



State of Palestine
Palestinian Central Bureau of Statistics
Household Expenditure and Consumption Survey, 2023

All information in this questionnaire is for pure statistical purposes only. It is considered confidential in accordance to General Statistical Law of 2000

Section 1: Questionnaire Information

ID00	Questionnaire Serial Number in the Sample	□□□□	ID04	HH Number in the Enumeration Area	□□
ID01	Governorate:.....	□□	ID05	Building Number	□□
ID02	Locality:.....	□□□□□□	ID06	HH Unit Number in the Building	□□
ID03	Number of Enumeration Area	□□□	ID07	Year	□□□□
ID08	Registration month	□□			
ID09	The location of the housing unit according to the classifications of Oslo (West Bank)	1. Region A 2. Region B 3. Region C			□

Household Identification

QC1					
1	Name of the Head of the HH			
2	Phone Number	□□□□□□□□□□			
3	Mobile Number	□□□□□□□□□□			

QC2	Filling up the questionnaire data (result of the interview)	1. Done Completely	6. HHU does not Exist	□
		2. Partially Completed	7. HH Unit not Occupied	
		3. Refused / reason	8. No Information	
		4. HH traveled	9. Other\ Specify:.....	
		5. No Body at HHU		

QC3	Household size	□□	QC4	Males	□□	QC5	Females	□□
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Fieldwork Staff

	interviewer	Supervisor	Editor	Encoder	Data entry
	QC6	QC7	QC8	QC9	QC10
1.Name					
2.Card Number					

Section 2: Household Roster

All household 's members															
D 1	D2	D9					D10	D11						D12	D13
		1	2	3	4	5		1	2	3	4	5	6		
Person ID Code	Names: Write the names of persons who usually live in this HH.	If (name) has health insurance, which of the following types have a (name). Instructions: Put the number (1) If the name has this type of insurance					Did (name) suffering from chronic disease and receives treatment on an ongoing basis? Diabetes, blood pressure, heart disease, cancer, ulcers, asthma (crisis), epilepsy, and other	Does (name) suffer difficulty in						During the past 6 months, did you receive health services (examinations, treatment...) except for dental treatment? 1.Yes 2.No, according to age group: Less than 5 years > D14 5 years or older > D18 18 years or older > D21	Who is the provider of the last healthcare service received? 1. Palestinian Ministry of Health 2. UNRWA (Relief Agency) 3 .NGOs 4 .Private sector 5 .Israeli sector 6. Other/Select According to age group: Less than 5 years > D14 5 years or older > D18 18 years or older > D21
		governmental	UNRWA	PRIVATE	Israeli	OTHER		1. Yes 2. No	vision	Hearin g	Movement and use of fingers	Remembering and focus	Communication		

Section 3: labor force

Section 3: labor force			Members 10 yrs+					
D0	Name of Data Giver	D0_1 <input type="checkbox"/>						
D1	D2	L1	L2	L3			L4	
Person ID Code	Names: Write the names of persons who usually live in this HH.	Relation to labor force 1.Employee 2.Temporarily absent <u>Not working and want to work (Previously worked)</u> 3.Looked for a job in the past four weeks>>L4 <u>Not working and want work (NEVER WORKED)</u> 4.Looked for a job in the past four weeks>>L4 <u>Not working and don't want to work because:</u> 5.Searched for work in past 4 weeks but cuurently not avaiable for work 6.Didn't search for work in past 4 weeks and available (last week) 7.Willing to work in next 4 weeks but currently not looking and not ready for work. 8.Studying/ training 9.Housekeeping 10.Disability/ old / illness 11.Availability of income/ retirement 12.Others If answers were choices 5-12, move to next person	Usual working hours per week 1.(1-14) hrs 2.(15-34) hrs 3.(35hrs+) >>L5	During the last 4 weeks, did (name) wants to change the current one A. Search for another job because he\she wants to change the current one B. Search for extra job\ extra working hours C. Try to start a personal\ private business 1.yes 2. No After answering this question move to L5			For how long has (name) been without work 1.less than 3 months 2.(3-5) months 3.(6-8) months 4.(9-11) months 5.(1-2) yrs 6.(3-4) yrs 7.(5-9) yrs 8. (10yrs+)	
				A	B	C		MOVE TO NEXT PERSON IF L1 =4

Section 3: labor

Members 10 yrs+						
D1	D2	L12		L13		
Person ID Code	Names: Write the names of persons who usually live in this HH.	Occupation		Economic activity		
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>

Section 4: Dwelling

H04	Name of data provider:	D1	<input type="checkbox"/> <input type="checkbox"/>
H1	What is the type of the HH unit	<input type="checkbox"/>	1.Villa 2.Traditional house 3.Flat 4.Separate room 5.Tent 6.Marginal 7.Caravan 8.Other\ Specify
H2	Type of occupancy of this dwelling	<input type="checkbox"/>	1.For residence only 2.For residence and work
H3	What is the type of occupancy of this dwelling?	<input type="checkbox"/>	1.owned >>H3_1 2.Rented without furniture >>H9 3.Rented with furniture >>H9 4.Without payment >>H10 5.provided by the employer >>H10 6.Other\ Specify>>H10
H3_1	The ownership of the dwelling is		1.Individually 2. Jointly with spouse 3. Jointly with others
H4	If your house is owned, how did you acquire it?	<input type="checkbox"/>	1.Inherited from a family >>H10 2. Personal building 3. purchased by a broker 4. Purchased by real estate foundation 5. Purchased by the contractor 6.Purchased by a family member 7. Purchased by a friend 8.Purchased by association 9.Other, specify.....
H5	What is the main source of funding for the acquisition of housing?	<input type="checkbox"/>	1.Savings >>H10 2. Loan >H6 3. Monthly payments to the contractor>>H7 4. Monthly payments of construction supplies>>H7 5. Family legacy >>H10 6. Other, Specify..... >>H10
H6	What is the source of the loan?	<input type="checkbox"/>	1.Bank (commercial) 2. Bank (Islamic) 3. relatives and friends 4. lending institution 5.Other, Specify.....
H7	1.How much the monthly payment	
	2. currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$
H8	Are the payments for housing completed?	<input type="checkbox"/>	1.Yes > H10 2.No >H10
H9	1.What is the rental monthly value?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	2.Currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$
H10	1.What is the monthly estimated rental value of this dwelling	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(If you rent such a house at the present time, how much will the estimated current monthly rent be?)
	2.Currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$
H10_1	3. What is the estimated value of the house you own (if you want to sell it)?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(if the answer in H3 = 1)
	4. Currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$

