

**SHS 1**

Collected under the authority of the  
Statistics Act, Revised Statutes of Canada,  
1985, Chapter S19.

**Confidential when completed**

Si vous préférez ce questionnaire en  
français, veuillez cocher

Stratum				Type		Cluster			Rot.	List		

M

C.C.

P.C.

If more than one questionnaire, indicate number  of



# Survey of Household Spending in 1997



Statistics Canada  
Statistique Canada



Canada

**DETACH AND DESTROY AFTER PROCESSING**

Listing Address

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Household Contact:

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Telephone No.

_ _	_ _	-	_ _ _
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(Area Code)

## A. Household Composition

<p>1. What are the <b>first names</b> of all members of your household? Include in your household everyone who currently lives here and anyone who was part of your household at any time during 1997.</p> <p><i>List the household reference person first (see definition). Ask all questions in Section A for each member of the household that you have listed.</i></p> <div style="border: 1px solid black; padding: 5px;"> <p><b>Household Reference Person:</b> The member of the household mainly responsible for its financial maintenance (i.e., pays the rent, mortgage, property taxes or electricity, etc.). This person can be either male or female. In cases where members share equal financial responsibility, choose one member to be the household reference person.</p> </div>	<p>Person : <u>  01  </u></p>	<p>Person : <u>  </u><u>  </u><u>  </u></p>
	<p>First Name:</p>	<p>First Name:</p>
<p>2. What is _____'s <b>relationship</b> to the household reference person?</p>	<p>1 <input type="radio"/> Reference Person</p>	<p>2 <input type="radio"/> Spouse 3 <input type="radio"/> Son/Daughter 4 <input type="radio"/> Other relative 5 <input type="radio"/> Not related</p>
<p>3. In what year was _____ born? <i>(If born in 1900 or earlier, enter 1900.)</i></p>	<p><u>  1  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u></p>	<p><u>  1  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u><u>  </u></p>
<p>4. Is _____ male or female?</p>	<p>1 <input type="radio"/> Male 2 <input type="radio"/> Female</p>	<p>1 <input type="radio"/> Male 2 <input type="radio"/> Female</p>
<p>5. What was _____'s <b>marital status on December 31, 1997?</b> <i>Mark one circle.</i></p>	<p>1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)</p>	<p>1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)</p>
<p>6. <b>Economic Family Code</b> (at time of interview or last day person was a member of the household).</p> <div style="border: 1px solid black; padding: 5px;"> <p><b>Economic Family:</b> Two or more persons who live in the same dwelling and are related to each other by blood, marriage, adoption or common-law. Unrelated roommates would have different codes.</p> </div>	<p>Enter Code: <u>  A  </u></p>	<p>Enter Code: <u>  </u></p>

cut away area

2 <input type="radio"/> Spouse 3 <input type="radio"/> Son/Daughter 4 <input type="radio"/> Other relative 5 <input type="radio"/> Not related	2 <input type="radio"/> Spouse 3 <input type="radio"/> Son/Daughter 4 <input type="radio"/> Other relative 5 <input type="radio"/> Not related	2 <input type="radio"/> Spouse 3 <input type="radio"/> Son/Daughter 4 <input type="radio"/> Other relative 5 <input type="radio"/> Not related	2 <input type="radio"/> Spouse 3 <input type="radio"/> Son/Daughter 4 <input type="radio"/> Other relative 5 <input type="radio"/> Not related
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1   9	1   9	1   9	1   9
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1 <input type="radio"/> Male 2 <input type="radio"/> Female	1 <input type="radio"/> Male 2 <input type="radio"/> Female	1 <input type="radio"/> Male 2 <input type="radio"/> Female	1 <input type="radio"/> Male 2 <input type="radio"/> Female
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1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)	1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)	1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)	1 <input type="radio"/> Married spouse of a household member 2 <input type="radio"/> Common-law spouse of a household member 3 <input type="radio"/> Never married (single) 4 <input type="radio"/> Other (separated, divorced or widowed)
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<i>Enter Code:</i>  	<i>Enter Code:</i>  	<i>Enter Code:</i>  	<i>Enter Code:</i>  
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cut away area

7. Was _____ a member of this household on <b>December 31, 1997</b> ?	1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No
8. Is _____ a member of this household <b>today</b> ?	3 <input type="radio"/> Yes 4 <input type="radio"/> No	3 <input type="radio"/> Yes 4 <input type="radio"/> No

<p>9. For how many weeks in 1997 was _____ a member of this household?</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><i>If this is a one-person household, go to Q.11 after asking this question.</i></p> </div>	<div style="border: 1px solid black; width: 60px; height: 25px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 60px; height: 25px; margin: 0 auto;"></div>
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p><i>If Q.9 is 52, go to Q.12; otherwise, ask this question:</i></p> </div> <p>10. For how many weeks in 1997 did _____ live <b>apart from this household</b>, either as a one-person household, or in another household that no longer exists elsewhere?</p>	<div style="border: 1px solid black; width: 60px; height: 25px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 60px; height: 25px; margin: 0 auto;"></div>

<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p><i>If total weeks (Q.9 plus Q.10) is 52, go to Q.12; otherwise ask this question:</i></p> </div> <p>11. Why is total weeks (Q.9 plus Q.10) less than 52?</p>	<p>2 <input type="radio"/> Immigrated in <b>1997 or 1998</b></p> <p>3 <input type="radio"/> Belonged to a household in existence elsewhere</p> <p>4 <input type="radio"/> Other - <i>Explain in notes</i></p>	<p>1 <input type="radio"/> Child born in <b>1997 or 1998</b></p> <p>2 <input type="radio"/> Immigrated in <b>1997 or 1998</b></p> <p>3 <input type="radio"/> Belonged to a household in existence elsewhere</p> <p>4 <input type="radio"/> Other - <i>Explain in notes</i></p>
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12. Use questions 8, 9 and 10 to determine the data collection code and the procedure to follow for each person.

**Code Procedure**

- 1 Report data for total weeks (Q.9 plus Q.10).
- 2 Report data only for weeks a member of this household (Q.9).
- 3 Report data only for the weeks this person lived apart from this household (Q.10).
- 4 End questions for this person since they became a household member after 1997.
- 5 End questions for this person since not a household member.

- 1  Q.8 = Yes and Q.9 is not equal to 00.
- 2  Q.8 = No and Q.9 is not equal to 00.
- 3  Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.
- 4  Q.8 = Yes, Q.9 = 00 and Q.10 = 00.
- 5  Q.8 = No, Q.9 = 00 and Q.10 = 00.

- 1  Q.8 = Yes and Q.9 is not equal to 00.
- 2  Q.8 = No and Q.9 is not equal to 00.
- 3  Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.
- 4  Q.8 = Yes, Q.9 = 00 and Q.10 = 00.
- 5  Q.8 = No, Q.9 = 00 and Q.10 = 00.

**A. Household Composition**

<b>Person</b>	<b>Person :</b>	<b>Person :</b>	<b>Person :</b>
First Name:	First Name:	First Name:	First Name:

1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No	1 <input type="radio"/> Yes 2 <input type="radio"/> No
3 <input type="radio"/> Yes 4 <input type="radio"/> No	3 <input type="radio"/> Yes 4 <input type="radio"/> No	3 <input type="radio"/> Yes 4 <input type="radio"/> No	3 <input type="radio"/> Yes 4 <input type="radio"/> No

□	□	□	□
□	□	□	□

1 <input type="radio"/> Child born in 1997 or 1998	1 <input type="radio"/> Child born in 1997 or 1998	1 <input type="radio"/> Child born in 1997 or 1998	1 <input type="radio"/> Child born in 1997 or 1998
2 <input type="radio"/> Immigrated in 1997 or 1998	2 <input type="radio"/> Immigrated in 1997 or 1998	2 <input type="radio"/> Immigrated in 1997 or 1998	2 <input type="radio"/> Immigrated in 1997 or 1998
3 <input type="radio"/> Belonged to a household in existence elsewhere	3 <input type="radio"/> Belonged to a household in existence elsewhere	3 <input type="radio"/> Belonged to a household in existence elsewhere	3 <input type="radio"/> Belonged to a household in existence elsewhere
4 <input type="radio"/> Other - Explain in notes	4 <input type="radio"/> Other - Explain in notes	4 <input type="radio"/> Other - Explain in notes	4 <input type="radio"/> Other - Explain in notes

1 <input type="radio"/> Q.8 = Yes and Q.9 is not equal to 00.	1 <input type="radio"/> Q.8 = Yes and Q.9 is not equal to 00.	1 <input type="radio"/> Q.8 = Yes and Q.9 is not equal to 00.	1 <input type="radio"/> Q.8 = Yes and Q.9 is not equal to 00.
2 <input type="radio"/> Q.8 = No and Q.9 is not equal to 00.	2 <input type="radio"/> Q.8 = No and Q.9 is not equal to 00.	2 <input type="radio"/> Q.8 = No and Q.9 is not equal to 00.	2 <input type="radio"/> Q.8 = No and Q.9 is not equal to 00.
3 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.	3 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.	3 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.	3 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 is not equal to 00.
4 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 = 00.	4 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 = 00.	4 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 = 00.	4 <input type="radio"/> Q.8 = Yes, Q.9 = 00 and Q.10 = 00.
5 <input type="radio"/> Q.8 = No, Q.9 = 00 and Q.10 = 00.	5 <input type="radio"/> Q.8 = No, Q.9 = 00 and Q.10 = 00.	5 <input type="radio"/> Q.8 = No, Q.9 = 00 and Q.10 = 00.	5 <input type="radio"/> Q.8 = No, Q.9 = 00 and Q.10 = 00.

## B. Dwelling Characteristics

• **Report** answers for the dwelling that your household occupied on **December 31, 1997**.

1. What type of dwelling did your household live in on **December 31, 1997**?

*Mark one circle.*

- 01  Single detached
- 02  Double
- 03  Row or terrace
- 04  Duplex
- 05  Apartment in a building that has less than five storeys
- 06  Apartment in a building that has five or more storeys
- 07  Hotel, rooming or lodging house, camp - (logging, construction, etc.)
- 08  Mobile home
- 09  Other  
*Specify* \_\_\_\_\_

2. When was this dwelling originally built?

Mark one circle.

10  1920 or before

11  1921-1945

12  1946-1960

13  1961-1970

14  1971-1980

15  1981-1990

16  1991-1996

17  1997

3. Was this dwelling in **need** of any repairs on **December 31, 1997**?

- **Exclude** remodelling and energy improvements.

18  **Yes**, major repairs were needed (e.g., corroded pipes, damaged electrical wiring, sagging floors, bulging walls, damp walls and ceilings, crumbling foundation, rotting porches and steps, etc.)

19  **Yes**, minor repairs were needed (e.g., small cracks in interior walls and ceilings, broken light fixtures and switches, leaking sinks, cracked or broken window panes, some missing shingles or siding, some peeling paint, etc.)

