	8.	9.
REPORT THE CULTIVAT ED CROP CODE	Did you use seedlings for cultivating this crop?	In the 1999-2000 season, What type of seedlings did you use on [CROP]?	What was the total quantity of seedlings used?	seedlings did your household purchase	did your household	Where did you buy the seedlings?	For [CROP], how much did you receive from other sources in the 1999-2000 season?	RELATIVES IN KOSOV RELATIVES ABROAD BANK 4
SEE B1. Q2	YES1 NO2 IF 2>>NEXT	1.COMMERCIAL CERTIFIED 2.COMMERCIAL, NON-CERTIF. 3. OWN	Number	if 0, >> 8 Number	CURRENCY 1. DM 2. DINAR	CODES FROM THE RIGHT	if 0, >> NEXT CROP Number	MAIN SOURCE
				Ent		of Serbia to So uestion 9 (Cod		

Codes for bought inputs:

1 Local Private Stockiest

2 Municipality Private Stockiest

3 Neighbor

4 Co-operative/Combinat

5 Other

1

3

DISPOSITION OF CROPS PART D

ASK THE MOST KNOWLEDGEABLE PERSON

CROP CODE	1. REPORT ALL CROPS CHECKED IN QUESTION 6 OR 9 OF B1 (CODE AND NAME). THESE ARE ALL THE CROPS HARVESTED IN THE 1999-2000 CROPPING SEASON	2.  How mucl [] you h during the cropping s was sold?	arvested last season	3.  What price you get for [] you so [] you you so [] you so	r the old?  THEN CICE, HE GGE	4. To whom did you sell this []? TRADER1 RELATIVE2 FRIEND/ NEIGHBOR3 OTHER INDIVIDUAL.4 COOPERATIVE.5 GOVERNMENT.6 PRIVATE COMPANY7 OTHER8	5. Where did you sell this []? FARMGATE1 LOCAL MKT2 MAIN MARKET.3 COOPERATIVE BUILDING .4 PRIVATE COMPANY	6. After it wa harvested much [] lost to insir rodents, ro or some o problem?  IF NON ENTER 2 IN BO' COLUM	, how was ects, otting ther	7. How much [] harves during the cropping s was given laborers ou other payn  IF NON ENTER 2 IN BO' COLUM	ted last eason to pay make nents?  IE, ERO FH	8. How much the [] harvested during the cropping season we used for animal fee IF NON ENTER Z IN BO'COLUM	last as as d? NE, ZERO	9. How much [] harvest during the cropping s was used t produce pr food produ sale?  IF NO! ENTER 2 IN BO COLUM	sted last eason to rocessed icts for	10. How much harvested last cropping has alread consumed members in household  IF NON ENTER Z IN BO'COLUM	during the ng season y been by of your ?	11. How much harvested of last croppin has been gift?	during the	12. How much [] harves during the cropping still being stored by y household  IF NON ENTER Z IN BO' COLUM	ted last eason is your ?
	CROP		UNIT		CURR.	MAIN	MAIN		UNIT		UNIT		UNIT		UNIT		UNIT		UNIT		UNIT
-	NAME	AMT	CODE	PRICE	CODE	BUYER	LOCATION	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE
				ι	UNIT CO	DES: KILOGRAM	1 50 KILOGRAMS	SACK2	100 KII	LOGRAMS S	ACK3	LITER4	CART	LOAD5 O	THER (S	PECIFY	_)6				

DISPOSITION OF CROPS PART D

ASK THE MOST KNOWLEDGEABLE PERSON

C R O P C O D E	1. REPORT ALL CROPS CHECKED IN QUESTION 6 OR 9 OF B1 (CODE AND NAME). THESE ARE ALL THE CROPS HARVESTED IN THE 1999-2000 CROPPING SEASON	2.  How muc [] you h during the cropping the was sold?	arvested e last season	3.  What price you get for [] you so	THEN RICE, THE	4. To whom did you sell this []? TRADER1 RELATIVE2 FRIEND/ NEIGHBOR3 OTHER INDIVIDUAL.4 COOPERATIVE.5 GOVERNMENT.6 PRIVATE COMPANY7 OTHER8	5. Where did you sell this []? FARMGATE1 LOCAL MKT2 MAIN MARKET.3 COOPERATIVE BUILDING .4 PRIVATE COMPANY	6. After it wa harvested much [] lost to insir rodents, ri or some o problem?  IF NON ENTER 2 IN BO' COLUM	, how was ects, otting ther	7. How much [] harves during the cropping s was given laborers or other payn  IF NON ENTER 2 IN BO' COLUM	ted last eason to pay make nents?  IE, ERO FH	8. How much the [] harvested during the cropping season w. used for animal fee IF NOP ENTER 2 IN BO COLUM	e last as as ed? NE, ZERO TH	9. How much [] harves during the cropping s was used t produce pr food produ sale?  IF NON ENTER Z IN BO COLUM	sted last eason o occessed cts for	10. How much harvested last croppinas alread consumed members household  IF NON ENTER Z IN BO'COLUM	during the ng season y been by of your ?	11. How much harvested last croppin has been gift?	during the	12. How much [] harves during the cropping s still being stored by y household  IF NON ENTER 2 IN BO' COLUM	ted last eason is your ?
	CROP		UNIT		CURR.	MAIN	MAIN		UNIT		UNIT		UNIT		UNIT		UNIT		UNIT		UNIT
	NAME	AMT	CODE	PRICE	CODE	BUYER	LOCATION	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE	AMT	CODE
	-																				
-																					
-													-								
					UNIT CO	DES: KILOGRAM	1 50 KILOGRAMS	SACK2	100 KII	OGRAMS S	ACK3	LITER	4 CART	LOAD5 O	THER (S	PECIFY	_)6				
ı	l																				

		1.	2.	3.	4.	5.	6.		7.	8.
EQUIPMENT CODE	TYPE OF	any []? FIRST ASK Q.1 FOR ALL ITEMS. THEN ASK Q. 2-15 FOR EACH ITEM BEFORE GOING TO THE NEXT ITEM.  YES1 NO2	How many [] does your household own?  DO NOT COUNT EQUIPMENT JOINTLY OWNED WITH OTHER HOUSEHOLDS	jointly with any other household?  YES1 NO2	[] are owned with	What share of these [] belong to your household? IF SHARE DIFFERS OVER ITEMS, PUT IN AVERAGE	If you sold or those [] too much money get for it?  IF MORE THE ITEM, AS AVERAGE REPORT VALUE OF SHARED OTH HOUSEH  1. DM 2. DINAR	lay, how could you HAN ONE SK FOR VALUE. I FULL FITEMS DWITH ER HOLDS.	What is the working condition of []?  1. EXCELLENT 2. GOOD 3. FAIR 4. BAD	Did you use the [] during the 1999-2000 season?
	FARM EQUIPMENT	(»NEXT ITEM)		(»6)		PERCENTAGE	AMM.	Curr.Cod.	5. NOT WORKING	
1	Large tractor (>40 horse power)									
2	Small tractor (<40horse power)									
3	Motocultivator									
4	Plough									
5	Disk harrow									
6	Tooth harrow									
7	Seed driller									
8	Cultivator									
9	Fertiliser broadcaster									
10	Sprayer									
11	Mower									
12	Hayraker									
13	Haybaler									
14	Combine harvester									
15	Thresher									
16	Mill									
17	Water Pump									