H11	Estimated age years of this dwelling	<input type="checkbox"/>	1. Less than one year 2. 1-4 years 3. 5-9 years 4. 10-19 years 5. 20 years and more
H12	Principal material of the walls	<input type="checkbox"/>	1.Stone 2.Stone and cement 3.Old Stone 4.Concrete bricks 5.Concrete (bench) 6. mud 7.cloth\ animal leather\canvas 8.other
H13	Principal material of the ceiling	<input type="checkbox"/>	1.reinforced concrete casting 2.metallic 3.Wood 4. Asbestos / fiber cement 5.Straw / palm fronds 6. Other/specify.....
H14	Principal material of the floor	<input type="checkbox"/>	1. Earthen floor 2.wood 3.Tiles 4.marble 5.cement 6. Brick / stone 6. other
H14-1	The area of the owned property in square meters	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
H14-2	The area of the owned land on which the property is located, in square meters	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

	Room Type	H15. How many [ROOMS] do you have? write a number	H16. Does [ROOM] have piped water? 1. Yes 2. No
1	Bedroom	<input type="checkbox"/> <input type="checkbox"/>	
2	Separate bedroom for girls (10 – 19) years	<input type="checkbox"/> <input type="checkbox"/>	
3	Separate bedroom for boys (10 – 19) years	<input type="checkbox"/> <input type="checkbox"/>	
4	Salon	<input type="checkbox"/> <input type="checkbox"/>	
5	Guest room	<input type="checkbox"/> <input type="checkbox"/>	
6	Kitchen	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
7	Bathroom (for the purpose of bathing)	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
8	Toilet	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
9	Shared bathroom and toilet	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
10	Excluding the kitchen, bathroom and toilet, how many rooms are there in total in this house write number	<input type="checkbox"/> <input type="checkbox"/>	
11	Store room	<input type="checkbox"/> <input type="checkbox"/>	
12	garage	<input type="checkbox"/> <input type="checkbox"/>	

SERVICE	H17: Main source of [SERVICE] used by this household	H18: In the past month, Are there interruptions in the supply of [SERVICE] from the public network? (for the dwelling connected to the public networks, water 1	H19: In the past month, when available, for how many hours per-day is the [SERVICE] available
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			or 2, electricity 1) 1.No interruption (service continuously available) 2. Service disrupted once a month 3. Service disrupted once a week 4. Service disrupted more than once a week 5. Service disrupted on daily basis (fixed hours of service a day) 6. Network not operating 7. Other/ specify.....	(for the dwelling connected to the public networks, water 1 or 2, electricity 1) 1. Less than one hour per-day 2. One hour per-day 3 (2-4) hours per-day 4.(5-9) hours per-day 5.(10-23) hours per-day 6. All day 7. Do Not Know 9. Not applicable
1.Water	1.Local Public Network 2.Israeli Network 3.Protected artesian well/protected spring 4.Unprotected artesian well/unprotected spring 5.Collected rain-water wells 6.Tanks (private) 7.Mineral water bottles 8.Public tap 9.Other, Specify.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.Electricity	1.Public Network 2.Private generator 3.Shared generator 4. Photovoltaic cells 5.other (specify) 6.No Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.Sewage system	1.Public network 2.Porous Cesspit 3.Tight cesspit 4.No Sewage	<input type="checkbox"/>		

H20	Of the following sources, what represents a source of drinking water for your family? 1.yes 2.no	<input type="checkbox"/>	1.Water transported through pipes into the dwelling 2. Protected well 3.Tanks/ vehicle with small tank/ barrel 4. Rain water 5. Bottled water 6. Other/ specify
H21	How does your household mainly dispose of its garbage?	<input type="checkbox"/>	1. Collected by the municipality or contractor for the municipality 2.Put in designated container 3.Thrown outside the HH unit 4. It is dumped in landfill 5. Burnt 6. Used for special purposes 7.Other\Specify

H22	What is the main source of energy used for by this HH		
	A. Cooking	<input type="checkbox"/>	1.Gas. 2. Kerosene. 3. Electricity. 4. Wood. 5. Other/ specify.....
	B. Heating	<input type="checkbox"/>	0.None 2.Gas. 2. Kerosene. 3. Electricity. 4. Wood. 5. Diesel. 6. Coal. 7. Other/ specify.....\
	C. Air conditioning	<input type="checkbox"/>	0. None 1.Electricity. 2. Other/ specify.....
	D. Baking	<input type="checkbox"/>	0. None 1.Gas. 2. Electricity. 3. Wood. 4. Jift (recycled olive remnants after oil pressing). 5. Coal 6. Other / specify.....
	E. Heating water	<input type="checkbox"/>	1.Solar energy. 2. Gas. 3. Kerosene. 4. Electricity. 5. Wood. 6. Coal. 7. Diesel. 8. Other/ specify.....
H22-1	Are soap and water available when washing hands?	<input type="checkbox"/>	1. Soap and water together 2. Water only 3. Soap only 4. Not available, both
H22-2	Does the family own photovoltaic cells to generate electricity?	<input type="checkbox"/>	1.Yes 2.No > H23
H22-3	What is the electrical capacity of the cells? (unit in kW)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
H22-4	1. What is the cost of the photovoltaic cells project?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	2. Select the type of currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$

H23	How far is your home from the following services and what is the most used means of transportation and duration of travel	1.Less than 1 km 2. (1-5) km 3.More than 5 km 4.NA			
	1.Public transportation	<input type="checkbox"/>	9. youth club	<input type="checkbox"/>	
	2.Nearest private doctor clinic	<input type="checkbox"/>	10. Police centre	<input type="checkbox"/>	
	3.Health center (mother and child)	<input type="checkbox"/>	11. Bank youth club	<input type="checkbox"/>	
	4.Nearest public or private hospital	<input type="checkbox"/>	12. Fire station Police centre	<input type="checkbox"/>	
	5.Pharmacy	<input type="checkbox"/>	13. Nearest food purchase center	<input type="checkbox"/>	
	6.Nearest elementary school	<input type="checkbox"/>	14. Nearest shopping center	<input type="checkbox"/>	
	7.Nearest secondary school	<input type="checkbox"/>	15. House of the Elderly	<input type="checkbox"/>	
	8. Center / club for the elderly	<input type="checkbox"/>	16.Social service center	<input type="checkbox"/>	

