

# OFM Census Sheet D – Summary Tabulation

City/Town:		<b>Total Population:</b>	
Year/Ordinance:			

(Lines 1+2)

Units Per Structure	(1) Total Housing Units	(2) Vacant Housing Units	(3) Occupied Housing (1)-(2)	(4) Population	Pop. Per Occ. HU (4)/(3)	Percent Occupied (3)/(1)	Percent Vacant (2)/(1)
1-Unit Structures							
2-Unit Structures							
3-Unit Structures							
4-Unit Structures							
5 or more Units							
Manufactured Homes							
Special*							
1. Totals							

\*Special Housing: Unusual living quarters not generally considered a housing unit (e.g., boats, boxcars, tents, etc.). Only counted when occupied by person(s) meeting "resident" criteria. Specify type of housing in comments section below.

Group Quarters	Number of Facilities	Population
Nursing/Convalescent Homes		
College Dormitories		
Mental/Correctional Institutions		
Military Installations (e.g., barracks, BEQ)		
Other (Specify):		
2. Total Group Quarters		

Census Costs**	Number of Staff <i>If known</i>	Hours Worked <i>If known</i>	Cost/Estimated Value
City staff w/o additional pay and/or volunteer staff			\$
City staff and/or hired staff/consultant with payment			\$
Transportation, supplies, etc. <i>if not included above</i>			\$
Total			\$

\*\*This information is used to provide cities with an estimate of how much it costs to census. Your assistance in providing this information is valuable and appreciated.

Did the enumerators collect additional information or perform other tasks during the census?    Yes    No    *(circle one)*

<b>Comments:</b>	
<b>Census Administrator or Contact Person</b>	
Name	Signed: _____ <i>(Mayor)</i> <span style="float: right;"><i>(Date)</i></span>
Telephone #:	Attest: _____ <i>(City/Town Clerk or Census Administrator)</i> <span style="float: right;"><i>(Date)</i></span>
Days/Hours of Operation:	