		9.	10.	11.	12.		13.	14.	15.
EQU-PMEZH C		Did you repair the [] during the 1999- 2000 season?	How much did you spend on maintenance in total for the [] during the 1999-2000 season?	Did you receive any Aid for the repairing?	In which fo	rm?	What was the value of the Aid received?	When did you receive this assistance?	Who provided the assistance?  HUMANITARIAN GROUP  RELATIVES IN KOSOVO 2 RELATIVES ABROAD  BANK 4 SOCIALLY OWNED ENTERPRISE/State of Serbia** 5 EMPLOYER 6
O D E		1. YES 2. NO	CURRENCY 1.DM 2. DINAR	1. YES 2. NO >>NEXT	1. PARTS 2. VOUCH		CURRENCY 1.DM 2. DINAR	1. PAST 30 DAYS 2. 1 TO 6 MO. AGO 3. 6 TO 12 MO.	OTHERS 7
	TYPE OF	>> 11	Z. DIMAK	ITEM	4. CASH	ZOIIIIII	Z. DIMAK	5. 0 10 12 Mo.	
	FARM EQUIPMENT		AMOUNT				AMOUNT		
1	1	<u> </u>	1	1	I		<u> </u>	I	I
2	Large tractor (>40 horse power)								
_	Small tractor (<40horse power)							Socially Owned (Code 5) in Serbian	
	Motocultivator					Questionnai		Code 5) III Serbian	
	Plough								
	Disk harrow								
	Tooth harrow								
7	Seed driller								
	Cultivator								
9	Fertiliser broadcaster								
	Sprayer								
	Mower								
12	Hayraker								
13	Haybaler								
14	Combine harvester								
15	Thresher								
16	Mill								
17	Water Pump								

IF													_				
			1. Has any me	,			,		YES1								
_			poultry or any o	ther domesti	icated animal	during the la	st 12 months?			(»NEXT MOD						1	
			2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.
P	١.	During the last 12		How many	If you sold	How many	How much did	How many of	How much did	How many	How many	How many	How many			How much did	How many
١	1	months, has any		[] were	one of those		your	your [] did	your						[] did your	you pay for	[] did your
		member of your		owned by	[] today,		household	you sell last	household			died or were			household		household
Λ		household raised a	any	your			receive for the	month?	receive for the	last month?	lost during			away during		purchased	purchase
1.		[]?		household	money	months?	sale of all		sale of all		the last 12		the last 12				during the
L	-	J		at the end of the	could you get for it?		these [] during the last		these [] during last		months?	month?	months?	month?	last 12 months?	12 months?	last month?
				lastmonth?	get for it?		12 months?		month?						months?		
	. '	FIRST ASK Q. 2		lastilioliti!			12 1110111115 !		monur							INCLUDE	
[	. [	FOR ALL ANIMALS. THEN				IF ZERO,		IF ZERO,			IF ZERO,		IF ZERO.		IF ZERO.	VALUE OF	IF ZERO,
E	- 1	ASK Q. 3-27 FOR		IF ZERO.		GO TO Q.	INCLUDE	GO TO			GO TO Q.		GO TO Q.		GO TO Q.	IN KIND PAYMENTS	GO TO
		EACH ANIMAL		GO TO Q.		9.	VALUE OF IN KIND	QUESTIO			12		14.		18.	PATIVIENTS	QUESTIO
		BEFORE GOING		5.			PAYMENTS	N 9.									N 18.
	-	TO THE NEXT			CURRENCY		CURRENCY		CURRENCY							CURRENCY	
		ONE.	YES1		1.DM		1.DM		1.DM							1.DM	
			NO2	NUMBER	2. DINAR	NUMBER	2. DINAR	NUMBER	2. DINAR	NUMBER	NUMBER	NUMBER	NUMBER	NUMBER	NUMBER	2. DINAR	NUMBER
	ı		(»NEXT	OF		OF		OF		OF	OF	OF	OF	OF	OF		OF
		ANIMAL	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
L	-		ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2	_	Calves	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2	E	Calves Beef cattle	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3	1	Calves Beef cattle Milk cows	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4	E E	Calves Beef cattle Milk cows Breeding bulls	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5	[ ]	Calves Beef cattle Milk cows Breeding bulls Buffalos	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5	E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5 6	E P E E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5 6 7	E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5 6 7 8 9	E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Mules Pigs	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1 2 3 4 5 6 7 8 9	E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
Ľ	1	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Mules Pigs	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
Ľ	E E E E E E E E E E E E E E E E E E E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules Pigs Sheep	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1	E   E   E   E   E   E   E   E   E   E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules Pigs Sheep Goats	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1:	E E E E E E E E E E E E E E E E E E E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules Pigs Sheep Goats Chickens	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS
1:	E   E   E   E   E   E   E   E   E   E	Calves Beef cattle Wilk cows Breeding bulls Buffalos Horses Donkeys Wules Pigs Sheep Goats Chickens Other Poultry	ANIMAL)	ANIMALS	AMOUNT	ANIMALS		ANIMALS	AMOUNT	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMALS

		17.	18.	19.	20.	21.	22.	23.	24.	25.	26.		27.
A N I M A L	member of your household raised []?	you pay for these [] purchased	were born or received as gifts by your household	[] were born or received as gifts by your household during the	Who donated these animals? HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3	How many of your [] were vaccinated during the last month?	How many of your [] were vaccinated during the last 12months?	Did you have to pay for the vaccinations?	How much did you pay?	Did your household sell any fresh byproducts from your [] during the last year?	What was byproduct?		How much did you obtain from the sales of these [] byproducts during the last year?
C O D E	FIRST ASK Q. 2 FOR ALL ANIMALS, THEN ASK Q. 3-27 FOR EACH ANIMAL BEFORE GOING TO THE NEXT ONE.	INCLUDE VALUE OF IN KIND PAYMENTS CURRENCY 1.DM	IF ZERO, GO TO QUESTIO N 21	last month?	BANK 4 SOCIALLY OWNED ENTERPRISE/Stae of Serbia** 5 EMPLOYER 6 BORN 7 OTHERS 8		IF 0 >> 25		CURRENCY 1.DM	EXCLUDE PRODUCTS USED BY HOUSEHOLD BUSINESSES	MILK MEAT3 HONEY YOGURT CURD6 CHEESE 7 OTHER 8	4	INCLUDE VALUE OF IN KIND PAYMENTS  CURRENCY 1.DM
		2. DINAR	NUMBER	NUMBER		NUMBER	NUMBER	YES1	2. DINAR	NO2			2. DINAR
	ANIMAL	AMOUNT	OF ANIMALS	OF ANIMALS	MAIN SOURCE	OF ANIMALS	OF ANIMALS	NO2 >> 25.	AMOUNT	(»NEXT ANIMAL)	FIRST	SECOND	AMOUNT
	ANIMAL	AMOUNT	ANIMALS	ANIMALS		ANIMALS	ANIMALS	<i>&gt;&gt;</i> 25.	AMOUNI	ANIMAL)	FIRST	SECOND	AMOUNI
	Calves												
2	Beef cattle												
3	Milk cows				**Added State of Serb	ia to Socially	Owned						
4	Breeding bulls				Enterprise in Question								
5	Buffalos				Questionnaire								
6	Horses												
7	Donkeys												
8	Mules												
9	Pigs												
	Sheep												
11	Goats												
12	Chickens												
13	Other Poultry												
14	Rabbits												
15	Bees (Hives)												
16	Trouts												