20  **No**, only regular maintenance was needed (e.g., painting, leaking faucets, clogged gutters or eavestroughs, etc.)

## B. Dwelling Characteristics

4. How many rooms were there in this dwelling?

- **Include** kitchen, bedrooms and finished rooms in the attic or basement.
- **Exclude** bathrooms, halls, vestibules and rooms used solely for business purposes.

|\_|\_|

5. How many bedrooms were there in this dwelling?

- **Include** all rooms designated as bedrooms even though the use may be occasional, as in the case of "spare" bedrooms.
- **Exclude** rooms designated as dining rooms, living rooms, etc. which may be used as bedrooms at night.

|\_|\_|

**If a bachelor apartment, enter "00" bedrooms**

6. How many bathrooms with a bathtub or shower were there in this dwelling?

|\_|\_|

7. What was the principal heating equipment for this dwelling?

*Mark one circle.*

- 01  Steam or hot water furnace
- 02  Forced hot air furnace
- 03  Other hot air furnace
- 04  Heating stove (include wood stove)
- 05  Electric heating (include electric baseboard heaters)
- 06  Cookstove
- 07  Other  
*Specify* \_\_\_\_\_

8. How old was this heating equipment?

*Mark one circle.*

- 08  5 years or less (1992-1997)
- 09  6 to 10 years (1987-1991)
- 10  11 to 15 years (1982-1986)
- 11  16 to 20 years (1977-1981)
- 12  Over 20 years (Before 1977)

## B. Dwelling Characteristics

9. What was the principal fuel for this heating equipment?

*Mark one circle.*

- 13  Oil or other liquid fuel
- 14  Piped gas (natural gas)
- 15  Bottled gas (propane)
- 16  Electricity
- 17  Wood
- 18  Other  
*Specify* \_\_\_\_\_



10. What was the principal fuel for the hot water supply?

Mark one circle.

19  Oil or other liquid fuel

20  Piped gas (natural gas)

21  Bottled gas (propane)

22  Electricity

23  Wood

24  Other

Specify \_\_\_\_\_

25  No running hot water

11. What was the main fuel used for cooking?

Mark one circle.

26  Oil or other liquid fuel

27  Piped gas (natural gas)

28  Bottled gas (propane)

29  Electricity

30  Wood

31  Other

Specify \_\_\_\_\_

### C. Facilities Associated with the Dwelling

• **Include** items regardless of ownership, as long as they were in the dwelling your household occupied on **December 31, 1997**.

How many of the following did you have:

*If none, enter 0;  
if 10 or more, enter 9.*

1. Refrigerators?

|\_ |

2. Colour TV sets?

|\_ |

3. VCRs?

|\_ |

4. Telephones?

**If Q.4 is zero, specify reason and go**

- **Include** phones used for business.
- **Exclude** cellular phones.

|\_ |

Specify \_\_\_\_\_

5. Telephone numbers for this dwelling?
- **Include** phone numbers used for business.
  - **Exclude** cellular phone numbers.

|\_ |

Did you have:

- |   |                             |  |
|---|-----------------------------|--|
| 6. A cellular phone for personal use?<br>• <b>Exclude</b> cordless phones.        | 1 <input type="radio"/> Yes | 2 <input type="radio"/> No                     |
| 7. A microwave oven?  | 3 <input type="radio"/> Yes | 4 <input type="radio"/> No                     |
| 8. A freezer separate from the refrigerator?                                      | 5 <input type="radio"/> Yes | 6 <input type="radio"/> No                     |
| 9. Cable TV?  | 7 <input type="radio"/> Yes | 8 <input type="radio"/> No                     |
| 10. A CD player?  | 1 <input type="radio"/> Yes | 2 <input type="radio"/> No                     |
| 11. A home computer?<br>• <b>Exclude</b> computers used exclusively for business. | 3 <input type="radio"/> Yes | 4 <input type="radio"/> No → <b>Go to Q.14</b> |
| 12. A modem?  | 5 <input type="radio"/> Yes | 6 <input type="radio"/> No → <b>Go to Q.14</b> |
| 13. Did you use the Internet from home?   | 7 <input type="radio"/> Yes | 8 <input type="radio"/> No                     |

## C. Facilities Associated with the Dwelling

14. Did you have:

*Mark one circle.*

1  Window-type air conditioning units?

2  Central air conditioning?

3  None

15. Did you have:

*Mark one circle.*

4  A built-in automatic dishwasher?

5  A portable automatic dishwasher?

6  None

16. Did you have (inside your dwelling):

*Mark one circle.*

7  An automatic washing machine?

8  Any other kind of washing machine?

9  None

17. Did you have (inside your dwelling):

*Mark one circle.*

1  An electric clothes dryer?

2  A gas clothes dryer?

3  None

## D. Tenure

1. On **December 31, 1997** was your dwelling:

- 1  Owned **without a mortgage** by your household?
- 2  Owned **with (a) mortgage(s)** by your household?
- 3  Rented by your household?
- 4  Occupied rent-free by your household (i.e., where no member owned the dwelling and no rent was charged)?

2. In what year did your household move to this dwelling?

Year

1 1 9

**If before 1992, go to instructions after Q.7.4 (page 12)**

3. Did the **reference person** own or rent their previous dwelling?

*Mark one circle.*

- 1  Owned
- 2  Rented
- 3  Did not maintain their own dwelling

**If no spouse, go to Q.5.**

4. Did the **spouse** of the reference person own or rent their previous dwelling?

*Mark one circle.*

- 4  Owned
- 5  Rented
- 6  Did not maintain their own dwelling

**If this household moved in 1997, go to Q.5; otherwise go to the instructions after Q.7.4 (page 12).**

5. Did anyone in this household report TOTAL WEEKS equal to 52?

*(See Section A, Q.9 plus Q.10)*

- 1  Yes → **Go to Q.6**
- 2  No

5.1 For the total weeks reported earlier (Section A, Q.9 plus Q.10), did anyone live in another dwelling?

- 3  Yes
- 4  No → **Go to instructions after Q.7.4 (page 12)**

## D. Tenure

## Dwellings Previously Occupied by Your Household in 1997

6. Were any of the dwellings **previously occupied** in 1997:

- 6.1 Owned **with (a) mortgage(s)** by your household?      5  Yes      6  No
- 6.2 Owned **without a mortgage** by your household?      7  Yes      8  No
- 6.3 Rented by your household?      1  Yes      2  No
- 6.4 Occupied rent-free by your household  
(i.e. where no member owned the dwelling  
and no rent was charged)?      3  Yes      4  No

**If Q.6.1 and Q.6.2 are both 'No', go to the instructions after Q.7.4.**

7. Were any of the dwellings previously **owned and occupied** in 1997:

- 7.1 Sold?      5  Yes      6  No
- 7.2 Rented to others?      7  Yes      8  No
- 7.3 Left vacant?      1  Yes      2  No
- 7.4 Other?      3  Yes      4  No

Specify \_\_\_\_\_

### **Instructions for the Expenditure Questions**

*Please read to the respondent.*

**Part-year Members** (Section A, Q.9 plus Q.10 is less than 52 weeks)

- **Include** their expenditures, incomes, assets and liabilities only for the period they were members of your household.

#### **Expenditures**

- **Include** all taxes, tips, customs duties and any other additional charges.
- **Include new and used** goods and all **gifts** purchased for persons who were not members of your household.
- **Report** the **total price** of items purchased on an instalment plan.
- **Report** the **full purchase price (including deposits)** of all goods and services **received in 1997** in Sections E through T regardless of when they were paid.

#### **Insurance Settlements**

- For insurance settlements **used to repair or replace** property, report the deductible, otherwise report the amount of the settlement as the "**selling price**" of the item.

## **E. Owned Principal Residences**

- **Exclude** vacation homes, secondary residences and dwellings owned but not occupied by any member of the household in 1997.

1. How many dwellings did members of your household **own and occupy** in 1997?

|||

**If none, enter "00"  
and go to Section I  
(page 19)**

2. For how many months in 1997 did your household own and occupy the dwelling(s)?

||| months

3. For dwelling(s) owned and occupied in 1997, how much was the:

3.1 Total amount **billed** for property taxes in 1997?

- **Include** school taxes, special service charges and local improvements billed in 1997.

\$

\_\_\_\_\_ **A**

If none, explain \_\_\_\_\_

3.2 Total premiums paid in 1997 for homeowners' insurance covering fire, theft and other perils?

\$

\_\_\_\_\_ **A**

3.3 Amount paid for condominium charges?

- **Include** special levies.

\$

\_\_\_\_\_ **A**

4. Were any of the expenses just mentioned (*in Q.3*) charged against income from businesses owned by household members?

- **Exclude** rooms rented out (*see Q.5*).

1  Yes

2  No → **Go to Q.5**

4.1 What amount or percentage of the total (*Q.3.1 to Q.3.3*) was charged against income from your businesses?

\$

\_\_\_\_\_ **B**

\_\_\_\_\_ **\*B**  
OR | | | %

## E. Owned Principal Residences

5. Were any of the expenses just mentioned (*in Q.3*) charged against income from rooms rented out?

1  Yes

2  No → **Go to Section F**

5.1 What amount or percentage of the total (*Q.3.1 to Q.3.3*) was charged against income from rooms rented to:

5.1.1 Household member(s) excluding relatives?

\$

OR    %

5.1.2 Persons who were **not members** of your household, e.g., students who are members of an eligible household elsewhere?

\$

OR    %

**To calculate the B total:**

Take the dollar amount reported in Q.4.1 or multiply the percentage in Q.4.1 by the sum of Q.3.1 to Q.3.3.

Section E Totals:

A

B

## F. Purchase and Sale of Homes



1. Did your household **purchase a home** in 1997? 1  Yes  
2  No → **Go to Q.2**

1.1 Was this purchase made by (a) person(s) who had never previously owned a dwelling which they occupied? 3  Yes  
4  No

1.2 What was the purchase price of your home?  
 • **Exclude** adjustments to property taxes and fuel oil (see *Sections E and J*). \$  **C**

1.3 How much was paid for land transfer taxes and land registration fees? \$  **A**

2. Did your household **sell a home** in 1997? 1  Yes  
2  No → **Go to Q.3**

2.1 What was the selling price of your home? \$  **D**

2.2 How much was paid for real estate commissions? \$  **C**

In 1997, how much did your household spend on:

3. Legal charges related to the dwelling(s), e.g., title searches and mortgage registration fees? \$  **A**

4. Other expenses related to the dwelling(s), e.g., surveying, appraisals, renewal fees and early renewal or closing penalties associated with mortgage payments? \$  **A**

Specify \_\_\_\_\_

*Question 4 should exclude expenses which will be asked for in Sections G to K (mortgage costs, renovations, repairs, rent and utilities).*

	<b>A</b>	<b>C</b>	<b>D</b>
<b>Section F Totals:</b>			



## G. Mortgages on Owned Principal Residences

- **Exclude** mortgages on rental property, vacation homes, secondary residences and dwellings not occupied at any time in 1997.