HOUSEHOLD DURABLES

LINE NUMBER	Commodity	H24
		What is the total number of ...DURABLE GOOD]... owned by the members of this household?
01	Privacy cars	<input type="checkbox"/> <input type="checkbox"/>
02	Public vehicles	<input type="checkbox"/> <input type="checkbox"/>
03	Motorcycle	<input type="checkbox"/> <input type="checkbox"/>
04	Tuk Tuk	<input type="checkbox"/> <input type="checkbox"/>
05	Refrigerator	<input type="checkbox"/> <input type="checkbox"/>
06	TV (LCD/LED/3-D)	<input type="checkbox"/> <input type="checkbox"/>
36	Digital Terrestrial Television (DTT) / Internet Protocol Television (IPTV)	<input type="checkbox"/> <input type="checkbox"/>
07	Regular washing machine	<input type="checkbox"/> <input type="checkbox"/>
08	Automatic washing machine	<input type="checkbox"/> <input type="checkbox"/>
09	Solar panel	<input type="checkbox"/> <input type="checkbox"/>
10	Solar Boiler	<input type="checkbox"/> <input type="checkbox"/>
11	Satellite	<input type="checkbox"/> <input type="checkbox"/>
37	Computers (PC)	<input type="checkbox"/> <input type="checkbox"/>
12	Computers (laptop)	<input type="checkbox"/> <input type="checkbox"/>
15	IPAD/Tablets	<input type="checkbox"/> <input type="checkbox"/>
13	Smartphones	<input type="checkbox"/> <input type="checkbox"/>
14	Play station/ X-Box	<input type="checkbox"/> <input type="checkbox"/>
16	Stove (gas, electric or kerosene)	<input type="checkbox"/> <input type="checkbox"/>
17	Radio	<input type="checkbox"/> <input type="checkbox"/>
18	Phone (landline)	<input type="checkbox"/> <input type="checkbox"/>
19	Cellphone (not smart phone)	<input type="checkbox"/> <input type="checkbox"/>
20	Dishwasher	<input type="checkbox"/> <input type="checkbox"/>
21	Electric heater	<input type="checkbox"/> <input type="checkbox"/>
22	Freezer	<input type="checkbox"/> <input type="checkbox"/>
23	Central heating	<input type="checkbox"/> <input type="checkbox"/>
24	Heater	<input type="checkbox"/> <input type="checkbox"/>
25	home library	<input type="checkbox"/> <input type="checkbox"/>
26	Water Filter	<input type="checkbox"/> <input type="checkbox"/>
27	Air conditioner	<input type="checkbox"/> <input type="checkbox"/>
28	LC split unit	<input type="checkbox"/> <input type="checkbox"/>
29	regular TV	<input type="checkbox"/> <input type="checkbox"/>
30	Electric vacuum cleaner	<input type="checkbox"/> <input type="checkbox"/>
31	Dehumidifier	<input type="checkbox"/> <input type="checkbox"/>
32	recorder or CD-player / DVD	<input type="checkbox"/> <input type="checkbox"/>
33	Microwave	<input type="checkbox"/> <input type="checkbox"/>
34	Electric fan	<input type="checkbox"/> <input type="checkbox"/>
35	cooler	<input type="checkbox"/> <input type="checkbox"/>

H30	What main type of Cooling (Conditioning) does your Household have?	<input type="checkbox"/>	1. Central conditioner 2.Air conditioner 2.Fan 4. Other\Specify 5. Not available
H31	What type of Internet did your household have	<input type="checkbox"/>	1. The Palestinian fixed communication network (DSL access line) and local Internet providers network 2. The third generation mobile network (3G) 3. The second generation mobile network (2G) 4. Wireless internet networks via Wi-Fi and microwave technology (Antenna tower) 5. Optical Fiber (Fiber/Fixed) 6. Sharing the Internet from family and neighbors (regardless of the source) 7. Israeli mobile companies (Israeli internet chips) 8. Israeli Internet companies (fixed) 9. Others/Select 10. There is not
H32	How many SIM cards does the household own of the following types?		
	1. Palestinian	<input type="checkbox"/> <input type="checkbox"/>	Number
	2. Israeli	<input type="checkbox"/> <input type="checkbox"/>	Number

H33	Does the housing suffer from any of the following: 1.Yes 2.No	<input type="checkbox"/>	1.Shortage in rooms number
		<input type="checkbox"/>	2.Shortage in rooms areas
		<input type="checkbox"/>	3.Shortage in housing utilities (garden, garage, cars parks,,etc)
H34	Do several or all of house rooms including corridors, and kitchen, suffer from the following: 1.Yes 2. No	<input type="checkbox"/>	1.Humidity
		<input type="checkbox"/>	2.Cold
		<input type="checkbox"/>	3.The difficulty of heating in winter
		<input type="checkbox"/>	4.Poor ventilation
		<input type="checkbox"/>	5.High temperatures in the summer
		<input type="checkbox"/>	6.Cracks housing / ramshackle

H35	H35_A Is any of the following issues cause a serious problem in the area around the house? 1.No > move to next line 2. Rarely > move to next line 3. Sometimes 4. Mostly	H35_B what is the most exposed time to this problem? 1."6 morning - 11:59 noon" 2."12 noon-7:59 evening" 3."8 evening -5:59 morning" 4.No determined time	H35_C what is the main source of this problem?
(1) Noise	<input type="checkbox"/>	<input type="checkbox"/>	1.Traffic 2.aircraft 3.quarries and cutting stones 4. building 5.industrial activities 6. Other business, select
(2) Smells	<input type="checkbox"/>	<input type="checkbox"/>	1.wastewater 2. landfill 3. public baths 4. transportation 5. agricultural waste (plant and animal) 6. Other industrial activities 7.Others, select
(3) Dust	<input type="checkbox"/>	<input type="checkbox"/>	1.unpaved roads 2. quarries and cutting stones 3. Building 4. industrial activities other works 5.Others, select
(4) Smoke	<input type="checkbox"/>	<input type="checkbox"/>	1.industrial activities 2. burn waste 3.transports 4. Building 5. Other works, select

Section 5:

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
01	Cereals and their products and bread												
	Short grain rice (shaqha or other)	0101											
	Long grain rice (uncle bean's, diamond, basmati)	0102											
	wheat	0103											
	Local wheat flour	0104											
	Imported white flour	0105											
	Qarshala - cake with sesame	0107											
	cake with pressed dates or other	0108											
	Barazek	0109											
	Pasta of all kinds (long, short, mixed pasta)	0110											
	Vermicelli	0111											
	Stuffed biscuits	0112											
	Salted or sweetened biscuits	0113											
	semolina	0114											
	bulgur	0115											
	Dry freekeh (grain or ground)	0116											
	Starch	0117											
	Cake (Gateau)	0118											
	Products for children (Cerelac, Farly's, etc.)	0119											
	Breakfast cereals (such as corn flakes)	0120											
	Popcorn - corn chips	0121											
	Middle east sweets (kunafa, baklava...etc.)	0122											
	Ready Maftool	0123											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Other types of cereals, their products and breads	0124											
	Pastry dough	0125											
	Green freekeh	0126											
	Barley grains	0127											
	Oats	0128											
	Plain/chocolate wafer	0129											
	Ground rice	0130											
	Bisli chips	0131											
	Ready mixture for desserts	0132											
	croissant	0133											
	Donuts	0134											
	Pita bread	0136											
	Taboon bread	0137											
	Shrak bread	0138											
	Other types of bread (French baguette, white or black toast)	0139											
	Qatayef dough	0140											
	Indomie	0141											
	Pretzel	0142											
	Grain processing expenses	0143											
	Baking fee	0144											
02	Meat and poultry												
	Fresh lamb and goat meat	0201											
	Frozen lamb and goat meat	0202											
	Fresh beef	0203											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Frozen beef	0204											
	Fresh camel meat	0205											
	Fresh or frozen rabbit meat	0206											
	Fresh chicken without feathers	0207											
	Frozen chicken	0208											
	Fresh turkey	0209											
	Pigeons (Zaghalil), fresh or frozen	0210											
	Other fresh or frozen birds	0211											
	Processed sheep/cow meat (hamburger, mortadella, sausages, etc.)	0212											
	Canned meats, except mortadella and sausages	0213											
	Fresh, frozen or canned pork	0214											
	fresh chicken's or turkey's liver	0215											
	Other meats	0216											
	Fresh chicken with feathers	0217											
	Frozen turkey meat	0218											
	Processed poultry meat (mortadella, sausages, schnitzel, etc.)	0219											
	Fresh sheep liver	0220											
	Fresh beef liver	0221											
	Intestines and limbs of the carcass	0222											
	Meat processing expenses	0223											
	ready Duck meat	0224											
	Frozen duck meat	0225											
	Fresh goose meat	0226											
	Frozen goose meat	0227											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Processed turkey meat (mortadella, sausages, etc.)	0229											
03	Fish and sea products												
	Fresh fish	0301											
	Frozen fish	0302											
	Salted fish	0303											
	Smoked fish	0304											
	Canned sardines	0305											
	Canned tuna	0306											
	Fresh or frozen shrimp	0307											
	Fish products (caviar, roe)	0308											
	Other types of fish	0309											
	Fish processing expenses	0310											
04	Dairy, milk products and eggs												
	condensed liquid milk	0402											
	Milk Powder	0403											
	Powdered milk for babies	0404											
	Yogurt- cans	0405											
	Yogurt- per kilo (local yoghurt)	0406											
	Buttermilk	0407											
	Labneh- cans	0408											
	Labneh -per kilo	0409											
	Soft white cheese (local)	0410											
	Boiled white cheese (local)	0411											
	Triangle creamy cheese	0412											
	Yellow cheese (per kilo)	0413											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Canned yellow cheese	0414											
	Yellow cheese packet	0415											
	Kashkaval cheese	0416											
	thick cream (cream)	0417											
	jameed (hard, dry yogurt)	0419											
	Other dairy products	0420											
	eggs	0421											
	Other canned cheese (canned cheese from stores)	0422											
	Fresh or pasteurized fruit-flavored milk	0423											
	fresh milk	0424											
	pasteurized milk	0425											
05	Oils and fats												
	olive oil	0501											
	Corn oil	0502											
	Sun flower oil	0503											
	Soybean oil	0504											
	Palm oil	0505											
	Vegetable ghee (such as Gazal ghee)	0506											
	Animal ghee (local)	0507											
	Other types of oils and fats	0508											
	Vegetable/animal butter	0509											
06	Fresh fruits												
	orange	0601											
	Mendelina, Clementine	0602											
	Pomelo	0603											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	grapefruit	0604											
	Lemon	0605											
	banana	0606											
	apples	0607											
	grapes	0608											
	watermelon	0609											
	melon	0610											
	apricot	0611											
	Plums of all kinds	0612											
	cherry	0613											
	peaches	0614											
	Strawberry	0615											
	pear	0616											
	Guava	0617											
	pomegranate	0618											
	fig	0619											
	prickly pear	0620											
	Persimmon	0621											
	Dates	0622											
	loquat	0623											
	pineapple	0624											
	Mango	0625											
	Coconut (fresh)	0626											
	Almond Green	0627											
	Other fresh fruits	0628											
	kiwi	0629											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
07	Canned fruits (preserved)												
	Canned pineapple	0701											
	Canned peaches	0702											
	Canned mixed fruits	0703											
	Other canned and preserved fruits	0706											
08	dried fruit												
	Dried figs (cotton)	0801											
	raisins	0802											
	dried dates	0803											
	Other dried fruits	0804											
	Dried Apricots	0805											
	Ajwa	0806											
09	Nuts												
	pistachio	0901											
	Sudanese pistachio	0902											
	almonds	0903											
	walnut	0904											
	watermelon seeds	0905											
	Pumpkin seed	0906											
	Ain Shams seeds	0907											
	hazelnut	0908											
	cashew	0909											
	Roasted chickpeas	0910											
	Chestnut	0911											
	Mixed nuts	0912											
	Other types of nuts	0913											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Indian mixed nuts	0914											
10	Legumes and fresh vegetables												
	Tomato	1001											
	cucumber	1002											
	Armenian cucumber	1003											
	carrot	1006											
	eggplant	1007											
	zucchini	1008											
	squash	1009											
	pumpkin	1010											
	Lima Beans	1011											
	Green okra	1012											
	green fava Beans	1013											
	Green mallow	1014											
	Sweet green pepper	1015											
	spinach	1016											
	cauliflower	1017											
	cabbage	1018											
	Green Beans	1019											
	Green peas	1020											
	Lettuce	1021											
	grape leaves	1022											
	Turnip	1023											
	Yellow corn (corn)	1024											
	mushroom	1025											
	Green thyme	1027											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Green sage	1028											
	Other types of legumes and fresh vegetables	1030											
	Cauliflower leaves	1031											
	Gundelia	1034											
	Fennel	1035											
	radish	1036											
	green onion	1037											
	Green garlic	1038											
	Unpressed green olives	1039											
	avocado	1040											
	Unpressed black olives	1041											
	hedge mustard leaves	1042											
	Olive pressing fee	1043											
	Malva pusilla leaves	1044											
12	Frozen vegetables												
	Frozen green peas	1201											
	Frozen green beans	1202											
	Mixed vegetables	1203											
	Other frozen vegetables	1204											
	frozen Green peas with carrots	1205											
	Frozen green okra	1206											
13	Dried or canned legumes and vegetables												
	Lentils	1301											
	Crushed lentils	1302											
	Dry chick peas	1303											
	Dry fava beans	1304											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Dry sweet peas	1305											
	Dry peas	1306											
	Dry beans	1307											
	Dried mallow	1308											
	Dry okra	1309											
	Dry yellow corn	1310											
	Lupine	1311											
	Other legumes and vegetables dried	1312											
	Beans - canned beans	1313											
	Chickpeas - canned or ground	1314											
	Kidney beans (canned)	1315											
	Peas (canned)	1316											
	Other canned legumes	1317											
	Dry onions	1318											
	Dry garlic	1319											
	Dried thyme	1320											
	Green beans (tinned)	1321											
	Green peas (tinned)	1322											
	Mixed vegetables (canned)	1323											
	Tomato paste or solid (tinned)	1324											
	Other canned vegetables	1325											
	Mushroom (canned)	1326											
	The cost of grinding thyme	1327											
	Falafel dough	1328											
	Other canned legumes and vegetables	1329											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Processing fees for legumes and other dried or canned vegetables	1330											
14	Tubers (potatoes)												
	potato	1401											
	sweet potato	1402											
	Frozen or canned potato slices	1403											
	Other tubers (potatoes).	1405											
	Potato products (potato chips)	1406											
15	Sugar, honey and candy												
	sugar	1501											
	Halawa	1502											
	Treacle of all kinds	1503											
	Jam of all kinds	1504											
	Turkish delight	1505											
	Honey	1506											
	Local chocolate	1507											
	Imported chocolate	1508											
	candy, sweets	1509											
	Toffee	1510											
	Chewing gum	1511											
	Candy per kilo (citrus, toffee, other types of sweets)	1512											
	Other sugar, honey and candy products	1513											
	Qamar Al-Din (made of apricot)	1514											
	Malban (made of grapes)	1515											
	Ice cream	1516											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Edible ice	1517											
	Taffy (number)	1518											
	Choco cans	1519											
	Chocolate cream	1520											
	ready Jelly cups	1521											
	cream caramel cups	1522											
	Fees for processing sugar, honey, jam and other sweets	1523											
16	Tea, coffee and cocoa												
	Tea (in kg)	1601											
	Tea packets (different packages)	1602											
	Tea bags	1603											
	Ground coffee	1604											
	Green seed coffee	1605											
	Instant coffee (Nescafe)	1606											
	cacao	1607											
	Others include tea, coffee and cocoa	1608											
	cappuccino	1609											
	Coffee creamer	1610											
	Choco	1611											
	Processing fees for tea, coffee and cocoa	1612											
17	Spices, salt and other foods												
	black pepper	1701											
	Mixed spices	1702											
	Cardamom	1703											
	cinnamon	1704											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Aniseed	1705											
	cumin	1706											
	sumac	1707											
	Other spices specified	1708											
	Fenugreek	1709											
	Black Seed (Nigella sativa)	1710											
	sesame	1711											
	Dried sage	1712											
	Dried chamomile	1713											
	Treated thyme	1714											
	salt	1715											
	lemon salt	1716											
	Tehina	1717											
	Green/black pressed olives	1718											
	Pine nut	1719											
	Soup with noodles	1720											
	Soup (cubes)	1721											
	Grated coconut	1722											
	Rose water	1723											
	vinegar	1724											
	jelly powder	1725											
	Caramel	1726											
	pickles	1727											
	ketchup	1728											
	mayonnaise	1729											
	yeast	1730											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Vanilla	1731											
	baking powder	1732											
	Sodium carbonate	1733											
	Baby food jars	1734											
	other Spices, salt ..etc	1735											
	Hot green pepper	1736											
	Safflower	1737											
	coriander	1738											
	Mint	1739											
	Green arugula	1740											
	Green ginger	1741											
	parsley	1742											
	Ready baking powder	1743											
	Diet meals	1744											
	Rosemary	1745											
	Liquid or powder cream	1746											
	Mastic	1747											
	Mahleb	1748											
	Cheese Rennet	1749											
	Hot sauce	1750											
	Sahlab powder	1751											
	Chicken stock powder, Maggi, Knorr	1752											
	Green Dill (Anethum graveolens)	1753											
	Processing fees for spices, salt and other foods	1754											
18	Prepared meals from outside the home												
	Hummus plate (chickpeas paste)	1801											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	A plate of Fava beans (foul)	1802											
	Falafel	1803											
	Various sandwiches	1804											
	Grilled chicken	1805											
	Other grilled meats	1806											
	Pastries (pie, manakish, pizza...etc.)	1807											
	Grilled or boiled corn	1808											
	Lupine, ready	1809											
	fruit juice	1810											
	Other prepared meals from outside the home	1811											
	ready Popcorn	1812											
	Fried chicken	1813											
	Ready-made salads of all kinds	1814											
	Kibbeh/Shishbarak	1815											
	balela	1816											
	Cups of iced juice	1817											
	hot drinks	1818											
19	Meals eaten inside the restaurant												
	Meals inside the restaurant	1901											
	Drinks inside the restaurant or café	1902											
	A hookah in a restaurant or café	1903											
20	Non-alcoholic drinks, juice and mineral water												
	Mineral water	2001											
	Liquid Manufactured juice	2002											
	Juice powder	2003											
	Concentrated liquid juice	2004											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Soft drinks/metal can	2006											
	Soft drinks/small bottle	2007											
	Soft drinks/family bottle	2008											
	Other drinks	2009											
	Natural fruit juice	2010											
	Energy drinks (Red Bull, XL,)	2011											
	Liquid choco	2012											
21	Tobacco, cigarettes and alcoholic beverages												
	Tobacco cured (Arabic)	2101											
	Tobacco, pipe (in can or packet)	2102											
	Local cigarettes	2103											
	Imported cigarettes	2104											
	Cigars	2105											
	Manufactured tobacco (Masell for waterpipes)	2106											
	tobacco (for waterpipes)	2107											
	Other types of tobacco and cigarettes	2110											
	beer	2111											
	whiskey	2112											
	Arak	2113											
	cognac	2114											
	Other alcoholic drinks	2115											
	Drugs/hashish	2116											
	E-liquid (sweetened juice) for electronic cigarette	2117											
	E-liquid (sweetened juice) for electronic hookah	2118											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
22	Self-produced goods that are consumed or gifted												
	wheat	2201											
	Lamb and goat meat	2202											
	Poultry	2203											
	Other birds	2204											
	Fish and sea products	2205											
	fresh milk	2206											
	Yogurt	2207											
	Labaneh	2208											
	White cheese	2209											
	jameed (hard, dry yogurt)	2210											
	eggs	2211											
	Fresh fruits	2212											
	Thyme	2213											
	green onion	2214											
	Fresh vegetables	2215											
	Tomato paste	2216											
	Pressed green or black olives	2217											
	olive oil	2218											
	Other from food	2219											
	Other from non-food	2220											
	clothes	2221											
	Water (collected water, spring)	2223											
	Butter	2225											
	Seeds (lentils, beans...etc.)	2226											
	Dry onions	2227											