2		2	4	5.	6.	7	8.	9.	10.	11.	12.	13.	14.	15.	16.
۷.		ა.	4.	5.	0.	<i>/</i> .	0.	9.	10.	1 1 .	12.	13.	14.	15.	10.
Has any member of household purchase received any []?	,	How much household in the last 1 months?	purchase 2	did your household spend in the	household in the last 3	purchase 30 days?	household spend in	receive any [FEED] in	household in the last 1	receive	Who donated this feed? HUMANITARIAN GROUP 1 RELATIVES IN	Did you receive any [FEED] in	household in the last 3 ?	receive	Who donated th feed?  HUMANITARIAN GROUP 1 RELATIVES IN
FIRST ASK Q. 2 F FEED, THEN ASK FOR EACH FEED GOING TO THE NE	Q. 3-16 BEFORE	IF ZERO,		last 12 months?	IF ZERO,	GO TO		the last 12 months?			KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE 5 EMPLOYER 6	the last 30 days?			RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNI ENTERPRISE/Se of Serbia** ! EMPLOYER 6 OTHERS 7
	YES1	Q. 9		1.DM 2. DINAR	Q.9	). I	CURRENCY AS 5	YES1			OTHERS 7	YES1			
	(»NEXT							(»NEXT				(»NEXT		_	
ANIMAL	FEED)	QUANTITY	UNIT	AMOUNT	QUANTITY	UNIT	AMOUNT	FEED)	QUANTITY	UNIT	MAIN SOURCE	FEED)	QUANTITY	UNIT	MAIN SOURCE
		Ī	Ī		I	I	1	1	I	I			Ī		
Hay															
Fresh fodder											**Added State	of Serbia to	Socially Ow	ned	
Maize meal, grains											Enterprise in C	Question 16 (			
Concentrates											Questionnaire				
Bran															
Other															

Codes for units: 1 Small Duaj 2 Large Duaj 3 Kilogram

# SECTION 3 Consumption

	1.			2.
	In the past 7 days, has any member of spent money on any of the following ite	•	sehold	How much did your household
	PUT AN X (X ) IN THE APPROPRIATE ITEM. ASK QUESTION 1 FOR ALL ITI GOING TO 2.			spend for [ITEM]?
				CURRENCY
				1. DM 2. Dinar
				2. 21101
		NO	YES	AMOUNT
		1		1
1	Tobacco, cigarettes, cigars			
2	Newspapers or magazines			
3	Fares for busses, trams, taxis, etc.			

3.		4.
How many [MEALS/: eaten by household outside of the home 7 days?	members	What was the value of these [MEALS] eaten outside of the home in the last 7 days?
		CURRENCY
		1. DM 2. Dinar
	NUMBER	AMOUNT
Breakfast		
Lunch		
Dinner/supper		
Snack or beverages (including alcohol)		

					PURCE	ASES IN	LAST 30 I	DAYS	TY	PICAL YEAR	·I	HOME P	RODUCT	ION		GIFTS	AID	зтоск	S	USE CODES
	1.			2.	3.	4.		5.		6.	7.	8.		9.		10.	11.	12.		WITH STAR
	In the following questions	e Lwa	nt to	Have the	How	How muc	ch did you	How mu	ch did	How many	How many	During th	hose	What w	as the	What is the	What is the	How mu	ich of	WHENEVER POSSIBLE
	ask about all food consul			members of	many	buy in to	,	you pay		months in	months in	months,		value of			total value of			POSSIBLE
	your household, regardle			your	times in	,		, , . ,		the past 12	the past 12	much die		[FOOD]			the [FOOD]	currently		UNIT CODES:
	person ate it.			household	the past					months did	months did	consume	e in a	consum		consumed	consumed	stored?		KILO*1
					30 days,					your	your	typical m	nonth?	typical r		that you	that you			GRAM*2 LITER* 3
	Has your household cons			[FOOD] in	have					household	household			from yo		received as	received			BUNCH 4
	[FOOD] during the past 1 Please exclude from you			the past 30 days, that is	you					purchase [FOOD]?	consume [FOOD] that			product	ion?	a gift over the past 12	from aid over the			TIN 5
	any [FOOD] purchased for		vei	since	[FOOD]?					[i OOD]:	you grew or					months?	past 12			PIECES 6 CARTONS. 7
	processing or resale in a		ehold	[DAY/DATE							produced at						months?			BOTTLES. 8
	enterprise.			]?							home?									
										IF NONE	IF NONE					IF	IF			CURRENCY CODES:
	PUT AN X (X) IN THE APPR BOX FOR EACH FOOD ITE									WRITE	WRITE					NONE,	NONE,			DEM 1
	ANSWER TO Q.1 IS YES, A									ZERO	ZERO,					WRITE	WRITE			DINAR 2
				YES.1							» 10					ZERO	ZERO			
				NO2																İ
		NO	YES	(»6)		AMT	UNIT	AMT	CURRENCY	MONTHS	MONTHS	AMT	UNIT	UNIT	CURRENCY	AMOUNT	AMOUNT	AMT	UNIT	
		ı —		1		1	1									1	I			T
1	Bread																			
	Maize and other cereals																			I
2	(flour or grain) Pasta and rice																			+
3	(macaroni)																			
	,																			Ť
4	Beans																	-		<b>.</b>
5	Butter and other fat																			
																				†
6	Milk																			ļ
7	Yogurt																			
	rogan																			
8	Curd																			<u> </u>
۵	Fresh cheese																			
3	1 TOSTI CITOCOC																			†
10	Baby Formula																			ļ
11	Mutton/lomb/goot																			
11	Mutton/lamb/goat					1		1			1	1	1	1	1		1	+		†
12	Beef/Buffalo	<u></u>																<u> </u>		
4.5	Chicken and other																			
13	poultry	-			-	1		<del>                                     </del>				<del>                                     </del>	1	<del>                                     </del>	<del>                                     </del>					ł
14	Pork																			
	_																			Ī
15	Eggs					<u> </u>		<u> </u>				<u> </u>	<u> </u>	<u> </u>	<u> </u>					l