1. In 1997, did your household have any mortgages on dwellings which it **owned and occupied**? 1  Yes  
 • **Exclude** all other loans (see Sections X and Y). 2  No → Go to Section H

	Amount \$	Number
2. In 1997, what payments did your household make on its mortgages? • <b>Exclude</b> amounts pertaining to business, e.g., part of a duplex.	*C	*C
2.1 Regular payments?	*C	*C
	*C	*C
2.2 Irregular and lump sum payments including payments made to close the mortgage?	*C	*C
	*C	*C
	*C	*C

3. Did the mortgage payments just reported (in Q.2) include:

3.1 Property taxes?	1 <input type="radio"/> Yes	2 <input type="radio"/> No	*C
3.2 Mortgage life and/or disability insurance?	3 <input type="radio"/> Yes	4 <input type="radio"/> No	*C
3.3 What was the total premium paid in 1997 for mortgage life and/or disability insurance?			*C
	\$		

4. Were any amounts added to your mortgage(s) in 1997?  
 • **Include** the amount borrowed if the mortgage started in 1997. 5  Yes  
 • **Exclude** amounts pertaining to business, e.g., part of a duplex. 6  No → Go to Section H

4.1 What amounts were added?

	D
\$	D
\$	D
\$	D
\$	D

**To calculate the C total:**  
 1. For Q2.1 and Q.2.2, multiply the amounts from the first column by the number of payments from the second column.  
 2. If Q.3.1 is "yes", deduct the amount reported for property taxes (see Section E, Q.3.1)  
 3. If Q.3.2 is "no", add the amount reported for mortgage life insurance premiums (Q.3.3)

<b>Section G Totals:</b>	C	D
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## H. Renovations and Repairs of Owned Principal Residences

- **Exclude** expenses for vacation homes, secondary residences and rented principal residences.
- **Exclude** expenses charged against business and rental income.

### 1. In 1997, how much did your household spend on **additions, renovations and other alterations**?

- **Include** work done to upgrade the property to acceptable building or living standards, to rearrange the interior space, or to modernize the existing facilities without changing the type of occupancy.
- **Include** items which would normally be included in a property sale, rather than portable or "non-fixed" equipment.
- **Include** any finishing in new homes.
- **Include** the cost of plumbing, electrical and heating equipment, and built-in appliances if these were **part of a project**.
- **Include** lumber, hardware, floor coverings, paint, wallpaper, built-in appliances, patio stones, asphalt, in-ground pools, prefabricated sheds, shingles, landscaping services and complete re-roofing.

Specify:

---



---



---

Total Cost	
\$	
	A
	A
	A

### 2. In 1997, how much did your household spend on **installations of built-in equipment, appliances and fixtures**?

- **Include** sinks, plumbing fixtures, heating and/or air conditioning equipment, electrical fixtures and equipment, wiring, built-in security devices, built-in ovens and dishwashers, central vacuums, hard surface flooring, wall-to-wall carpeting, built-in cabinets and shelving units.
- **Exclude** any installations already reported.

**Replacement:** the installation of equipment or fixtures to replace an existing unit, e.g., replacing an electric water-heater with a gas model.

**New installation:** the installation of equipment or fixtures that did not previously exist on the property, or that were installed in addition to the equipment or fixtures on the property, e.g., installing a shower stall in a former half-bathroom.

Specify:

---



---



---

Replacement	New Installation
\$	\$
A	A
A	A
A	A

## H. Renovations and Repairs of Owned Principal Residences

3. In 1997, how much did your household spend on **repairs and maintenance**?

- **Include** expenditures made for an existing structure or piece of equipment to keep it in good working condition and to maintain its appearance.
- **Include** repairs done to broken, damaged or malfunctioning components of the structure or equipment.
- **Include** painting, equipment service contracts, cleaning of equipment, and work done on fences, patios and driveways.
- **Exclude** housekeeping costs such as rug cleaning, window washing, cleaning out of eavestroughs, groundskeeping, snow removal and garbage removal (see *Sections L and M*).

*Specify:*

---

---

---

Total Cost	
\$	
	A
	A
	A

Section H Total:

A

# I. Rented Principal Residences

- **Include** principal residences occupied rent-free, i.e. where no member owned the dwelling and no rent was charged.
- **Exclude** rented vacation homes (see Section J, Q.2, page 21).

1. For how many months in 1997 did your household **occupy a rented dwelling**?

|\_|\_| months

*If none, enter "00" and go to Section J (page 21)*

2. What monthly rental payments were made for the principal residences which your household occupied in 1997?

- **Include** any part of the dwelling used for business or rented to others.
- **Include** amounts paid on behalf of your household, if known.

Month	Rent Paid \$	Month	Rent Paid \$
January		July	
February		August	
March		September	
April		October	
May		November	
June		December	

Enter total rent paid → \$  **A**

3. In 1997, what additional amount was paid to the landlord that was not included in the payments just reported, e.g., security deposits?

\$  **A**

4. In 1997, how much of the rent which you paid was returned to your household for any reason, e.g., rent overpayment and return of damage deposit?

- **Exclude** provincial tax credits for rent paid and provincial or municipal rent allowances.

\$  **B**

5. Did your household pay reduced rent in 1997 for any of the following reasons:

- 1  Government subsidized housing?
  - **Include** federal, provincial and municipal programs.
- 2  Other reasons, e.g., services to landlord and company housing?
- 3  No reduced rent?

# I. Rented Principal Residences

6. In 1997, how much did your household spend on:

6.1 Additions, renovations, alterations, installations and replacements of equipment and fixtures, and repairs and maintenance for rented dwelling(s) occupied in 1997?

- **Exclude** amounts reimbursed by the landlord.

\$

A

6.2 Tenants' insurance?

\$

A

6.3 Parking at your place of residence?

- **Exclude** any amount that was included in previous answers on rent expenses.

\$

A

7. In 1997, was any part of the rent expense charged against income from businesses owned by the household members?

1  Yes

- **Exclude** rooms rented out (see Q.8).

2  No → Go to Q.8

7.1 What amount or percentage of the rent expense (Q.2 plus Q.3 plus Q.6 less Q.4) was charged against income from your businesses?

\$

B

OR     %  
\*B

8. In 1997, was any part of the rent expense charged against income from rooms rented to others?

1  Yes

2  No → Go to Section J

8.1 What amount or percentage of the rent expense (Q.2 plus Q.3 plus Q.6 less Q.4) was charged against income from rooms rented to:

8.1.1 Household member(s) excluding relatives?

\$

OR     %

8.1.2 Persons who were **not members** of your household, e.g., students who are members of an eligible household elsewhere?

\$

OR     %

**To calculate the B total:**

1. Take the dollar amount in Q.7.1 or multiply the percentage in Q.7.1 by the total of Q.2 plus Q.3 plus Q.6 less Q.4.
2. Then add the amount reported in Q.4.

Section I Totals:

A

B

# J. Utilities and Other Rented Accommodation

Ask OWNERS and RENTERS these questions.

**Water, Fuel and Electricity for Principal Residences**

- **Include** fuel used for barbecues, fireplaces, etc.
- **Exclude** expenses for vacation homes and secondary residences (see Section K, Q.6.5, page 24).
- **Exclude** expenses charged against business or rental income.
- **Exclude** camp fuels (see Section S, Q.12, page 49).

Total Cost \$
A
A
A
A

1. In 1997, how much did your household spend on:

1.1 Water and sewage charges (not included in property tax bill), e.g., pumping services?

1.2 Electricity?

1.3 Other fuel for heating and cooking, e.g., oil, gas, propane and wood?

1.4 Rental of heating equipment?

**Other Rented Accommodation**

- **Include** vacation home rentals and campground fees.
- **Include** accommodation while at school or working away from home.
- **Exclude** expenses where accommodation was part of a package, e.g., combined with transportation, food or entertainment (see Section R, Q.17, page 47).
- **Exclude** recreational camps (see Section S, Q.19 and Q.20, page 49).
- **Exclude** meals purchased separately (see Section N, Q.5, page 34).
- **Exclude** expenses charged against business income and expenses that will be reimbursed.

*Rent expenses for households whose usual place of residence is a hotel, boarding house, etc. should have been reported in Section I.*

Total Cost \$
A
A
OR         %

2. In 1997, while away from home overnight or longer, how much did your household spend on:

2.1 Hotels and motels?

2.2 Other accommodation?

2.3 Of this amount (Q.2.1 plus Q.2.2), how much was spent in this province?

	A
<b>Section J Total:</b>	

## J. Utilities and Other Rented Accommodation

### ***Expenses on Dwellings Not Owned by Members of the Household***

*If a member of the household had expenses related to property owned by someone outside the household and if:*

- a) it was used as a principal residence by a member of the household, then enter property taxes in Section I, Q.2 (total rent paid) and mark Section I, Q.5 as "2". Report any other applicable expenses in Sections I and J. For example: A relative who is not a household member owns the building but the household pays the property taxes and the rent is "free".*
- b) it was not used for the household's principal residence or for business, then report these expenses in Section J, Q.2.2 (rented vacation homes). For example: A household has used a vacation home owned by a parent and spent money on repairs and utilities.*
- c) it was used for farming or for other unincorporated business purposes, then deduct allowable expenses from gross income from self-employment when calculating net self-employment income. Report any capital costs to your household business in Section X, Q.1.5, page 58.*

## K. Owned Secondary Residences and Other Property

Ask **OWNERS** and **RENTERS** these questions.

### Owned Vacation Homes and Other Secondary Residences

- **Exclude** mobile vacation homes (see *Section R, Q.3, page 45*).
- **Exclude** expenses charged against business income.

1. In 1997, did any member of your household **own** a vacation home or other secondary residence?      1  Yes  
2  No → **Go to Q.7**  
(page 24)

2. In 1997, did any member of your household **purchase** a vacation home or other secondary residence?      3  Yes  
4  No → **Go to Q.3**

2.1 What was the purchase price?      \$  **C**

3. How much money was borrowed in 1997 for expenses associated with the dwelling(s)?       **D**  
• **Include** purchase as well as mortgage and other financial obligations.      \$

4. How much were the mortgage payments in 1997?       **C**  
• **Exclude** payments made at time of sale.      \$

5. Was (were) the dwelling(s) **sold** in 1997?      1  Yes  
2  No → **Go to Q.6**

5.1 What was the selling price?      \$

5.2 What was the **net** amount received from the sale (the selling price less the amount paid on the outstanding mortgage and the real estate commissions)?      \$  **D**



## K. Owned Secondary Residences and Other Property

6. In 1997, how much did your household spend on:

6.1 Additions, renovations and new installations?	\$	A
6.2 Repairs, maintenance and replacements?	\$	A
6.3 Property taxes and sewage charges?	\$	A
6.4 Insurance?	\$	A
6.5 Electricity, water and fuel?	\$	A
6.6 Other expenses associated with the property, e.g., condominium charges, survey costs, real estate commissions, legal fees and mortgage insurance premiums?	\$	A

### Other Property

7. In 1997, did any member of your household **own** any other property?

1  Yes

- **Exclude** principal and secondary residences, rental or other business property, and farm property.