Group No	Item Description of	Item Code	First Week		Second Week		Third Week		Fourth Week		Total monthly value	Total Monthly Quantity	1.kg 2.litre 3.number
			Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity			
	Dry garlic	2228											
	Other dried vegetables (mallow, etc.)	2229											
	Tobacco	2230											
	coal	2231											
	wood	2232											
	Olive dregs	2233											

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
23	Readymade men clothes						
	Men trouser	2301					
	Men shirt	2302					
	Men jacket	2303					
	Coat	2304					
	Men suite	2305					
	Trouser	2306					
	Men trouser	2307					
	Underwear	2308					
	Pajama	2309					
	socks	2310					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Cofieh	2311					
	Arabic suite(qumbaz)	2312					
	dishdasha	2313					
	Tie	2314					
	Sports suite	2315					
	Mens trousers Short (Short)	2317					
	Men's swimwear	2318					
	Gloves	2319					
	Hats	2320					
	Other	2316					
24	Clothes for women						
	women's dress	2401					
	Skirt	2402					
	Blouse	2403					
	Shirt	2404					
	Knitted Loose Jalabiya	2405					
	Jacket	2406					
	Women's sleepwear	2407					
	Underwear	2408					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Socks	2409					
	Dishdasha	2410					
	Women suit	2411					
	Women coat	2412					
	Pajama	2413					
	Jilbab	2414					
	Popular dress	2415					
	Trouser	2416					
	Isharb - headscarf	2417					
	women's swimwear	2419					
	Gloves	2420					
	hats	2421					
	Other	2418					
25	Clothes for children						
	Girls dress	2501					
	Girls coat	2502					
	Boys jacket	2503					
	Girls jacket	2504					
	Boys Shirt	2522					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	girls shirt	2523					
	Girls pajamas	2506					
	swimming wear	2518					
	Canvas gloves	2519					
	Rubber gloves	2520					
	Canvas shoes	2521					
	Boys pajamas	2507					
	Underwear	2508					
	Girls socks	2509					
	Boys socks	2510					
	Suit (boys, girls)	2511					
	Boys trouser	2512					
	Girls trouser	2513					
	Girls skirt	2514					
	Blouse	2515					
	Baby wear	2516					
	school uniform	2524					
	Other	2517					
26	Fabrics for Tailoring						