					PURCH	IASES IN	LAST 30 [	DAYS	TY	PICAL YEAR		HOME P	RODUCT	ION		GIFTS	AID	STOCK	S	USE CODES
	1.			2.	3.	4.		5.		6.	7.	8.		9.		10.	11.	12.		WITH STAR WHENEVER
	In the following questions	s, I wa	nt to	Have the	How	How muc	ch did you	How mu	ch did	How many	How many	During th	hose	What w	as the	What is the	What is the	How mu	ich of	POSSIBLE
	ask about all food consul			members of	,	buy in to	tal?	you pay	in total?	months in	months in	months,		value of			total value of		,	
	your household, regardle	ess of	which	your	times in					the past 12	the past 12	much die		[FOOD]			the [FOOD]	currently		UNIT CODES:
	person ate it.			household bought any	the past 30 days,					months did your	months did your	consume		consum typical r		consumed that you	consumed that you	stored?		GRAM*2
	Has your household cons	sumar	4	[FOOD] in	have					household	household	typical m	ionin?	from yo		received as	received			LITER* 3
	[FOOD] during the past 1			the past 30	you					purchase	consume			product		a gift over	from aid			BUNCH 4 TIN 5
	Please exclude from you			days, that is						[FOOD]?	[FOOD] that					the past 12	over the			PIECES 6
	any [FOOD] purchased f			since	[FOOD]?						you grew or					months?	past 12			CARTONS. 7
	processing or resale in a	house	ehold	[DAY/DATE 1?							produced at home?						months?			BOTTLES. 8
	enterprise.			l												l				CURRENCY
	PUT AN X (X) IN THE APPR									IF NONE	IF NONE					IF NONE,	IF NONE.			CODES:
	BOX FOR EACH FOOD ITE									WRITE ZERO	WRITE ZERO,					WRITE	WRITE			DEM 1 DINAR 2
	ANSWER TO Q.1 IS YES, A	ISN Q.	2-12.	YES.1							» 10					ZERO	ZERO			
				NO2																╣
		NO	YES	(»6)		AMT	UNIT	AMT	CURRENCY	MONTHS	MONTHS	AMT	UNIT	UNIT	CURRENCY	AMOUNT	AMOUNT	AMT	UNIT	
1		l		I		I	1				1	I	1		1	ı	1			Ī
16	Fish																			
17	Garlic																			
18	Sweet Pepper																			
19	Cucumber																			
20	Tomatoes																			
21	Cabbage																			
22	Other vegetables																			
23	Grapes																			
24	Apples																			
25	Orange and Lemons																			
26	Other Fruits																			
27	Canned Foods										-									
28	Pickles																			
	Jam and fruit preserves Soft drinks (Coca.and																			
	juices.)																			

				PURCH	IASES IN	LAST 30 [	DAYS	TY	PICAL YEAR		HOME P	RODUCT	ION		GIFTS	AID	STOCK	S	USE CODES	
	1.		2.	3.	4.		5.		6.	7.	8.		9.		10.	11.	12.		WITH STAR	
	In the following questions, I wa ask about all food consumed b your household, regardless of a person ate it.  Has your household consumed [FOOD] during the past 12 mor Please exclude from your answ any [FOOD] purchased for processing or resale in a house enterprise.  PUT AN X (X) IN THE APPROPRIA BOX FOR EACH FOOD ITEM. IF ANSWER TO Q.1 IS YES, ASK Q.2	y which d nths? ver ehold	household	many times in the past 30 days, have you	How muc buy in tot	ch did you ial?	How mu you pay		months in the past 12 months did your household purchase [FOOD]?	How many months in the past 12 months did your household consume [FOOD] that you grew or produced at home?	During the months, much die consume typical m	how d you e in a	What w. value of [FOOD] consum typical r from yo producti	the you ed in a nonth ur own on?	What is the total value of the [FOOD] consumed that you received as a gift over the past 12 months?	What is the total value of the [FOOD] consumed that you received from aid over the past 12 months?	How mu	do you y have	WHENEVER POSSIBLE  UNIT CODES KILO*1 GRAM*2 LITER*3 BUNCH4 TIN5 PIECES6 CARTONS. 7 BOTTLES. 8  CURRENCY CODES: DEM 1 DINAR 2	1 2 3 4 5 6 7 8
	·	YES	YES.1 NO2 (»6)		AMT	UNIT	AMT	CURRENCY	MONTHS	» 10	AMT	UNIT	UNIT	CURRENCY	ZERO	ZERO	AMT	UNIT		
31	Beer																			
32	Shlivovica																			
33	Fast food: bureks, etc																			
34	Yeast																			
35	Biscuits and cakes																		1	
36	Spices																			
37	Tea																			
	Coffee Misc. other food expenses																			

PART B: STORED FOOD MOST KNOWLEDGEABLE MEMBER

				PURC	HASES II	N LAST Y	EAR			GIFTS	AID	STOCK	S	USE CODES
	1.	2.	3.	4.		5.		6.		7.	8.	9.		WITH STAR WHENEVER
	In the following questions, I want to ask about all food consumed by your household, regardless of which person ate it.	members of your household bought any	many times in the past 12	How mud you buy i		How muc you pay total?		How mu you pure the last : that is si [DATE]?	hase in 30 days, nce	total value of the [FOOD] consumed that you	total value of the [FOOD] consumed that you	How mu [FOOD] currentl stored?	do you y have	POSSIBLE  UNIT CODES: KILO*1 GRAM*2 LITER* 3
	Has your household consumed [FOOD] during the past 12 months? Please exclude from your answer any [FOOD] purchased for processing or resale in a household enterprise.	[FOOD] in the past 12 months?	months, have you bought [FOOD]							received as a gift over the past 12 months?	received from aid over the past 12 months?			BUNCH 4 TIN 5 PIECES. 6 CARTONS. 7 BOTTLES. 8  CURRENCY CODES:
	PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-12.	YES.1			ſ					IF NONE, WRITE ZERO	IF NONE, WRITE ZERO		ſ	DEM 1 DINAR 2
	NO YES	NO2 (»7)		AMT	UNIT	AMT	CURR ENCY	AMT	UNIT	AMOUNT	AMOUNT	AMT	UNIT	
								i						1
40	Wheat (flour)													
41	Sunflower oil													
42	Sugar													
43	Potatoes													
44	Honey													
45	Onions													
46	Salt													

GIFTS 12 MONTHS PURCHASES 30 DAYS 12 MONTHS Currency used for Have the How much did you spend? How much did Did you receive What is the value In the following questions, I want to ask about all purchases made for purchuses for this members of your household any [ITEM] as a of all the [ITEM] your household, regardless of which person made them. spend for gift during the past that you received article your [ITEM] during household 12 months? as a gift during the Has your household bought, spent money on or received gifts of any past 12 months? [ITEM] during the past 12 months? Please exclude from your answer bought any the past 12 any [ITEM] purchased for processing or resale in a household [ITEM] in the months? USE THE last 30 davs? enterprise. SAME **CURENCY** PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. FOR THIS IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6 ARTICLE CURRENCY: YES.1 Currency YES..1 1. DM NO..2 1. DEM NO...2 NO YES CODE 2.DINAR (»5) AMOUNT 2.DINAR AMOUNT (»NEXT ITEM) AMOUNT Firewood Charcoal Cooking gas Other fuels Personal care items (soap, shampoo, toothpaste, etc.) and cosmetics Personal services (haircuts, shaving, etc.) Women's clothing and footwear Men's clothing and footwear Children's clothing and footwear