2  No → **Go to Section L (page 26)**

**NOTE:** An owned dwelling which was not occupied during 1997 should be considered as "other property" for the time it was not occupied, unless it was a rental or business property.

8. In 1997, did any member of your household **purchase** any other property?

3  Yes

4  No → **Go to Q.9**

8.1 What was the purchase price?

\$  C

9. How much money was borrowed in 1997 for expenses associated with the property (including purchase)?

\$  D

10. How much were the mortgage payments in 1997?

- **Exclude** payments made at time of sale.

\$  C

## K. Owned Secondary Residences and Other Property

11. How much did your household spend on additions or major alterations to the property in 1997, e.g., servicing of land?

\$

C

12. How much was spent in 1997 on other expenses associated with the property, e.g., property taxes, survey costs, appraisal fees, utilities?

\$

A

13. Was any of the property sold in 1997?

1  Yes

2  No → **Go to  
Section L  
(page 26)**

13.1 What was the selling price?

\$

13.2 What was the **net** amount received from the sale (the selling price less the amount paid on the outstanding mortgage and the real estate commissions)?

\$

D

<b>Section K Totals:</b>	<b>A</b>	<b>C</b>	<b>D</b>
--------------------------	----------	----------	----------

## L. Household Furnishings and Equipment

- **Include** purchases for use in vacation homes or in other accommodations.
- **Include** all sales taxes.
- **Include** gifts purchased for persons who were not members of your household.
- **Exclude** expenses charged against business income.

In 1997, how much did your household spend on:

### Household Furnishings, Art and Antiques

- **Include** indoor and outdoor furniture.
- **Include** the cost of home-made or home-finished furnishings.
- **Exclude** rentals (see Q.47, page 31).

1. Furniture for indoor or outdoor use?

- **Include** mattresses.

2. Glass mirrors, and mirror and picture frames?

3. Lamps and lampshades?

- **Exclude** light fixtures (see Section H).

4. Rugs, mats and underpadding?

- **Exclude** wall-to-wall carpeting (see Section H).

5. Window coverings and household textiles, e.g. curtains, blinds, bedding, towels, tablecloths, cushions and bathroom accessories?

- **Include** cloth material used to make household furnishings.

6. Works of art, carvings and vases?

7. Antiques, e.g., furniture and jewellery that are at least 100 years old?

8. Maintenance, and repair of furniture, carpeting and household textiles?

- **Include** cleaning of carpets and furniture.
- **Include** re-upholstering of furniture.

Total Cost \$
A
A
A
A
A
A
A
A

## L. Household Furnishings and Equipment

### Home Entertainment Equipment

- **Exclude** accessories and attachments for vehicles (see Sections Q and R)..
- **Report** net purchase price (the price after the trade-in allowance is deducted).

### Audio, Video and Other Home Entertainment Equipment

9. Audio combinations, components and radios, e.g., tape recorder/players, CD players, receivers, amplifiers and speakers?  
 • **Include** clock, and telephone combinations and console systems.  
 • **Exclude** car radios (see Section Q, Q.11, page 43).
10. Televisions, VCRs, camcorders and other television/video components?  
 • **Include** combinations, projection and monitor style TVs.
11. Compact discs, pre-recorded audiotapes, videos and videodiscs?
12. Blank audio and video tapes?
13. Other home entertainment equipment, attachments, accessories and parts purchased separately, e.g., satellite dishes, headphones, microphones, cases, cleaners and coaxial cable?

Net Purchase Price of Items Purchased in 1997 \$
A
A
A
A
A

### Computer Equipment

14. Computer hardware, e.g., monitors, keyboards, disk drives, printers and mouses:
- 14.1 Purchased new?
- 14.2 Purchased used?
- 14.3 How much was **received** from the **sale** of computer hardware equipment?  
 • **Exclude** items that were traded-in.
15. Computer software, e.g., operating systems, word-processing, spreadsheet and utilities programs, and multimedia software?
16. Computer supplies and other equipment, e.g., diskettes, computer paper and disk storage boxes?

A
A
B
A
A

## L. Household Furnishings and Equipment

### Home Entertainment Services

17. Rental of videos and videodiscs?
18. Maintenance and repair of home entertainment equipment?  
 • **Include** service contracts.
19. Rental of cablevision and satellite services in 1997?  
 • **Include** pay TV.
20. Rental of home entertainment equipment, and other services related to home entertainment equipment and supplies?  
 • **Include** all types of audio, video and computer equipment and supplies mentioned earlier.  
 • **Exclude** rental of video games (see Section S, Q.13, page 49).

Specify \_\_\_\_\_

Total Cost \$
A
A
A
A

### Major Household Appliances

- **Exclude** purchases of built-in appliances (see Section H, page 17).
- **Exclude** rentals (see Q.47, page 31).
- **Report** net purchase price (the price after the trade-in allowance is deducted).

21. Refrigerators and freezers?
22. Cooking stoves and ranges?
23. Microwave and convection ovens?
24. Washers and dryers?
25. Vacuum cleaners and other rug cleaning equipment?  
 • **Exclude** central vacuum cleaner systems (see Section H, page 17).
26. Sewing machines?
27. Portable dishwashers?

Net Purchase Price of Items Purchased in 1997 \$
A
A
A
A
A
A
A
A

## L. Household Furnishings and Equipment

	Total Cost \$
28. Gas barbecues? • <b>Exclude</b> electric and charcoal barbecues (see Q.32 and Q.45).	A
29. Room air conditioners, portable humidifiers and dehumidifiers?	A
30. How much did your household spend on:	A
30.1 Attachments and parts purchased separately for major household appliances? • <b>Include</b> vacuum cleaner bags.	A
30.2 Maintenance and repair of major household appliances? • <b>Include</b> service contracts.	A
31. If your household <b>sold</b> any major household appliances, what was the total amount <b>received</b> in 1997? • <b>Exclude</b> appliances that were traded-in.	B

Small Electrical Appliances		Total Cost \$
32. Electric food preparation appliances, e.g., toasters, coffee makers, kettles, processors, blenders, electric knives and barbecues? • <b>Exclude</b> gas and charcoal barbecues (see Q.28 and Q.45).		A
33. Electric hairstyling and personal care appliances, e.g., dryers, clippers, razors, vaporisers and heating pads? • <b>Exclude</b> butane and other non-electric hairstyling equipment (see Section P, Q.4, page 39).		A
34. All other electric appliances and equipment, e.g., irons, floor polishers, fans, blankets, can openers, extension cords and portable electric space heaters?		A

Equipment for Serving and Preparing Food		Total Cost \$
35. Tableware, flatware and knives? • <b>Exclude</b> disposable tableware.		A
36. Non-electric kitchen and cooking equipment, e.g., pots and pans, mixing bowls, chopping boards, canisters, food keepers, spice racks, food choppers and measuring cups? • <b>Exclude</b> knives (see Q.35).		A

## L. Household Furnishings and Equipment

### Lawn, Garden and Snow Removal Tools, Equipment and Accessories

- **Exclude** supplies (see Section M).

37. Power lawn and garden equipment, e.g., mowers, tractors, tillers and hedge trimmers?

38. Snow blowers?

39. Other lawn, garden and snow removal tools and equipment, attachments, accessories and parts purchased separately?

- **Include** non-power lawn mowers, hoses, sprinklers, clippers, shovels, flower pots, stakes, sprayers and spreaders.

Total Cost \$
A
A
A

### Workshop/Garage Tools and Equipment

40. Power tools and equipment, e.g., electric drills, circular saws, sanders, jigsaws, motors and pumps?

41. Other tools, e.g., hammers, screwdrivers, measuring tools, tool chests, workbenches, hand saws, soldering irons, scissors, saw blades and drill bits?

A
A

### Other Household Equipment

42. Non-electric cleaning equipment, e.g., brooms, mops, dish racks, paint rollers, pails and garbage cans?

43. Luggage, e.g., suitcases, briefcases, trunks, baby carriers, etc.?

44. Home security equipment, e.g., portable smoke detectors, fire extinguishers, burglar alarms, padlocks, safes and security boxes, and escape ladders?

- **Exclude** security **services** (see Q.47) and built-in devices (see Section H, page 17).

45. Other household equipment, parts and accessories?

- **Include** the following:

- Measuring equipment, e.g., clocks, timers and non-clinical thermometers.
- Non-electric laundry equipment, e.g., clothes lines, ironing board covers and laundry baskets.
- Other items, e.g., calculators, typewriters, drapery hardware, strollers, hangers, fireplace tools, house decorations, ladders, flashlights and charcoal barbecues.

A
A
A
A

## L. Household Furnishings and Equipment

### Services Related to Household Equipment

46. Maintenance and repair of household equipment not previously reported?

- **Exclude** major home appliances and home entertainment equipment.

47. Other services related to household furnishings and equipment?

- **Include** the following items:
  - Home security services (including installation).
  - Making of keys and draperies.
  - Installation of stoves, draperies and other non-fixture equipment.
  - Rental of household furnishings, appliances and equipment (excluding home entertainment equipment).

Total Cost \$
A
A

**NOTES:**

1. The A total excludes Q.14.3 and Q.31.
2. The B total includes Q.14.3 and Q.31 only .

<b>Section L Totals:</b>	A	B
--------------------------	---	---



## M. Home Operation

In 1997 how much did your household spend on:

### Communications

- 1.1 Telephone services?  
 • **Include** basic and enhanced service charges, long distance charges (net of discounts), equipment rentals, calls from hotels and pay phones, and phone cards.
- 1.2 Cellular services?
- 1.3 Purchase of equipment, e.g., telephone sets, cellular phones, fax machines and answering machines?
- 1.4 Internet services (including access and other charges related to the Internet)?
- 1.5 Other charges, e.g., wiring and installation fees, and repairs?  
 • **Include** rental of communication equipment not reported elsewhere.
2. Postage stamps, and other postal and communications services?  
 • **Include** registered mail, special delivery mail, post office boxes, telegrams, couriers, fax services and parcel delivery.

Total Cost \$
A
A
A
A
A
A
A

### Child Care Expenses

3. Day care centres?
4. Other child care outside the home?  
 • **Exclude** children's camps, e.g., day camps and summer camps (see Section S, Q.19, page 49).
5. Child care in the home?

A
A
A

### Home and Garden Services

6. Expenses for domestic help, e.g., housekeepers, cleaners, paid companions and house-sitters?  
 • **Exclude** child care (see Q.3 to Q.5).
7. Horticultural services, snow and garbage removal, e.g., groundskeeping, planting, pruning, tree removal, spraying, consulting services, soil and plant testing, and floral design services?