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Men's fabrics	2601					
	Women fabrics	2602					
	Girls and boys fabrics	2603					
	Trico wool	2604					
	Embroidery fabrics	2605					
	Cotton and silk threads	2606					
	Sewing supplies	2607					
	Trico yarn	2608					
	Embroidery yarn	2609					
	knitting supplies	2610					
	Men's belts	2613					
	women's belts	2614					
	Other	2612					
27	Tailoring charges						
	Men's clothing tailoring fees	2701					
	Women's clothing tailoring fees	2702					
	Children's clothing tailoring fees	2703					
	Clothes repair costs	2710					
	Clothes renting costs	2711					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Clothes cleaning and ironing	2712					
	Clothes dyeing costs	2713					
	Other	2714					
28	Footwear						
	Men's Dress Shoes	2801					
	Men boot	2802					
	Men's Slippers	2803					
	Men gumboots	2804					
	Men sandal	2805					
	Other men shoes	2806					
	women's Dress Shoes	2807					
	Women boot	2808					
	Women sandal	2809					
	Women Slippers	2810					
	Women gumboots	2811					
	Girls shoes	2812					
	Girls boot	2813					
	Girls sandal	2814					
	Girls Slippers	2815					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Girls gumboots	2816					
	Other Women's Shoes	2826					
	Other Girlie Shoes	2827					
	Boys shoes	2818					
	Boys gumboots	2819					
	Boys boot	2820					
	Boys sandal	2821					
	Boys Slippers	2822					
	Baby boot	2823					
	Other shoes for boys	2824					
	Shoe repair (including shoe paint and laces)	2825					
30	Textiles and Furnishings						
	Bed sheets	3001					
	Blankets	3002					
	Wool mattress	3003					
	Sponge mattress	3004					
	Cotton mattress	3020					
	Quilts	3006					
	Pillows	3007					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Towels	3008					
	Fabric or metal curtains	3009					
	Table sheet	3011					
	Veranda & garden umbrellas	3017					
	Other, specify	3018					
	Furniture & textiles repair	3019					
	Furniture covers / Faces mattresses	3024					
	Laundry bags	3021					
	Bags for shoes	3022					
31	Household utensils and tableware						
	Other non-electric stuff (coolers, bottles, milk bottles, iron board)	3134					
	Repairing household utensils	3135					
	Glass tableware (cups, dishes)	3136					
	Crystal Tools (cups, dishes)	3137					
	Chinese tableware (cups, plates)	3138					
	Knives	3139					
	Forks	3140					
	Metal plates and dishes	3141					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Melamine plates, dishes	3142					
	Non-electrical kitchen appliances (cookers, woks of all kinds) are made from Tefal	3143					
	Non-electrical kitchen appliances (cookers, woks of all kinds) are made of aluminum	3144					
	Spoons	3145					
	Plastic cutlery (cups, plates, spoons, forks)	3146					
	Varieties of cardboard and foam (cups, plates, containers, etc.)	3147					
	Other household utensils and tableware	3148					
32	Household supplies and chores						
	Washing powder and conditioner	3230					
	liquid dishwashing	3231					
	Floor and window cleaners	3232					
	Antiseptics	3233					
	Insecticides	3234					
	Cleaning tools (brooms, brushes, mats, sponge for washing the dishes)	3235					
	Paper products (kitchen towels, napkins, paper plates, vacuum cleaner bags, aluminum foil)	3236					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Other materials (candles, matches, coat hangers, needles, thread, glue, nails)	3237					
	Servants, drivers, cooks, and gardeners	3240					
	Babysitting and housework provided by companies	3241					
	Cleaning and insecticide services	3242					
	Dry cleaning, washing and dyeing textiles and carpets	3243					
	Renting furniture and home equipment	3244					
	Household other tasks	3245					
	Hand tools (pliers, hammer, screwdriver, chisel,...etc.)	3250					
	Garden tools (wheelbarrow, hose, shovels, plant scissors,	3251					
	Ladders	3252					
	Door fittings (joints and locks)	3253					
	Light pulps, wires, flashlights, batteries	3254					
	House fire extinguisher	3255					
	Repair of small house tools	3256					
	Household Other items	3257					
	Shoe polishes	3258					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Dyeing shoes	3259					
	Alarm devices	3260					
	timbre	3261					
	Tap / water meter	3262					
	Plastic bags	3263					
	Washing tongs	3264					
	Wash rack	3265					
	Laundry freshener	3266					
	Tile freshener	3267					
	Air Freshener	3268					
	Shoe paint / paint	3269					
33	Medical services						
	General medical doctors services	3301					
	Dentist fees	3302					
	Teeth maintenance and repairs	3303					
	Physical therapy fees	3304					
	Medical laboratory fees	3305					
	X - ray fees	3306					
	Nurses fees	3307					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Vitamins and medicine	3308					
	Thermometers and medical cotton	3309					
	First aid kits	3310					
	Other medical goods	3311					
	Eye lenses	3312					
	Eye glasses	3313					
	Hearing aids	3314					
	Wheelchairs	3315					
	Medical instruments repair	3316					
	Government Hospital fees	3317					
	Medical/Other services	3318					
	Specialized practitioners' services (ophthalmic surgeon, orthopedic surgeon ...etc)	3320					
	Ambulance services	3321					
	Special hospital fees (admittance & treatment)	3322					
	NGO Hospital fees (admittance & treatment)	3323					
	Traditional medicine services	3324					
	Renting medical equipment	3325					
	Nutritionist services	3326					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Earphone battery	3327					
	Walker / crutches	3328					
	Abroad hospital fees (admittance & treatment)	3329					
34	Expenditure on personal transport						
	Tires for cars	3401					
	Car Tubes	3402					
	Spare parts and batteries	3403					
	Repair charges	3404					
	Gasoline	3405					
	Diesel	3406					
	Engine oil	3407					
	Other oils (brake oil, gear oil etc)	3408					
	Car lubrication	3409					
	Parking fees	3410					
	Car cleaning fees	3411					
	Car registration fees	3413					
	Car driving lessons fees	3414					
	Car transferring ownership fees	3415					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Expenses for personal/other means of transportation	3416					
	Rent a car without driver fares	3418					
	Car fire extinguisher	3419					
	Vehicle oil and grease change service expenses	3420					
35	Transport and Communication						
	Bus fares	3501					
	Taxi fares (public transport)	3502					
	Taxi fares (private transport)	3503					
	Other transportation fares	3505					
	Postal services fares (Government)	3506					
	The cost of international and local calls made through the landline phone (including any calls made from a hotel, café, etc.)	3507					
	Fax and telex fees	3508					
	Transportation and Communications/Other services	3509					
	Porters and transporting of luggage service	3521					
	Private Postal services (letters, parcels)	3522					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Mobile phone call charges, including messages, whether it is a postpaid or prepaid bill.	3523					
	Internet fees (subscription, cards, internet cafe usage costs)	3524					
	Public phone expenses	3525					
	Phones and cell phones repair expenses	3526					
	Phone line installation fees	3527					
	Student transportation fees by bus	3529					
	Student transportation fee / Public taxi service	3530					
	Student transportation fee / private taxi service	3531					
	Fee for transporting animal-drawn carts	3532					
	Repair fees for internet equipment and devices	3533					
	Subscription fees for Internet Protocol Telephone/Netflix/.. etc.	3534					
	television internet services fees	3535					
36	Recreational and cultural activities						
	CD songs or movies	3601					
	Empty CD	3602					
	Disks and CDs for Atari and computer	3603					
	Renting movies on CD	3604					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Digital camera memory	3605					
	Children's dolls	3606					
	Spare parts for recreational equipment	3607					
	Repair of recreational equipment	3608					
	Expenses for parks and amusement parks	3609					
	Expenditure on theatre	3610					
	Expenditure on sport & social clubs	3611					
	Lottery tickets	3612					
	Printing photos inside the studio from the camera or mobile phone memory	3613					
	Renting a television and video.	3614					
	Expenditure on pets (cats, dogs)	3615					
	Other entertainment goods and services	3618					
	expenses on flower pots and natural plants	3619					
	Expenditure on artificial flowers	3620					
	Photo album	3621					
	Non-school books	3622					
	Magazines	3623					
	Newspapers	3624					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Other cultural goods and services	3625					
	Entertainment equipment (musical equipment, chess, etc.)	3630					
	Expenditures on cinema	3631					
	Sports materials	3632					
	School/universities books	3633					
	Hobby development costs (music playing, swimming ... etc)	3634					
	greeting cards	3635					
	Expenses on museums and archaeological sites	3636					
	school bags	3637					
	Seeds for planting and cultivation	3638					
	Renting other information technology and communication devices.	3639					
37	Hotels and internal trips						
	Accommodation and Hotels						
	Expenditure on shelter	3701					
	Expenditure on food	3704					
	Expenditure on transportation and telecommunication	3706					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Other expenses on accommodation and hotel services	3703					
	Internal trips						
	Expenditure on shelter	3707					
	Expenditure on food	3708					
	Expenditure on transportation and telecommunication	3709					
	Other expenses on Internal trips	3710					
39	Writing and drawing tools for non-education purposes						
	Pens and pencils	3901					
	Eraser Rubbers and rulers	3902					
	Pencil sharpeners- staples	3903					
	Paper punches, paper scissors and rubber stamp mockups	3904					
	Ink and paper clips	3905					
	Other , specify	3906					
	Notebooks, envelopes, diaries (including school notebooks)	3910					
	Drawing and painting material	3911					
40	Personal care						