Cloth and sewing supplies, Tailoring

PURCHASES 30 DAYS 12 MONTHS GIFTS 12 MONTHS Currency used for Have the How much did you spend? How much did Did you receive What is the value In the following questions, I want to ask about all purchases made for purchuses for this members of your household any [ITEM] as a of all the [ITEM] your household, regardless of which person made them. spend for gift during the past that you received article vour . [ITEM] during household 12 months? as a gift during the Has your household bought, spent money on or received gifts of any past 12 months? [ITEM] during the past 12 months? Please exclude from your answer bought any the past 12 any [ITEM] purchased for processing or resale in a household [ITEM] in the months? USE THE last 30 davs? enterprise. SAME **CURENCY** PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. FOR THIS IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6 ARTICLE CURRENCY: YES.1 Currency YES..1 1. DM NO..2 1. DEM NO...2 NO YES CODE 2.DINAR (»5) AMOUNT 2.DINAR AMOUNT (»NEXT ITEM) AMOUNT Laundry and dry cleaning 12 Household cleaning and toilet supplies (soap, washing powder, bleach, etc.) 13 Kitchen supplies (napkins, matches, garbage bags, Over the counter remedies and medecines 15 Prescription medicines and health services (doctor 16 fees, hospital charges, etc.) Books, stationery (excluding textbooks) 17 Postal expenses, telegrams, 18 Entertainment (cinema, cassette rentals, cultural 19 and sporting events, etc.) Electrical items (light bulbs, cords, plugs, batteries, 20 Repair and maintenance of household articles 21

22

Rent

PURCHASES 30 DAYS 12 MONTHS GIFTS 12 MONTHS Currency used for Have the How much did you spend? How much did Did you receive What is the value In the following questions, I want to ask about all purchases made for purchuses for this members of your household any [ITEM] as a of all the [ITEM] your household, regardless of which person made them. spend for gift during the past that you received article vour household [ITEM] during 12 months? as a gift during the Has your household bought, spent money on or received gifts of any [ITEM] during the past 12 months? Please exclude from your answer bought any the past 12 past 12 months? any [ITEM] purchased for processing or resale in a household [ITEM] in the months? USE THE last 30 davs? enterprise. SAME **CURENCY** PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. FOR THIS IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6 ARTICLE CURRENCY: YES.1 Currency YES..1 1. DM NO..2 1. DEM NO...2 NO YES CODE 2.DINAR (»5) AMOUNT 2.DINAR AMOUNT (»NEXT ITEM) AMOUNT Household linens (sheets. blankets, towels, etc.) 23 Small kitchen appliances (blender, mixer, etc.) 24 Dishes (crockery, cutlery, glassware, etc.) and kitchen utensils 25 Small electrical items (radio, walkman, watch, clock, etc.) 26 27 Household tools Sports and hobby equipment, toys 28 Toys and musical instruments 29 Vehicle repair, maintenance, parts and licenses (do not include gasoline) 30 Repair and regular maintenance of the house 31 32 Home improvements and additions Insurance (auto, property) 33

PURCHASES 30 DAYS 12 MONTHS **GIFTS 12 MONTHS** Currency used for Have the How much did you spend? How much did Did you receive What is the value In the following questions, I want to ask about all purchases made for purchuses for this members of your household any [ITEM] as a of all the [ITEM] your household, regardless of which person made them. article spend for gift during the past that you received your [ITEM] during household 12 months? as a gift during the Has your household bought, spent money on or received gifts of any the past 12 past 12 months? [ITEM] during the past 12 months? Please exclude from your answer bought any any [ITEM] purchased for processing or resale in a household [ITEM] in the months? USE THE last 30 davs? enterprise. SAME **CURENCY** PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. FOR THIS IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6 ARTICLE CURRENCY: YES.1 Currency YES..1 1. DEM 1. DM NO..2 NO...2 YES NO CODE 2.DINAR (»5) AMOUNT 2.DINAR AMOUNT (»NEXT ITEM) AMOUNT Excursion, holiday (including travel and lodging) 34 Charity, donations, contributions to clubs or organizations 35 Customs tax 36 Excise tax 37 38 Gambling and cash losses Legal or notary services 39 Marriages, births, and other ceremonies 40 Marriages gifts (dowries) 41 Funeral expenses 42

1. During the past 12 months has any member of your household provided money or goods to persons who are not members of your household? For example for relatives living elsewhere, child support or alimony, or to friends or neighbors?

YES..1

NO...2(»PART E)

	alimony, or to friends or neighbors?	1014.	manipio ioi i	nauvoo nviing ole	,0111010, 0111	ia support of
	2.		3.	4.	5.	6.
	Has your household provided assista [TYPE OF RECIPIENTS] during the months?		How many individual [RECIPIEN T] has your household provided assistance to?	How much mor members of the sent to [RECIP the past 12 mo	household IENT] in	What is the approximate value in cash of the assistance given in food or other goods?
		YES1 NO2 GO NEXT				USE THE SAME CURRENCY AS IN 5.
	TYPE OF RECIPIENT			AMOUNT	1. DEM 2. DINAR	AMOUNT
	III OF RECIFIENT	<u>I</u>		PHIOUNI	Z. DINAK	21100111
1	Spouse of a household member					
2	Children of a household member					
3	Siblings of a household member					
4	Parents of a household member					

1	Spouse of a household member			
2	Children of a household member			
3	Siblings of a household member			
4	Parents of a household member			
5	Other relatives			
6	Friends			
7	Neighbors			
8	Charitable organizations			
9	Others			

ID: \_\_ \_

				2.	3.	4.	ID
Does your household currently of the following items?	y own a	ny	_	How many years ago did you acquire this	Did you purchase it or receive it as a	If you wanted to sell this [ITEM] today, how much	
DETERMINE WHICH DUR/ HOUSEHOLD OWNS BY A FOR EACH DURABLE OW PROCEED TO ASK Q.2-4 ITEM.	SKING ( NED, A	Q.1. ND		[ITEM]?	gift or payment for services?	would you receive?	
					DUDGUAGE 1	1. Dem 2. DINAR	
					PURCHASE1 GIFT OR	Z. DINAR	
ITEM	CODE	YES	NO	YEARS	PAYMENT2	AMOUNT	
	1				1	1	1
Electric or gas stove	201						
Wood stove	202						
Generator	203						
Water heater	204						
Water reservoir	205						
Refrigerator	206						
Freezer	207						
Washing Machine	208						
Sewing/knitting machine	209						
Fan	210						
Television	211						
Video player	212						
Tape player/CD player	213						
Camera, video camera	214						
Cellular phone	215						
Computer	216						
Satellite dish	217						
Jewelry	218						
Bicycle	219						
Motorcycle/scooter	220						
Car or truck	221						

## **SECTION 4**

Health Remittances Social Protection Dwelling

		1.	2.	3.		4.	5.		6.		7.	8.
- D СООЕ	RES	past 4 weeks, did you visit any ambulanta to	How many times did you make outpatient visits to an ambulanta during the past 4 weeks?	How much did you pay, money or in kind, for all associated with these ou visits to a ambulanta dur 4 weeks?  EXCLUDE MEDICINES.  EXCLUDE TRANSPORT COSTS.  EXCLUDE GIFTS	costs itpatient	What was the value of any gifts (money, food, services) made to the medical staff of ambulanta during the past 4 weeks?	How much did you pay, money or in kind, for all prescribed during these if purchased elsewhere.	medicines visits, even	How much did you pay, money or in kind, in tran	sport cost.	During the past 4 weeks, did you visit any private doctor to obtain outpatient health care?	How many times did you make outpatient visits to a private doctor during the past 4 weeks?
	C O D E	YES1 NO2 (»7)	TIMES	AMOUNT	CURRENCY 1. DEM 2. DINAR	USE SAME CURRENCY AS IN 3	AMOUNT	1. DEM 2. DINAR	AMOUNT	1. DEM 2. DINAR	YES1 NO2 (»13)	TIMES
			1			1			1			