A
A

### Flowers and Garden Supplies

8. Nursery and greenhouse stock, cut flowers, floral arrangements and decorative plants?  
 • **Include** shrubs, trees, bulbs, seeds, sod, real Christmas trees, dried arrangements and funeral flowers.
9. Fertilizers, weed controls, herbicides, soils and soil conditioners?
10. Insecticides, pesticides and insect repellents?

A
A
A

## M. Home Operation

### Pet Expenses

11. Pet food?

- **Include** birdseed.

12. Pet purchase?

13. Pet related goods, e.g., leashes, litter, collars, aquariums, grooming equipment and doghouses?

14. Veterinarian services, kennels, grooming and other pet related services?

Total Cost  
\$

A

A

A

A

### Cleaning Services

15. Laundry and dry-cleaning services?

- **Include** diaper service.

16. Coin-operated washers and dryers, and self-service dry-cleaning?

A

A

### Household Supplies

17. Household cleaning supplies?

- **Include** detergent, cleaners, waxes, bleach, fabric softeners, drain cleaners, oven cleaners and water softener salt.

18. Stationery supplies, e.g., giftwrap, greeting cards, writing paper, pens, markers, binders and tape?

- **Exclude** school supplies (see Section S, Q.26 and Q.27, page 50).

19. Other paper and plastic supplies, e.g. facial tissue, paper towels, waxed paper, napkins, foil and plastic wraps, garbage bags and disposable cutlery?

20. Other household supplies, e.g., light bulbs, dry cell batteries, candles, ice, road salt, adhesives and string?

A

A

A

A

Section M Total:

A

# N. Food and Alcohol

## Food Purchased from Stores

1. In 1997, how much did your household spend on **food and other groceries** purchased from stores, farmer stalls and home delivery?
- **Exclude** bulk purchases of food for canning, freezing, etc. (see Q.2.1).
  - **Exclude** purchases made while away from home overnight or longer (see Q.2.3).

Give average weekly or monthly expenditure (whichever is convenient) to estimate your annual cost:

Average weekly or monthly expenditure	\$ _____ .00	<b>X</b>	Number of weeks or months _____	=
---------------------------------------	--------------	----------	---------------------------------	---

<b>Total Cost</b>
\$
<b>A</b>

- 1.1 **Of this grocery expenditure**, how much did your household spend on **non-food items**, e.g., paper products, cleaners, pet food, alcoholic beverages and cigarettes?

<b>*A</b>
-----------

2. What **additional** amounts did your household spend on:

- 2.1 Bulk food purchases, e.g., meat in excess of 25 kg (55 lb.) and bulk quantities of produce for freezing?  
 • **Include** charges for cutting, wrapping and freezing.
- 2.2 Prepared food and non-alcoholic beverages for parties, weddings, etc. not already reported?
- 2.3 Food and non-alcoholic beverages purchased from stores while away from home overnight or longer?

<b>A</b>
<b>A</b>
<b>A</b>

## Alcohol Purchased from Stores

3. How much did your household spend on alcoholic beverages purchased from stores (e.g., liquor, beer, wine and grocery stores)?  
 • **Exclude** non-alcoholic beer and wine (see Q.1).
4. How much did your household spend on supplies and fees for self-made beer, wine or liquor?

<b>A</b>
<b>A</b>

## Food Purchased from Restaurants, etc.

- **Include** purchases in restaurants, drive-ins, cafeterias, take-outs, canteens, etc., and catering in restaurants, hotels, etc..
- **Include** taxes, tips and meals bought for guests.
- **Exclude** alcoholic beverages (see Q.6).

5. How much did your household spend on meals and snacks?

<b>A</b>
----------

- 5.1 Of this amount, how much did your household spend in this province?

<b>OR</b>         %
---------------------

# N. Food and Alcohol

**Alcoholic Beverages Purchased from Restaurants, etc.**

6. How much did your household spend on alcoholic beverages purchased and consumed in bars, cocktail lounges, restaurants, etc.?  
 • **Include** all taxes and tips.

<b>Total Cost</b>	
\$	<b>A</b>
<b>OR</b>  _ _ _  %	

6.1 Of this amount, how much did your household spend in this province?

--

**Board**

7. How much board did your household pay to other private households:

7.1 For day board and children's lunches?  
 • **Exclude** board paid while away from home overnight or longer (see Q.7.2).  
 • **Exclude** child care expenses already reported (in Section M).

7.2 While away from home overnight or longer?

	<b>A</b>
	<b>A</b>

**To calculate the A total:**

1. Add all the A boxes.
2. Deduct \*A (Q.1.1).

**Section N Total:**

<b>A</b>
----------

## O. Clothing

- **Include** all items purchased for present or future use.
- **Include** sales taxes.
- **Report** gifts of clothing for persons who were not household members in Q.12.

### Women and Girls 4 years and Over on December 31, 1997 (born before 1994)

<i>Enter Person's First Name</i> →					
<i>Transfer Person No. from Section A</i> →	_ _	_ _	_ _	_ _	_ _
In 1997, how much did your household spend on:	\$	\$	\$	\$	\$
1. Clothing, e.g., outerwear, suits, dresses, skirts, slacks, sweaters, sleepwear, sportswear, specialized clothing and hosiery? • <b>Exclude</b> footwear and accessories.	A	A	A	A	A
2. Footwear?	A	A	A	A	A
3. Accessories, e.g., gloves, hats, mitts, purses and umbrellas?	A	A	A	A	A
4. Jewellery and watches?	A	A	A	A	A
<i>Breakdown Unavailable</i>	A	A	A	A	A
<i>Subtotal (Q.1 to Q.4)</i>					

## O. Clothing

- **Include** all items purchased for present or future use.
- **Include** sales taxes.
- **Report** gifts of clothing for persons who were not household members in Q.12.

### Men and Boys 4 Years and Over on December 31, 1997 (born before 1994)

<i>Enter Person's First Name</i> →					
<i>Transfer Person No. from Section A</i> →	_ _	_ _	_ _	_ _	_ _
In 1997, how much did your household spend on:	\$	\$	\$	\$	\$
<b>5.</b> Clothing, e.g., outerwear, suits, pants, shirts, sweaters, socks and sportswear? • <b>Exclude</b> footwear and accessories.	A	A	A	A	A
<b>6.</b> Footwear?	A	A	A	A	A
<b>7.</b> Accessories, e.g., gloves, hats, ties, belts, wallets and umbrellas?	A	A	A	A	A
<b>8.</b> Jewellery and watches?	A	A	A	A	A
<i>Breakdown Unavailable</i>	A	A	A	A	A
<i>Subtotal (Q.5 to Q.8)</i>					

## O. Clothing

### Children Under 4 Years on December 31, 1997 (born in 1994 or later)

Enter Person's First Name →				
Transfer Person No. from Section A →	_ _	_ _	_ _	_ _
In 1997, how much did your household spend on:	\$	\$	\$	\$
9. Outerwear, daywear, sleepwear and cloth diapers?	A	A	A	A
10. Disposable diapers?	A	A	A	A
11. Footwear, e.g., shoes, sandals, boots and slippers?	A	A	A	A
<i>Breakdown Unavailable</i>	A	A	A	A
<i>Subtotal (Q.9 to Q.11)</i>				

### Gifts of Clothing

12. In 1997, how much did your household spend to purchase gifts of clothing for people who were **not members** of your household:

- 12.1 For women and girls 4 years and over on December 31, 1997?
- 12.2 For men and boys 4 years and over on December 31, 1997?
- 12.3 For children under 4 years on December 31, 1997?

Total Cost \$
A
A
A

### Clothing Materials and Services

In 1997, how much did your household spend on:

13. Clothing material?  
 • **Exclude** cloth for curtains, draperies and furnishings (see Section L, Q.5, page 26).
14. Notions, e.g., patterns, buttons, zippers, sewing and knitting needles, and tape measures?
15. Dressmaking, tailoring, clothing storage and other clothing services, e.g., rental of clothing and costumes, and engraving of jewellery?  
 • **Exclude** repairs and alterations (see Q.16).
16. Maintenance, repair and alteration of clothing, footwear, watches and jewellery?  
 • **Exclude** laundry and dry-cleaning (see Section M, Q.15 and Q.16, page 33).

A
A
A
A

#### To calculate the A total:

1. Add the clothing subtotals for each household member.
2. Use the "Breakdown Unavailable" where there is no subtotal.
3. Then, add on the amounts from Q.12 to Q.16.

Section O Total:

A

## P. Personal and Health Care

### Personal Care

In 1997, how much did your household spend on:

1. Hair grooming services?
  - **Include** washing, cutting, styling, perming and colouring of hair.
  - **Include** tips.
2. Other personal care services?
  - **Include** hair removal, manicures, facials and tanning salons.
3. Personal care preparations, e.g., soap, shampoo, makeup, skin cream, perfume, shaving cream, sunscreen and nail polish?
4. Personal care supplies and equipment, e.g., brushes, wigs, hair scissors, razors and razor blades?
  - **Include** butane hairstyling equipment.
  - **Exclude** electric equipment (*see Section L, Q.33, page 29*).

Total Cost \$
A
A
A
A

### Health Insurance Premiums

5. In 1997, how much did your household spend on **premiums** for:

- 5.1 Public (government) hospital, medical and drug plans?
- 5.2 Private health insurance plans?
  - **Include** supplementary coverage to public hospital and medical plans (e.g., semi-private or bed private differential and drugs), extended health benefit packages, drug plans, out-of-country benefits and visitors' benefits?
- 5.3 Dental plans (sold as separate policies)?
- 5.4 Accident and disability insurance?

A
A
A
A



## P. Personal and Health Care

### Direct Costs for Health Care

- **Include** direct costs incurred by household members for all personal health care received.
- **Include** amounts not covered by insurance such as exclusions, deductibles and expenses over limits.
- **Exclude** payments for which you have been or will be reimbursed.

In 1997, what were the **direct costs** to members of your household for:

#### Eye Care

6. Prescription eye wear, e.g., contact lenses, eyeglasses and insurance on lenses?
7. Other eye care goods, e.g., non-prescription eye wear, eyeglass cases and supplies for contact lenses?
8. Eye exams, eye surgery (e.g., laser surgery) and other eye care services?

Total Cost \$
A
A
A

#### Dental Care

9. Dental services, and orthodontic and periodontal procedures, e.g., examinations, cleanings, fillings, extractions, x-rays, root canals, and the prescription and fitting of dentures?

A
---

#### Other Medical and Health Care

10. Physicians' care?  
 • **Include** general practitioners and specialists.
11. Other health care practitioners, e.g., nurses, therapists, chiropractors, osteopaths and podiatrists?
12. Hospital care (all direct pay charges included in the hospital bill)?
13. Weight control programs, quit-smoking programs and other medical services, e.g., ambulances, rental of medical equipment, laboratory services and nursing homes?
14. Medicines, drugs and pharmaceutical products **prescribed by a doctor**?
15. Other medicines, drugs and pharmaceutical products, e.g., ASA, vitamins and cough syrup?
16. Health care supplies and goods, e.g., first aid kits, bandages, hearing aids, thermometers, wheelchairs and other appliances, bathroom scales and elastic hosiery?