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Expenses of Turkish baths and steam rooms	4031					
	Non-medical massage expenses	4032					
	Cosmetics (lipstick, nail polish, powder, hairstyling materials, hair removers)	4035					
	Perfumes and deodorants	4036					
	Paper products: toilet paper and paper towels	4037					
	Medical cotton and sanitary pads	4038					
	Baby diapers	4039					
	Luggage, handbags, wallets ...etc.	4040					
	Smokers' stuff: pipes, lighters, cigarette packs	4042					
	Personal luggage: Sunglasses, walking staff	4043					
	Other Personal care and its accessories	4044					
	Expenses of men's beauty salons	4045					
	Men's hair styling	4046					
	Men's haircut (head and beard)	4047					
	Expenses of beauty salons for women	4048					
	Hairstyling for women	4049					
	Women's haircut	4050					
	Shaving and hair tools	4051					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	blade	4052					
	Toothbrushes	4053					
	Hairpins	4054					
	Personal scales	4055					
	soap	4056					
	shampoo	4057					
	Tooth paste	4058					
	Cotton swab	4059					
	Toothpicks	4060					
	Baby care products (powder, oil,...)	4061					
	Sunscreen cream	4062					
	Colored contact lenses	4063					
	Scented handkerchiefs	4064					
	Regular shisha	4065					
	Electronic cigarette	4066					
	Electronic shisha	4067					
	Elderly diapers	4068					
41	Financial and legal services						
	Banking fees	4101					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Legal services and judicial fees	4102					
	brokerage (commission)	4103					
	other Financial and legal services	4104					
42	Other services						
	Advertisement fees	4201					
	Photography fees	4202					
	Document imaging services	4203					
	Translation & printing	4204					
	Other, specify	4205					
29	Expenditure on dwelling						
	Actual housing rent	2901					
	Waste disposal expenses	2902					
	Electricity charges	2903					
	Water charges	2904					
	Gas charges	2905					
	The diesel fuel	2906					
	kerosene	2907					
	Other expenditure on dwelling	2913					
	Costs of disposing of sewage water	2920					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Small repairs and secondary maintenance expenses	2921					
	Repairs and maintenance material	2922					
	Coal	2923					
	Wood	2924					
	Olive dregs	2925					
43	Interests on loans						
	Interests on consumption loans	4301					
	Interests on housing construction loan	4302					
44	Fees and taxes						
	Passport issuance fees	4401					
	Family legal document issuance fees	4402					
	Identity card issuance fees	4403					
	Birth certificates fees	4404					
	Visa issuance fees	4405					
	Marriage and divorce fees	4406					
	A driver's license fees	4407					
	Driving test fees	4408					
	Travel permit fees	4409					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Sir irregularities fees	4410					
	Ratification transaction fee	4411					
	Cash taxes (various types)	4412					
	cash fines	4413					
	Other, specify	4414					
	Education tax	4415					
	Roof tax (including the Arnona)	4416					
	Border crossing fees	4417					
45	Transfer payment						
	Financial transfers	4501					
	Social insurances	4502					
	Life insurances	4503					
	Gifts in cash	4508					
	Payment during feasts	4509					
	Other Transfers payments	4510					
	Car insurance	4511					
	Housing insurance	4512					
	In-kind gifts	4513					
	Wedding expenses	4514					

Group No	Description of item	Item Code	First Week Total Value	Second Week Total Value	Third Week Total Value	Fourth Week Total Value	Total value during month
	Funeral expenses	4515					
	Dowry	4516					
	Aqeeqah	4517					
	sacrifice	4518					
	Zakat	4519					
	alms	4520					
	A government health insurance	4521					
	Private health insurance	4522					
	Other types of insurance	4523					