		9.		10.	11.		12.		13.	14.	15.		16.
I D CODE	R	How much did you pay, money or in kind, for all a associated with these ou visits to a private doctor past 4 weeks?  EXCLUDE MEDICINES.  EXCLUDE TRANSPORT COSTS.  EXCLUDE GIFTS	costs atpatient during the	What was the value of any gifts (money, food, services) made to the medical staff of private doctor during the past 4 weeks?	How much did you pay, money or in kind, for all prescribed during these if purchased elsewhere.	medicines visits, even	How much did you pay, money or in kind, in tran		During the past 4 weeks, did you visit any private nurse, paramedic or trained midwife to obtain health care?	How many times did you visit a private nurse, paramedic or trained midwife during the past 4 weeks?	How much did you pay, money or in kind, for all associated with these or visits to private nurse, et the past 4 weeks?  EXCLUDE MEDICINES  EXCLUDE TRANSPORT COSTS.  EXCLUDE GIFTS	costs utpatient tc during	What was the value of any gifts (money, food, services) made to the medical provider during the past 4 weeks?
	CODE			USE SAME CURRENCY AS IN 9					YES1			CURRENCY	USE SAME CURRENC Y AS IN 15
		AMOUNT	1. DEM 2. DINAR	AMOUNT	AMOUNT	1. DEM 2. DINAR	AMOUNT	1. DEM 2. DINAR	NO2 (»19)	TIMES	AMOUNT	1. DEM 2. DINAR	AMOUNT
					Ι	1				ı	1	1	

		17.		18.		19.	20.	21.	22.		23.
I D C O D E	RESPONDENT	How much did you pay, money or in kind, for all prescribed during these if purchased elsewhere	medicines visits, even	How much did you pay, money or in kind, in tran		During the past 4 weeks, did you visit any other health facility to obtain health care?	How many times did you visit other health facilities during the past 4 weeks?	To whon was your last visit?	How much did you pay, money or in kind, for all associated with these o visits to other health far the past 4 weeks?  EXCLUDE MEDICINES.  EXCLUDE TRANSPORT COSTS.  EXCLUDE GIFTS	costs utpatient	What was the value of any gifts (money, food, services) made to the medical staff of other health facility during the past 4 weeks?
	C O D E					YES1		NGO facility 1 Traditional practitioner 2 Lab and diagnostic		CURRENCY	USE SAME CURRENC Y AS IN 22
			1. DEM		1. DEM	NO2		center 3		1. DEM	
<u> </u>		AMOUNT	2. DINAR	AMOUNT	2. DINAR	(»26)	TIMES	Other 4	AMOUNT	2. DINAR	AMOUNT
-											
-			+				-				
<u> </u>			-						1		
<u> </u>											
-			+								
-			<del>                                     </del>						ļ		

		24.	25.	26.	27.		28.			29.	30.	31.	32.	
C O D E	R E S P O N D E N T C O D	How much did you pay, either in money or in kind, for all medicines prescribed during these visits, even if purchased elsewhere.  USE SAME CURRENCY AS IN 22	How much did you pay, either in money or in kind, in transport cost.  USE SAME CURRENCY AS IN 22	During the past 4 weeks, have	How much of for all medic purchased of	did you pay cines on your own	Who has paying your heat the passing work passing with the passing work passing with the passing work passing	TARIAN ZATION. DR/ D	or all during 3?  0123	During the past 12 months, have you stayed at a public hospital (inc. humanitarian and military) overnight?	On how many	How many days did you spend in a	What type of hospital was it? REFER TO LAST SPELL UNTIL	
	E			YES1		CURRENCY	I -	OTHER*	*	YES1			HUMANITARIAN 2 MILITARY 3	
				NO2		1. DEM		•	,	NO2			OTHER 4	
<u> </u>		AMOUNT	AMOUNT	(»29)	AMOUNT	2. DINAR	1ST	2ND	3RD	(»40)		DAYS		
													n Question 28 and 39 a bian questionnaire. In A	
$\vdash$														
$\vdash$	<u> </u>													
$\vdash$														
$\vdash$	<u> </u>													
$\vdash$														
									İ					

1 A. I	ILALI	ITI CARE USE										IVI	JIIIEKS/GUAF	COININ	5 7110	WLITT	JI OI III	-DIVLIN LL
		33.	34.	35.	36.		37.		38.	39.			40.	41.				
I D C O D E	RESPONDENT CODE	Where was the hospital located?  MUNIPICALITY CODE 1-30  IN YOGUSLAVIA 91	How much did you pay, either in money or in kind, for all costs associated with these days spent in a public hospital during the past 12 months? Include any medicines prescribed during these stays, even if purchased elsewhere.  EXCLUDE MEDICINES  EXCLUDE TRANSPORT COSTS.  EXCLUDE COSTS TO BE REIMBURSED BY INSURANCE	Did these costs include food, bedlinens, heating?  FOOD 1 BEDLINENS 2 HEATING 3	How much did you pay, either in money or in kind, for all medicines prescribed during this spell in hospital, even if purchased and cosnumed elsewhere.				What was the value of any gifts (money, food, services) made to hospital staff during the past 12 months?  USE SAME CURRENCY as in 37	Who has helped in paying for some or all your health care during the past 12 months?  NOBODY 0 RELATIVE IN KOSOVO		During the past 4 weeks, did you have any health problem for which you did not seek medical treatment?	MINOR AILMENT, SELF TREATED			3 4 5 6		
	-	ABROAD 92	1. DEM		11.	. DEM		1. DEM	-	5			(»NEXT					
		ADMOND 92	AMOUNT 2. DINAR			. DINAR	AMOUNT	2. DINAR	AMOUNT	1ST	2ND	3RD	PERSON)					
-																		
			Question 34: D	iscrepancies bet	ween the Serbian and													
		dded Serb Social System/			uded or not: The English													
	+	Albanian says only "Other".			cines prescibed during										$\pm$	$\dashv$	+	+
_	₩				elsewhere", then says									decession				
	Ш.				, which is contradictory.  ave the "Include any													
				tence and just sa														
	1				contradiction in the													
	1				ays ""Include any													
	+			cibed during the		-									+	++	+	++
	$+\!-$				s not say "EXCLUDE all previous guestions like			-	+						+	+	+	++
	┷				he same in all 3 versions													
	<u> </u>				INES",so the Albanian													
					the medicines here and													
			asked the total	medicine amoun	t in Question 36.													
	+																	
-	+							-	+					+	+	+	+	++
	₩							1	1							$\dashv$	$-\!\!\!\!+$	++
																		1 1