A
A
A
A
A
A
A

Section P Total:

--

## Q. Automobiles and Trucks

1. In 1997, did anyone in your household **own, lease or operate** a car, van or truck and use it completely or partially for private use?  
 • **Exclude** rented vehicles (see Q.20).

1  Yes

2  No → *Go to Q.20 (page 44)*

Ask Q.2 to Q.9 for all vehicles before asking Q.10.

	Vehicle A	Vehicle B	Vehicle C	Vehicle D
<i>Enter vehicle number</i> →	□□□	□□□	□□□	□□□
2. Which of the following best describes this vehicle?	1 <input type="radio"/> Car 2 <input type="radio"/> Van/mini-van 3 <input type="radio"/> Truck/sport utility vehicle	1 <input type="radio"/> Car 2 <input type="radio"/> Van/mini-van 3 <input type="radio"/> Truck/sport utility vehicle	1 <input type="radio"/> Car 2 <input type="radio"/> Van/mini-van 3 <input type="radio"/> Truck/sport utility vehicle	1 <input type="radio"/> Car 2 <input type="radio"/> Van/mini-van 3 <input type="radio"/> Truck/sport utility vehicle
3. When you bought or leased this vehicle, was it new or used?	4 <input type="radio"/> New 5 <input type="radio"/> Used	4 <input type="radio"/> New 5 <input type="radio"/> Used	4 <input type="radio"/> New 5 <input type="radio"/> Used	4 <input type="radio"/> New 5 <input type="radio"/> Used
4. Did you buy this vehicle in 1997?	6 <input type="radio"/> Yes 7 <input type="radio"/> No → <i>Go to Q.6</i>	6 <input type="radio"/> Yes 7 <input type="radio"/> No → <i>Go to Q.6</i>	6 <input type="radio"/> Yes 7 <input type="radio"/> No → <i>Go to Q.6</i>	6 <input type="radio"/> Yes 7 <input type="radio"/> No → <i>Go to Q.6</i>
5. What was the purchase price after the trade-in allowance was deducted? • <b>Include</b> all sales taxes.	\$ <sup>A</sup>	\$ <sup>A</sup>	\$ <sup>A</sup>	\$ <sup>A</sup>
6. Was this vehicle leased in 1997?	1 <input type="radio"/> Yes 2 <input type="radio"/> No → <i>Go to Q.7</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No → <i>Go to Q.7</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No → <i>Go to Q.7</i>	1 <input type="radio"/> Yes 2 <input type="radio"/> No → <i>Go to Q.7</i>
6.1 What was the total leasing cost paid in 1997? • <b>Include</b> down payment. • <b>Exclude</b> operating costs and any amount charged to business.	\$ <sup>A</sup>	\$ <sup>A</sup>	\$ <sup>A</sup>	\$ <sup>A</sup>

## Q. Automobiles and Trucks

	Vehicle A	Vehicle B	Vehicle C	Vehicle D
<p>7. What was the status of this vehicle at December 31, 1997?</p>	<p>1 <input type="radio"/> Owned <span style="float: right;">→ Go to Q.10</span></p> <p>2 <input type="radio"/> Leased</p> <p>3 <input type="radio"/> Returned to lessor</p> <p>4 <input type="radio"/> Sold separately <span style="float: right;">→ Go to Q.8</span></p> <p>5 <input type="radio"/> Traded-in <span style="float: right;">→ Go to Q.9</span></p> <p>6 <input type="radio"/> Owned/leased by non-household member <span style="float: right;">→ Go to Q.10</span></p> <p>7 <input type="radio"/> Other</p> <p>Specify _____</p>	<p>1 <input type="radio"/> Owned <span style="float: right;">→ Go to Q.10</span></p> <p>2 <input type="radio"/> Leased</p> <p>3 <input type="radio"/> Returned to lessor</p> <p>4 <input type="radio"/> Sold separately <span style="float: right;">→ Go to Q.8</span></p> <p>5 <input type="radio"/> Traded-in <span style="float: right;">→ Go to Q.9</span></p> <p>6 <input type="radio"/> Owned/leased by non-household member <span style="float: right;">→ Go to Q.10</span></p> <p>7 <input type="radio"/> Other</p> <p>Specify _____</p>	<p>1 <input type="radio"/> Owned <span style="float: right;">→ Go to Q.10</span></p> <p>2 <input type="radio"/> Leased</p> <p>3 <input type="radio"/> Returned to lessor</p> <p>4 <input type="radio"/> Sold separately <span style="float: right;">→ Go to Q.8</span></p> <p>5 <input type="radio"/> Traded-in <span style="float: right;">→ Go to Q.9</span></p> <p>6 <input type="radio"/> Owned/leased by non-household member <span style="float: right;">→ Go to Q.10</span></p> <p>7 <input type="radio"/> Other</p> <p>Specify _____</p>	<p>1 <input type="radio"/> Owned <span style="float: right;">→ Go to Q.10</span></p> <p>2 <input type="radio"/> Leased</p> <p>3 <input type="radio"/> Returned to lessor</p> <p>4 <input type="radio"/> Sold separately <span style="float: right;">→ Go to Q.8</span></p> <p>5 <input type="radio"/> Traded-in <span style="float: right;">→ Go to Q.9</span></p> <p>6 <input type="radio"/> Owned/leased by non-household member <span style="float: right;">→ Go to Q.10</span></p> <p>7 <input type="radio"/> Other</p> <p>Specify _____</p>
<p>8. If sold separately, what was the net amount received?</p> <p>• Exclude any amount paid to business.</p>	\$ <span style="float: right;">B</span>	\$ <span style="float: right;">B</span>	\$ <span style="float: right;">B</span>	\$ <span style="float: right;">B</span>
<p>9. If traded-in, what was the vehicle's trade-in value?</p>	\$	\$	\$	\$



## Q. Automobiles and Trucks

### Expenditures for Rented Vehicles

- **Exclude** any expenses charged to business.

	Rental Fees (including mileage, insurance charges, taxes and drop-off fees)	Gas and Other Fuels	Other Expenses, e.g., toll fees, parking and repairs
	\$	\$	\$
20. In 1997, how much did your household spend on:	A	A	A
20.1 Rented cars?			
20.2 Rented trucks or vans?			

### Miscellaneous Vehicle Expenses

In 1997, how much did your household spend on:

21. Drivers' licences and tests?
- **Report** government insurance if included.
22. Driving lessons?

	A
	A

#### To calculate the B total:

1. Add the amounts reported in Q.8.
2. For all columns, take the dollar amount reported in Q.18 or multiply the percentage in Q.18 by the subtotal of Q.10 to Q.17.
3. Add together the totals derived in steps 1 and 2.

Section Q Totals:

A	B
---	---

## R. Recreational Vehicles and Transportation Services

### Recreational Vehicles

In 1997, how much did your household spend on:

#### Bicycles

1. Purchase of bicycles, parts and accessories?
  - **Exclude** children's bicycles with wheels under 14 inches (see Section S, Q.9, page 48).
2. Bicycle maintenance and repairs?

Total Cost \$
A
A

### Other Recreational Vehicles

3. In 1997, did anyone in your household **own or operate** any of the following and use it completely or partially for private use?

• **Exclude** rented or leased vehicles (see Q.14).

- |                |                  |   |
|----------------|------------------|---|
| 1 Motorcycle   | 4 Travel trailer | 7 Outboard motor, personal water craft                            |
| 2 Snowmobile   | 5 Truck camper   | 8 Motor home  |
| 3 Tent trailer | 6 Boat or canoe  | 9 Other, e.g., utility trailer, aircraft and all-terrain vehicles |

1  Yes

2  No → **Go to Q.14**  
(page 46)

4. Type of vehicle? (Enter code from Q.3)

Enter vehicle number →

	Vehicle A \$	Vehicle B \$	Vehicle C \$	Vehicle D \$
_ _ _	_ _ _	_ _ _	_ _ _	_ _ _
_	_	_	_	_
4.1 If code 9, specify vehicle type:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	A	A	A	A
5. If purchased in 1997, what was the price after the trade-in allowance was deducted? • <b>Include</b> all sales taxes.				

## R. Recreational Vehicles and Transportation Services

In 1997, how much did your household spend on the following operating expenses:

*The respondent may combine expenses for two or more vehicles if it is easier.*

6. Accessories, attachments, supplies and parts purchased separately for maintenance and repair?

7. Gasoline, diesel fuel, etc.?

- **Exclude** fuels for cooking, heating, etc. (see Section S, Q. 12, page 49).

8. Maintenance and repair jobs not covered by insurance?

9. Vehicle insurance premiums paid for in 1997?

10. Registration fees and licences paid for in 1997?

11. Other expenses, e.g., parking, hangar and airport fees, mooring and boat storage and harbour dues?

*Total Operating Expenses (Q.6 to Q.11)*

12. What amount or percentage of the total operating expenses (Q.6 to Q.11) was charged to business?

13. If sold separately in 1997 (not traded-in), what was the net amount received?

Vehicle A \$	Vehicle B \$	Vehicle C \$	Vehicle D \$
A	A	A	A
A	A	A	A
A	A	A	A
A	A	A	A
A	A	A	A
A	A	A	A
A	A	A	A
B	B	B	B
*B	*B	*B	*B
OR  __ __  %	OR  __ __  %	OR  __ __  %	OR  __ __  %
B	B	B	B

14. In 1997, how much were your household's **total** expenses for rented or leased recreational vehicles?

<b>Total Cost</b>
\$
A

## R. Recreational Vehicles and Transportation Services

### Transportation Services

- **Exclude** expenses charged to business.
- **Exclude** package trips (see Q.17).

15. In 1997, how much did your household spend on transportation by:

15.1. City or commuter bus, subway, streetcar or commuter train?

15.2. Taxi (including tips)?

15.3. Airplane?

15.4. Train (including sleeping car)?

15.5. Highway bus?

15.6. Other passenger transportation, e.g., carpooling, airport bus or limousine service, ferry service, sightseeing tours and travel insurance?

Total Cost \$
A
A
A
A
A
A
A
A

16. In 1997, how much did your household spend on household moving, storage services and delivery services?

### Package Trips

- **Exclude** deposits made in 1997 on package trips to be taken after 1997 (see Section W, Q.1.3, page 57).

17. In 1997, did any member of your household take a trip that included a package?

1  Yes

2  No → Go to  
Section S  
(page 48)

NOTE: The package must have been arranged in advance. The cost of two or more components of the trip must have been combined, e.g., transportation and accommodation, or accommodation with food and beverages.

17.1 What was the cost of the package trips taken by your household in 1997?

\$  A

### To calculate the B total:

1. For all columns, take the dollar amount in Q.12 or multiply the percentage in Q.12 by the total of Q.6 to Q.11.
2. Then add the amounts reported in Q.13.

Section R Totals:  A  B



## S. Recreation, Reading Materials and Education

### Recreation Equipment

#### Sports, Athletic, Camping and Picnic Equipment

In 1997, how much did your household spend on:

1. Sports and athletic equipment?

- **Include** equipment for golf, racquet sports, ice skating, skiing, fishing, home exercise and other sporting and athletic equipment and accessories.
- **Exclude** athletic/running shoes (see Section O - Clothing).
- **Exclude** rentals (see Q.14).

**Total Cost**  
**\$**

2. Camping and picnic equipment and accessories, e.g., tents, backpacks, sleeping bags, camp stoves, lanterns, coolers, mattresses and utensils?

- **Include** attachments and parts.
- **Exclude** gas, electric and charcoal barbecues (see Section L, Q.28, Q.32 and Q.45, pages 29 and 30).

A

#### Photographic Goods and Services

3. Cameras, camera parts, attachments, accessories and other photographic goods, e.g., lenses, tripods, projectors, albums and darkroom supplies?

- **Exclude** purchases of VCRs, camcorders and videos (see Section L, Q.10 and Q.11, page 27).
- **Exclude** rental of videos (see Section L, Q.17, page 28).

A

4. Photographic film, processing, extra prints and enlargements?

A

5. Photographers' services and other photographic services, e.g., passport photos and school pictures?

A

#### Musical Instruments and Accessories

6. Musical instruments, parts and accessories, e.g., pianos and guitars?

A

#### Other Recreation Equipment

7. Artists' materials and handicraft or hobbycraft kits and materials?

- **Exclude** school supplies (see Q.26 and Q.27).

A

8. Electronic games and parts, e.g., video game machines, plug-in cartridges and games on tape or disk?

A

9. Toys and other games?

- **Include** children's vehicles and bicycles with wheels under 14 inches.

Specify \_\_\_\_\_

A

10. Playground equipment, above-ground swimming pools and accessories for swimming pools, e.g., swings, slides, pool covers, vacuum heads and wading pools?

- **Exclude** pool chemicals (see Q.12).

A

## S. Recreation, Reading Materials and Education

	Total Cost \$
11. Collectors' items, e.g., stamps and coins? • <b>Exclude</b> works of art and antiques (see <i>Section L, Q.6 and Q.7, page 26</i> ).	A
12. Parts and supplies for recreation equipment, e.g., camp fuels, ski wax, pool chemicals, ammunition and bait?	A
13. Rental of video games, e.g., plug-in cartridges and games on disk?	A
14. Rental, maintenance and repair of recreation, sports and health equipment?	A

<b>Recreation Services</b>	
15. In 1997, how much did your household spend on <b>admissions</b> to:	
15.1 Movie theatres?	A
15.2 Live performing arts, e.g., plays, concerts, festivals and dance performances?	A
15.3 Heritage facilities and other activities and venues, e.g., museums, zoos, ice shows, craft shows, fairs and historic sites?	A
15.4 Live sports events?	A
In 1997, how much did your household spend on:	
16. Fees for coin-operated and carnival games, e.g., pinball and video games? • <b>Exclude</b> gambling machines (see <i>Section T, Q.4.4, page 51</i> ).	A
17. <b>Membership fees and dues</b> for sports activities, sports and recreation facilities, and health clubs?	A
18. <b>Single usage fees</b> for sports activities, sports and recreation facilities, and health clubs?	A
19. Children's camps, e.g., day camps and summer camps?	A
20. Other cultural and recreational services, e.g., fishing and hunting licenses and guide service, party planning and other rental of sports facilities?	A

## S. Recreation, Reading Materials and Education

### Reading Materials and Other Printed Matter

In 1997, how much did your household spend on:

21. Newspapers?

22. Magazines and periodicals?

23. Books and pamphlets?

• **Exclude** school books (see Q.26 and Q.27).

24. Maps, sheet music and other printed matter, e.g., posters, globes and charts?

25. Services, e.g., duplicating services, library charges, book rentals, bookbinding, advertisements and announcements?

Total Cost \$
A
A
A
A
A

### Education

- **Include** special and private schools.
- **Exclude** day care expenses (see Section M, Q.3, page 32).

In 1997, how much did your household spend on:

26. Kindergarten, nursery school and elementary and secondary education?

27. Post-secondary education, e.g., university, trade and professional courses?

Tuition Fees \$	Books \$	Supplies \$
A	A	A
A	A	A

28. Other courses and lessons, e.g., music, dancing, sports and crafts?

• **Exclude** driving lessons (see Section Q, Q.22, page 44).

29. Other educational services, e.g., rental of school books and equipment?

Specify \_\_\_\_\_

Total Cost \$
A
A

**Section S Total:**

A

## T. Tobacco and Miscellaneous

In 1997, how much did your household spend on:

### Tobacco and Smokers' Supplies

1. Cigarettes, tobacco, cigars and similar products?
2. Smokers' supplies, e.g., matches, pipes, lighters, ashtrays, cigarette papers and tubes?

Total Cost \$
A
A

### Miscellaneous Expenses

3. In 1997, how much did your household spend on the following **financial services**:

- 3.1 Service charges for banks and other financial institutions?
- 3.2 Stock and bond commissions?
- 3.3 Administration fees for brokers and others?
- 3.4 Other financial services, e.g., financial planning, tax preparation and advice, accounting services and safety deposit box charges?

A
A
A
A

4. In 1997, how much were your household's **expenses** and **winnings** from the following:

- 4.1 Government-run lotteries?
- 4.2 Bingos?
- 4.3 Non-government lotteries, raffle tickets and other games of chance?
- 4.4 Casinos, slot machines and video lottery terminals?

Expenses	Winnings
A	B
A	B
A	B
A	B

In 1997, what expenses did your household have for:

5. Loss of deposits, fines and money lost or stolen?
6. Contributions and dues for social clubs, co-operatives, political and fraternal organizations and alumni associations?
  - **Exclude** charitable contributions (see Section V, Q.12, page 56).
7. Tools and equipment purchased for work (by wage or salaried workers)?
  - **Exclude** items reported previously.
8. Legal services not related to dwellings?
  - **Exclude** legal services related to house purchase, sale, etc. (see Section F, Q.3, page 15).
9. What other expenses did you have for **goods**?  
Specify \_\_\_\_\_
10. What other expenses did you have for **services**, e.g. passports, funeral services and rental of halls?  
Specify \_\_\_\_\_

A
A
A
A
A
A
A

If an expense that belongs elsewhere is reported in question 9 or 10, please move it to the appropriate category when editing the questionnaire.

## T. Tobacco and Miscellaneous

Tell the respondent that the following questions are asked to obtain details on how purchases were made by the household in 1997.

### Purchases Through Direct Sales

11. In 1997, did your household purchase any goods through direct sales, e.g., door-to-door sales people, factory outlets, mail order companies, catalogue sales, book clubs and the Internet?

01  Yes

02  No → **Go to Q.12**

11.1 Did your household purchase the following goods through direct sales?

11.1.1 Food and beverages

03  Yes

04  No

11.1.2 Books, newspapers and magazines

05  Yes

06  No

11.1.3 Clothing, cosmetics and jewellery

07  Yes

08  No

11.1.4 Home entertainment products, e.g., CD's, audio equipment and computers

09  Yes

10  No

11.1.5 Other products **used inside the home**, e.g., appliances, cleaners, toys and crafts

11  Yes

12  No

11.1.6 Other products **used outside the home**, e.g., greenhouse and nursery products

13  Yes

14  No

11.2 In 1997, how much did your household spend on goods purchased through direct sales?

\$

### Purchases Outside Canada

12. In 1997, how much did your household spend on goods and services purchased outside Canada?

\$

Section T Totals:

A

B

## U. Personal Income

Ask each of the following questions for each member 15 years or over on December 31, 1997 (born before 1983).

Amounts for persons 14 years or under (born after 1982) should be reported in a parent's column.

Note: Part-year members should report only for the period that they were a member of this household in 1997.

Enter Person's First Name →					
Transfer Person No. from Section A →					
1. For how many weeks in 1997 did this member work:					
1.1 full-time, including holidays with pay?					
1.2 part-time, including holidays with pay?					
<b>Income</b>	\$	\$	\$	\$	\$
For 1997, what was this member's income from the following sources?	B	B	B	B	B
2. <b>Wages and Salaries</b> before deductions, including bonuses, tips, commissions, and military pay and allowances	B	B	B	B	B
3. <b>NET Income from Farm and Non-farm Self-employment</b>					
4. <b>GROSS Income from Roomers and Boarders</b> who were:					
4.1 household members (non-relatives)	B	B	B	B	B
4.2 not members of your household	B	B	B	B	B
5. <b>Dividends; Interest</b> on bonds, accounts and GICs; and <b>Other Investment Income</b> , e.g., net rental income and interest received from loans or mortgages	B	B	B	B	B
6. <b>Child Tax Benefit</b> (including Quebec Family Allowance)	B	B	B	B	B
7. <b>Old Age Security Pension, Guaranteed Income Supplement, Spouse's Allowance</b> from federal government only • Exclude provincial supplements (see Q.12).	B	B	B	B	B
8. <b>Canada or Quebec Pension Plan Benefits</b>	B	B	B	B	B

## U. Personal Income

Enter Person's First Name →

9. **Employment Insurance Benefits** (before deductions)

10. **Goods and Services Tax Credit** (received in 1997)

11. **Provincial Tax Credits**, including Quebec Real Estate Tax Refund (claimed on **1996** income tax returns)

12. **Social Assistance, Provincial Income Supplements, Workers' Compensation Benefits, Veterans' Pensions, Civilian War Pensions and Allowances, and Other Income from Government Sources**

Specify \_\_\_\_\_

13. **Retirement Pensions, Superannuation, Annuities and RRIF Withdrawals**  
 • **Exclude** RRSP withdrawals (see Section W, Q.2, page 57).

14. **Personal Income Tax Refunds**

15. **Other Money Income**, e.g., alimony, separation allowance, child support, retirement allowances, severance pay, income maintenance plan payments, scholarships, bursaries and income from outside Canada

Specify \_\_\_\_\_

16. **Other Money Receipts**, e.g., money gifts received from persons outside your household, cash inheritances and life insurance settlements

Specify \_\_\_\_\_

Breakdown Unavailable

Subtotal (Q.2 to Q.16, excluding Q.4.1 and Q.11)

B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B
B	B	B	B	B

**To calculate the B total:**

1. Add the subtotals for each column.
2. Use the "Breakdown Unavailable" amount where there is no subtotal.

Section U Total:

B

## V. Personal Taxes, Security and Money Gifts

Ask each of the following questions for each member 15 years or over on December 31, 1997 (born before 1983).

Amounts for persons 14 years or under (born after 1982) should be reported in a parent's column.

Note: Part-year members should report only for the period that they were a member of this household in 1997.