HEALTH MODULE PART B: SELF REPORTED HEALTH STATUS

ASK INDIVIDUALS OVER AGE 15

I D		1. How do you rate your health	2.  During the last four weeks, how many days of your primary daily activities did you	3. If you had to dress without help, could you do it easily, with difficulty or not at all?	4.  If you had to stand up from a sitting position (chair) without help, could you do it easily, with		6. CHECK THE ANSWERS TO QUESTIONS 3,4,5	7. If you had to sweep the house floor or yard, could you do it easily, with difficulty or not at	8.  If you had to draw a pail of water from a well, could you do it easily, with difficulty or not at all?
C O D E	R E S P O D		miss due to poor health?	dimedity of not at air.	difficulty or not at all?	cacity, with difficulty of flot at all.		all?	war amounty or not at air.
		VERY GOOD1  GOOD2  FAIR3  POOR4  VERY POOR5	DAYS	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	PERSON CAN DO ALL THREE EASILY1 PERSON CANNOT DO ALL THREE EASILY2 (%0.13)	EASILY1 WITH TOTAL AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3
		TEXT TOOKING		NOT AT ADDIT	NOT AT ALLES	NOT AT ALL. 3	("2:13)	NOT AT ADD.	NOT AT ADDIT
		head	Lee note that the English version of er to ask people 15 and over, an in Serbian. However the Albanian	d it was translated this					
		ask p	eople OVER 15, and the filtering of for over 15, ie from 16 and up.	data entry program					
		enum	program did not allow it to be en	m 15 year olds, the data					
		peopl	e 16 years and over. (The head y "over 16" in this English version	er has thus been changed					
				Ī					

HEALTH MODULE PART B: SELF REPORTED HEALTH STATUS

ASK INDIVIDUALS OVER AGE 15

	1	9.	10.	11.	12.	13.	14.	
I D C O D E	E S P C O O	If you had to stand up from sitting on the floor without help, could you do it easily, with difficulty or not at all?	load, such as a pail of water,	easily, with difficulty or not at	If you had to bow, squat or kneel, could you do it easily, with difficulty or not at all?	Do you hold a disability card?	In the past 7 days, how many factory pre-rolled cigarettes did you smoke?	
	N D D E E N T	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	EASILY1 WITH DIFFICULTY.2 NOT AT ALL.3	YES1 NO .2	IF NO SMOKERS WRITE0  NUMBER OF CIGARETTES	
	l							
						Note: In Serbian questionnaire question 14 asked how many packs rather than how many cigarettes, but Serbian adjusted at Data Coding stage by multiplying by 20.		
						<u> </u>		
<u> </u>								
<u> </u>								
						]		

0 1	,	bers received any money or goods for ort or alimony, or from friends or neig	•	are not members	s of your	YES1				
							(»NEXT	SECTION)		
2.	3.	4.	5.	6.	7.	8.			9.	10.
What are the first names of the persons who sent assistance to this household during the past 12 months?  LIST ALL NAMES BEFORE GOING TO 3-10	What is the relationship between [NAME OF DONOR] and the head of the household?  Donor is spouse	Where does [DONOR] live?  SAME MUNICIPALITY0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA44 ALBANIA/SERBIA**55 SWITZERLAND60 GERMANY61 ITALY62 OTHER WESTERN EUROPE.63 USA77 OTHER88	How much money have members of the household received from [DONOR] in the past 12 months?  CURRENCY  1. DEM  2. DINAR	value in cash	reason?  YES1 NO2	why [DON assistance GENERAL RECONST INVESTM DURABLE WEDDING MEDICAL	OR] sent th	nis 251 2 3 4 5	How many times per year does [DONOR] send this assistance?	Does the household need to repay the assistance sent by the [DONOR]?
NAMES	-		AMOUNT	AMOUNT	GO TO Q.9	1ST	2ND	3RD		YES1 NO2
			**: in Ques questionna	I tion 4 Substituted ire	d Serbia to Alba	ania in Serb				

#### SOCIAL PROTECTION

1.	Did your ho	ousehold re	eceive any fo	ood aid in th	e last 6 months?		YES NO							
	2. How many times did your household receive in the last 6 months?	3. When did distribution place?		4. Who performed the last distribution	5. Who provided the food for the distribution?	6.	GO TO		you	recei	ve a	at the last d	istributio	n?
		DAY	MONTH	c	ODE BELOW	Wh	eat flou	Veg.oil	Ве	ans		Sugar	Salt	
7.	Do you hav	ve a ration	card?	Į.			YES	о то о.:			DES MT:	QUESTION	NS 4 AN	D 5
8.	How many	household	members a	re included	in the ration card?	٠.	NO, G	0 10 0.	Ĭ	2.	Re	d Cross urch		
10. 11.	Did you alv	ways receiv	ration with s	oriate ration somebody o	in the past 6 months?	2. 1. 2. ?1.	YES NO	O TO Q.1		4. 5. 6. 7. 8.	Otl WF: CR: MC: Otl	her loca: P S		
	_		ion usually l						we	eeks				
13.	Have some	e members	of your hou	sehold been	de-registered?		YES NO		_					
14.	Did they all	l de-registe	r voluntarily	?			YES NO							
15.	Do you hav	ve a de-reg	istration she	et?		1.	YES NO							
16.	When do y	ou think the	e next distrib	oution will be	?	DA		MONTH	]					
17.	-		r household <td>-</td> <td>gible to receive payme e)?</td> <td>ent b</td> <td>enefits t</td> <td>from emplo</td> <td>oyer</td> <td>or an</td> <td>y pu</td> <td>ublic</td> <td></td> <td>_</td>	-	gible to receive payme e)?	ent b	enefits t	from emplo	oyer	or an	y pu	ublic		_
										s		(»GO TO (	2.21)	
18.	List the thre	ee most im	portant type	s of benefits	that your household is	s eliç	gible for	?						
								Com Sur Inv Une Ill Dis Job Mat	pany vivo alio mplo ness abil sea erni ld a	y or or's dity oymens pay lity arch ity paylor	pr pe nt me pa pr pay	yments ograms ments		1 2 3 4 5 6 7 8 9 10
19.	Does your	household	receive thes	se payments	regularly?					s				
20.	How much	have you r	eceived ove	r the last ye	ar?									
	Cash Other	DM	-	·										

21	. Did your ho	ousehold re	ceive any a	ssistance from	om Center for Social V		past 6 mc	nths?	
						1. YES 2. NO, G	0 50 0 0		
		22.	1			2. NO, G	O 10 Q.2	.3	
		How							
		much?							
	Cook	DM	ļ						
	Cash Other		1						
	00.	<u>I</u>	1						
23	. Are member	ers of your	family regist	tered with th	e Center for Social We	_	mme?	<del>_</del>	
						1. YES	0.000		
	24.	25.	26.	27.	28.	2. NO, G	0 10 Q. I	30	
	Who is	Category	Has		How much cash last	Did they			
	registered		[person]	times?	time?	receive the			
	?		already			food			
			received?			componen t last time?			
						t last time:			
	ID	I or II			DM	1. YES			
			2.NO >Q.30			2.NO			
			<b>∠</b> Q.30						
							1		
30	Has anybo	dy from this	s household	over visted	the LINIMIK Center for	Social Work	·2		
30	. Has allybo	uy nom mis	s riouserioiu	ever visieu	the UNMIK Center for	Social Work	v.:	YES1	
								NO2	
31	Has this ho	nusehold ev	er heen vis	ited by the s	taff of the UNMIK Cen	ter for Socia	I Work?		
51	. Has tills He	Juseriola ev	ei beeli vis	ited by the s	tall of the ordiving cen	ter for Socia	I WOIK:	YES1	
								NO2, GO to	Q.33
32	Have you h	neen satisfi	ed with the	services nro	vided at the UNMIK C	enter for Soc	rial Work?		
02	. Have your	occii salisii	ou with the	ocivioco pio	vided at the or will to	critor for God	Jai Work:		
							Verv s	atisfied	1
							Satisf		2
								t unsatisfied	3
							Very u	nsatisfied	4
22	Did any mo	ambor of vo	ur housobo	ld participat	e in a credit program?	1 VEC		٦	
55	. Did ally life	silibel of yo	ui nouseno	iu participati	e iii a credit program:	2. NO, G	O TO Q.3	<b>_</b> 37	
								<u></u>	
34	. Did any me	ember of yo	ur househo	ld receive a	ny loan?	1. YES			
						2. NO, G	о то Q.3	37	
35	. How much	did they re	ceive?			DM		7	
		-,						<b>-</b> -	
36	. Who was	providing th	ie loan?	USE CODI	ES BELOW (Next Pag	e)		_	