Enter Person's First Name →

Transfer Person No. from Section U →

In 1997, how much did each member pay for:

### Personal Taxes

1. Income tax on 1997 income?

- Exclude taxes paid in 1998 on 1997 income.

2. Income tax on income for years prior to 1997?

- Include taxes paid in 1997 on income earned in 1996 or earlier.

3. Other personal taxes, e.g., gift tax?

Specify \_\_\_\_\_

	_  _	_  _	_  _	_  _
	\$	\$	\$	\$
	A	A	A	A
	A	A	A	A
	A	A	A	A

### Security and Employment-Related Payments

- Exclude RRSP contributions (see Section W, Q.2, page 57).

4. Premiums on life, disability, term and endowment insurance?

- Include loan and group insurance.
- Report premiums for persons 14 years or under (born after 1982) by the household member paying the premiums.

5. Annuity contracts and transfers to RRIFs?

6. Employment insurance (deductions from pay)?

7. Government retirement or pension fund, including federal, provincial and municipal government funds?

8. Canada/Quebec pension plan?

9. Other retirement or pension funds?

10. Dues to unions and professional associations?

	A	A	A	A	A
	A	A	A	A	A
	A	A	A	A	A
	A	A	A	A	A
	A	A	A	A	A
	A	A	A	A	A
	A	A	A	A	A



## V. Personal Taxes, Security and Money Gifts

Enter Person's First Name →

### Money Gifts, Contributions and Support Payments

11. In 1997, how much did each member spend on **money gifts, contributions and support payments** to persons who were **not household** members:

11.1 Money given to persons living in Canada?

11.2 Money given to persons living outside Canada?

12. In 1997, how much did each member spend on **charitable contributions** to:

12.1 Religious organizations?

12.2 Other charitable organizations, e.g., the United Way, heart fund?

Subtotal (Q.1 to Q.12.2)

A	A	A	A	A
A	A	A	A	A
A	A	A	A	A
A	A	A	A	A

**To calculate the A total:**

Add the subtotals for each column.

Section V Total:

A

## W. Change in Assets

- **Include** the change in assets for each member of the household only for the period of time in 1997 when the person was a member of your household.
- **Report** answers as a total of the information reported by individual household members.

Inform the respondent that this information is used to complete the household budget and to balance revenues and expenditures. Ask the respondent for the changes in assets over the year - **do not ask for the level of assets.**

1. In 1997, what was the **NET CHANGE** (increase or decrease) in the following household assets:

1.1 Cash held in accounts in banks and trust and loan companies, and cash on hand?

- **Include** guaranteed investment certificates (GICs).
- **Exclude** RRSPs (see Q.2).

1.2 Money owed to your household by persons outside your household?

- **Exclude** interest received (see Section U, Q.5, page 53).
- **Report** principal amounts or change in principal amounts.

1.3 Money deposited as a pledge against future purchases of goods and services?

If a net increase in 1997 report here \$	If a net decrease in 1997 report here \$
C	D
C	D
C	D

2. In 1997, how much did your household **contribute** to and **withdraw** from RRSPs?

Contributions \$	Withdrawals \$
C	D

3. In 1997, what was the value of your household's **purchases** and **sales** of the following:

- **Exclude** interest received on sales (see Section U, Q.5, page 53).

3.1 Savings bonds and treasury bills?

3.2 Publicly traded stocks, mutual funds and shares in investment clubs?

3.3 Sales of personal property not traded in on new items in 1997?

- **Exclude** sales of appliances and vehicles (see Sections L, Q and R).

Purchase \$	Sale \$
C	D
C	D
	D

Section W Totals:

C	D
---	---

## X. Unincorporated Business

- **Include** major improvements (including land improvements).
- **Report** your household's share in the case of partnerships.

1. In 1997, did any members of your household have investments in unincorporated businesses, professional practices, farms or rental property?

1  Yes

2  No → **Go to Section Y**

In 1997, how much did your household:

1.1 Repay on the principal of your mortgage(s) or loan(s)?

- **Include** all lump sum payments.

\$	C	
----	---	--

1.2 Pay to purchase assets?

- **Include** machinery, trucks, cars, buildings and other income-earning properties.

\$	C	
----	---	--

1.3 Borrow for the business or farm?

- **Include** mortgages and loans.

\$		D
----	--	---

1.4 Receive (after commissions) from the sale of assets?

- **Include** machinery, trucks, cars, buildings and other income-earning properties.

\$		D
----	--	---

1.5 Estimate for capital cost allowance (depreciation) in the determination of net income from self-employment?

\$		D
----	--	---

2. In 1997, what was the **NET CHANGE** (increase or decrease) in the following:

2.1 Accounts receivable?

2.2 Accounts payable?

	If a net increase in 1997 report here \$	If a net decrease in 1997 report here \$
	C	D
	D	C

**NOTE:** In Q.2.2, the "C" and "D" are deliberately reversed.

<b>Section X Totals:</b>	C	D
--------------------------	---	---

## Y. Loans and Other Debts

- **Include** any loans received in 1997 for which payment does not begin until after 1997.
- **Exclude** mortgages and loans on property (see Sections G, K and X) and loans pertaining completely to business (see Section X).

1. In 1997, did you have any loans with **regular payments**?

- **Include** installment payment plans and student loans if repayment has begun.
- **Exclude** lines of credit, credit cards and accounts, and any outstanding bills (see Q.6 to Q.9).

1  Yes

2  No → **Go to Q.6**  
(page 60)

Ask Q.2 to Q.5.1 for all loans before asking Q.6

### Loans with Regular Payments

Enter loan number →

	Loan A	Loan B	Loan C	Loan D	Loan E
Please provide the following details for each loan:					
2. Description, e.g., car, boat.					
3. Was this loan taken out in 1997?	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.4</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.4</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.4</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.4</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.4</b>
3.1 What was the amount of the loan? \$	D	D	D	D	D
4. How much were the total payments made on this loan in 1997? • <b>Include</b> lump sum payments. \$	C	C	C	C	C
5. Was there any additional amount borrowed in 1997 on this loan?	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.6</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.6</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.6</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↔ <b>Go to Q.6</b>	1 <input type="radio"/> Yes 2 <input type="radio"/> No ↓ <b>Go to Q.6</b>
5.1 What was the additional amount? \$	D	D	D	D	D

## Y. Loans and Other Debts

<b>Other Money Owed by your Household</b>  <ul style="list-style-type: none"> <li>• <b>Include</b> home equity loans, lines of credit and student loans.</li> <li>• <b>Exclude</b> money owed or paid in connection with business or mortgage on property.</li> </ul> <p>In 1997, how much did your household owe on the following:</p>	<b>Amount Owed</b> <b>\$</b>		<b>Difference in Amount</b> <b>Owed Between January 1, 1997</b> <b>and</b> <b>December 31, 1997</b> <b>\$</b>		<b>Amount</b> <b>of Interest</b> <b>Charges in</b> <b>1997</b> <b>\$</b>
	<b>January 1,</b> <b>1997</b>	<b>December 31,</b> <b>1997</b>	<b>If January 1,</b> <b>1997</b> amount is larger, enter difference here	<b>If December 31,</b> <b>1997</b> amount is larger, enter difference here	
<b>6. Loans from financial institutions</b> <ul style="list-style-type: none"> <li>• <b>Include</b> lines of credit and student loans that are not yet being repaid.</li> </ul>			<b>C</b>	<b>D</b>	<b>C</b>
<b>7. Credit cards from financial institutions</b>			<b>C</b>	<b>D</b>	<b>C</b>
<b>8. Credit cards and other debt with stores, service stations and other retail establishments</b> <ul style="list-style-type: none"> <li>• <b>Include</b> all revolving budget accounts</li> </ul>			<b>C</b>	<b>D</b>	<b>C</b>
<b>9. Rents, taxes and other bills, e.g., hospital</b>			<b>C</b>	<b>D</b>	<b>C</b>

	<b>C</b>	<b>D</b>
<b>Section Y Totals:</b>		



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K. Owned Secondary Residences and Other Property .....	23-25
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M. Home Operation .....	32-33
N. Food and Alcohol .....	34-35
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P. Personal and Health Care .....	39-40
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# Balance Worksheet

Section Content	Page	Expenses	Income	Credits	Debits
		A	B	C	D
E. Owned Principal Residences	14				
F. Purchase and Sale of Homes	15				
G. Mortgages on Owned Principal Residences	16				
H. Renovations and Repairs of Owned Principal Residences	18				
I. Rented Principal Residences	20				
J. Utilities and Other Rented Accommodation	21				
K. Owned Secondary Residences and Other Property	25				
L. Household Furnishings and Equipment	31				
M. Home Operation	33				
N. Food and Alcohol	35				
O. Clothing	38				
P. Personal and Health Care	40				
Q. Automobiles and Trucks	44				
R. Recreational Vehicles and Transportation Services	47				
S. Recreation, Reading Materials and Education	50				
T. Tobacco and Miscellaneous	52				
U. Personal Income	54				
V. Personal Taxes, Security and Money Gifts	56				
W. Change in Assets	57				
X. Unincorporated Business	58				
Y. Loans and Other Debts	60				
1. Subtotals		<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
2. If Credits (C) are greater than Debits (D) enter difference (C - D)					
3. If Debits (D) are greater than Credits (C) enter difference (D - C)					
4. Totals (lines 1 + 2 + 3)		<b>T1</b>	<b>T2</b>		
5. Difference (T1 - T2), if negative omit sign					
6. Allowable difference (10% of T1 or T2, whichever is larger)					
7. Amount over allowable difference (line 5 - line 6), if negative enter 0					
8. Is it balanced (is Q.7 = 0)?		1 <input type="radio"/> Yes			
		2 <input type="radio"/> No			
9. Percentage out of balance (line 5 ÷ the larger of T1 or T2) x 100					

## Balance Worksheet

Section Content	Page	Expenses	Income	Credits	Debits
		A	B	C	D
E. Owned Principal Residences	14				
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3. If Debits (D) are greater than Credits (C) enter difference (D - C)					
4. Totals (lines 1 + 2 + 3)		<b>T1</b>	<b>T2</b>		
5. Difference (T1 - T2), if negative omit sign					
6. Allowable difference (10% of T1 or T2, whichever is larger)					
7. Amount over allowable difference (line 5 - line 6), if negative enter 0					
8. Is it balanced (is Q.7 = 0)?		1 <input type="radio"/> Yes			
		2 <input type="radio"/> No			
9. Percentage out of balance (line 5 ÷ the larger of T1 or T2) x 100					

# Records

## Record of Visits

Visit Number	Date	Time	Comments

## Record of Interviews

Interview Number	Date	Month	Began	Ended
1		0	:	:
2		0	:	:
3		0	:	:
4		0	:	:

**Interviewer's Name**  
*(Please print)*

**Interviewer's Telephone Number**

**Interviewer No.**

| | | | | | | | | | | | | | | | | | | | | |