37.	Did this ho	usehold red	ceive any aid	d for repairir	ng/rebuilding you hou	ise in the last	12 months?	1. YES 2. NO,		o Q.	40
38.	How much	was it wort	h?			DM Dinars					
39.	39. Who donated it?  USE CODES				ES BELOW		I				
40.	Did you red	ceive any a	dditional aid	in the past	12 months?	1. YES 2. NO, G	O TO OTHER MODULE				
	ASK Q.41 FOR ALL, THEN GO TO 42-44	,	42. How much was it worth? DM	43. Who donated? USE CODES ON RIGHT	44. When was the last received [ITEM]?  MONTH	month you YEAR	CODES FOR Q.3 HUMANITARIAN RELATIVES IN TRELATIVES ABR BANK 4 SOCIALLY OWNE ENTERPRISE/St Serbia** 5 EMPLOYER 6	GROUP KOSOVO OAD D ate of	ND 43	.	
Α	Winter fuel						OTHERS 7				
В	Fresh food										
С	Winter clot										
D	Children's I										
E	Education	kits									
F	Stoves				**Added State of						
G	Others	<u> </u>	<u> </u>	<u> </u>	Serbian Question		nd 43 (Code 5) in				

MISCELLANEOUS INCOMES PART C: OTHER NONLABOR HOUSEHOLD INCOME

	ī	T.	1-
		1.	2.
		In the last 12	How much did your household
		months, did your	receive in the last 12 months from
		household, or	[SOURCE] including the value of
		any of its	any payment in the form of goods?
	INCOME SOURCES	members,	
		receive any	
		payments, in	
		cash or in any other form, from	
		the following	
		the following	
			CURRENCY
			1. DEM
		YES1	2. DINAR
		NO2	
		(»NEXT SOURCE	)
	D1-1 *		
1	Rental income:		
	Apartment, house, other living space		
	Land		
	Car, truck, other vehicles		
	Other rental		
2	Revenue from sale of assets:		
	Sale of real estate (house, land, etc)		
	Sale of vehicles		
	Sale of durable goods of the household		
	Other sale of assets		
300000000000000000000000000000000000000			

DWELLING HEAD OF HOUSEHOLD

Now I would like to ask you about your housing conditions.

8 Others

By housing, I mean all rooms and separate structures (including tents and prefabs) used by the members of your household D Dwelling type Does your How large is What is the How many When was How did your household W DAMAGED: PLEASE household use the part of the main material separations the obtain this [STRUCTURE] [STRUCTURE] of the walls of [STRUCTU [STRUCTURE]? REFER TO THE (rooms) CATEGORIES USED IN ? LIST this does the RE] built? PURCHASED.. vour 1 [STRUCTURE] [STRUCTU THE IMG/UNHCR FROM EMPLOYER 2 ALL household **INVENTORIES** STRUCTURE use? DO NOT MUD. 1 RE] have? BUILT PERSONNALLY 3 SWAPPED 4 S BEFORE Ν INCLUDE STONES 2 TENTS: INHERITED 5 G WOOD 3 ASKING Q. 2-KITCHEN. **GIVE** ASSIGNED AFTER WAR 6 BRICKS 4 CORRIDORS NUMBER. OCCUPIED BECAUSE CEMENT С AND BLOCKS 5 VACANT 0 **BATHROOMS** DONATED 8 OTHER 6 D RENTED 9 YES..1 OTHERS 10 YEAR NO...2 (»next dwelling SQ. MTRS NUMBER Tent 2 Prefab/container 3 Damaged house 4 Damaged apartment 5 Intact/Reparired house 6 Intact/Repaired apartment 7 Barracks

AMENITIES			HEAD OF HO	USEHOLD
1. What is the main source of water to wash for your household?		6. Is it shared with other households		
CENTRALIZED PIPELINE 1	>>Q.3	Yes 1		
STANDING WATER PIPE 2	>>Q.4	No 2		
		7. Does your household have access to electricity?		
WELL 3	>>Q.4	Vog 1		
SPRING 4	>>Q.4	Yes 1 No 2	010	
BROUGHT IN WATER (TRUCK) 5	>>Q.4	8. How many hours per day was electricty available on average in hrs	>>Q10	
PUBLIC TAP 6		the past 7 days?		
		9. Has your electricity supply improved in the past 12 months?		
OTHER 7		Yes		
2. How long does it take to bring the water to the main dwelling? mn		No 2		
3. How many hours per day was water available on average in the hrs past 7 days?		10. How do you light your dwelling when electricity is unavailable?		
4. What is the main source of hot water for your household?		GENERATOR 1		
CENTRALIZED SUPPLY 1		KEROSENE LAMPS 2 FLASHLIGHTS 3 OTHER 4		
TI DAMPIA VINNER VINNER O		11. How does your household usually heat its dwelling?		
ELECTRIC WATER HEATER 2		MOOD GEOVER 1		
COAL STOVE 3		WOOD STOVE 1		
WOOD STOVE 4		ELECTRIC HEATER 2		
GAS WATER HEATER 5		DISTRICT HEATING 3		
NO HOT WATER 6		WATER RADIATORS- FROM A GAS, COAL, ELACTRIC BOILER INSIDE THE HOUSE 4		
OTHER 7		COAL STOVE 5		
		OTHER 6		
5. What type of toilet does your household uses?		12. How many months between October 99 and April 2000, did your		
,		household heat the dwellings? mo		
		13. How many rooms did your household manage to heat when it		
FLUSH TOILET 1		was heating the dwelling in the past 12 months?		
7.1mp.73m 0		14. Where is the nearest telephone used by the members of your		
LATRINE 2 NO TOILET 0	>>Q7	household?		
NO TOTALL O	>>Q1	INSIDE THE DWELLING 1		
		NEIGHBOR'S HOUSE 2		
		PUBLIC PLACE 3		
		NO TELEPHONE ACCESSIBLE 0		
		15. How does your household dispose of garbage?		
		STREET CONTAINERS 1		
		COLLECTED BY TRUCK 2		
		DUMPED 3		
		BURNED 4		
		BURIED 5		