Durable goods

Group code	Item description	Item Code	Total Value (last 12 Months)
50	Furniture		
	Wooden bed	5001	
	Metal bed	5002	
	Wooden tables	5003	
	Wooden chairs	5004	
	Plastic tables	5005	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Plastic chairs	5006	
	Wooden cupboard	5007	
	Dining room, complete set	5008	
	Living room, complete set	5009	
	Bedroom, complete set	5010	
	Office and buffets	5011	
	Book shelves	5012	
	Couches	5013	
	Carpets (area and wall-to-wall)	5014	
	Mats	5015	
	Plates (tableau, portrait etc.)	5016	
	Baby carriage	5017	
	Infant bed	5018	
	Others, specify	5019	
	Furniture repair	5020	
	Moquette Carpet	5025	
	Floor coverings / doormats	5026	
	Lanterns and candelabra	5027	
	Chandeliers	5028	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Garden Furniture	5029	
51	Household appliances		
	Gas oven with electricity	5101	
	Gas stove (cooker)	5102	
	Gas cooker	5103	
	Refrigerator	5104	
	Freezer	5105	
	Electric iron	5106	
	Electric air conditioner	5107	
	Electric fan	5108	
	Sewing machine	5109	
	Regular Washing machine (half automated)	5110	
	Dish washer	5111	
	Gas heater	5112	
	Kerosene heater	5113	
	Solar oil heater	5114	
	Electric heater	5115	
	Electric vacuum cleaner	5116	
	Home knitting machine	5117	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Electric blender	5118	
	Coffee mill	5119	
	Electric kitchen sets	5120	
	Electric kettle (tea or coffee)	5121	
	Electric cooking pot	5123	
	Microwave oven (stove)	5124	
	Boiler	5125	
	Electric cooler	5126	
	Gas cylinder	5127	
	Other, specify	5128	
	Household appliances repair	5129	
	Electric meat grinder	5130	
	Toaster (bread toasting machine)	5131	
	Electrical devices for personal care and repair	5132	
	Solar panel	5133	
	Water tank	5134	
	Electric motor for lifting water	5135	
	Electrical generator	5136	
	Electricity generating battery	5137	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Heater firewood	5138	
	Water purifier (Filter)	5139	
	Washing machines (full automated)	5140	
	Water Cooler heater	5141	
53	Recreational supplies		
	Radio with CD	5301	
	T.V's	5302	
	Video camera	5304	
	Cameras	5305	
	Musical instruments	5306	
	TV's aid	5307	
	Satellite	5308	
	Attari	5309	
	Computers	5310	
	Other specify	5311	
	Recreational appliances repair	5312	
	Radio	5315	
	Mobile	5317	
	Telephone	5318	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Telefax	5319	
	Calculator	5320	
	Buying pets	5321	
	Plants including Christmas tree	5322	
	Sports equipment	5323	
	Camping tools	5324	
	DVD	5326	
	remote control	5327	
	Router	5328	
	Memory (Flash Memory)	5329	
	x Box	5330	
	IPAD/ Tablet	5331	
	Decryption devices, satellite receivers, IPTV receivers	5334	
	Digital media players	5335	
	Car audio and video systems	5336	
	Headphones, wireless/Bluetooth headphones	5337	
	CDs	5338	
	printer	5339	
	Scanners, screens, projectors, augmented reality (AR), and virtual reality (VR) headsets	5340	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Typewriters and word processors	5341	
	Printer ink and all related printer parts or typewriters	5342	
	Web cameras	5343	
	Child monitoring devices	5344	
	Smart watches	5345	
	Fitness trackers/ and other smart devices that are worn such as smart glasses, which do not work without being connected to a smartphone.	5346	
	Book readers	5347	
	Power bank	5348	
	Chargers/batteries/mobile or tablet covers/device holders and other accessories.	5349	
	Computer programs and operating systems	5350	
	Applications	5351	
	Smart mobile devices	5352	
	Other data processing devices such as independent microphone, etc.	5353	
	Renting games and game programs	5354	
	Buying games and game programs/virtual game clothes and others	5355	
	Memory (flash memory)	5356	
54	Other goods and services		
	Tickets for traveling abroad	5401	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Jewelry, rings, precious stones etc.	5403	
	Other specify	5404	
	Jewelry, watches repair	5405	
	Tourist trip abroad (food, transport, shelter)	5406	
	Travel expenses abroad (for studying)	5407	
	Hajj and Omra (visit Mecca for religious ceremonies)	5408	
	Travel expenses for treatment abroad	5409	
	watches	5410	
55	Social protection		
	Expenses for the care of the elderly and disabled.	5501	
	Expenses for schools for the disabled	5502	
	Child custody and care expenses	5503	
	Other	5504	
38	Education (including distance education)		
	Kindergarten tuition	3801	
	Government basic education fees	3802	
	private Community college tuition	3803	
	University tuition	3804	
	Other, specify	3813	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Private basic education fees	3815	
	Government secondary education fees	3816	
	private secondary education fees	3817	
	Vocational education fees	3818	
	Cultural development education fees	3819	
	Out-of-school education expenses for adults and youth	3820	
	Municipality elementary education fees (Jerusalem)	3821	
	Municipality secondary education fees (Jerusalem)	3822	
	Maaref (Israeli) elementary school fees	3823	
	Maaref (Israeli) secondary school fees	3824	
	Students hostel expenses (inside the country)	3825	
	Private lessons	3826	
	Notebooks, bindings and memoranda (including school books)	3827	
	Pens and pencils	3828	
	Erasers and rulers	3829	
	Sharpener- stapler	3830	
	Paper punches, paper scissors and rubber stamp mockups	3831	
	Ink and clips	3832	
	Drawing and painting materials	3833	

Group code	Item description	Item Code	Total Value (last 12 Months)
	Education abroad (including application fees, tuition, travel, and accommodation)	3834	
	Student housing expenses (abroad)	3835	

52	Personal means of transportation	Item code	Total value during the last three years
	new Vehicles (car, van)	5201	
	Motorcycle	5202	
	Bicycle	5203	
	Other, specify	5204	
	old or second-hand Vehicles (car, van)	5205	
	Tuk Tuk	5206	

Section 6: Assurances and Coping Strategies

C00	Data name giver:	C00_1	Number of data giver <input type="checkbox"/> <input type="checkbox"/>	
A01	During the last 12 months , did you or a family member receive any kind of assistance from any party (such as food, medicine, work, educational assistance)?	1. Yes, the family received assistance and it was in need for it	<input type="checkbox"/> <input type="checkbox"/>	
		2. Yes, the family received assistance and it was not in need for it		
		3. No, the family did not receive assistance and it was in need for it.....Skip to C03		
		4. No, the family did not receive assistance and it was not in need for itSkip to C03		
		5. No/Don't know/No answer.....Skip to C03		
A02	How important was the assistance you or your family received in the past 12 months?	1. Without this assistance, the family would not have been able to provide for the living	<input type="checkbox"/> <input type="checkbox"/>	
		2. It enabled the family to manage the living affairs with great difficulty		
		3. Formed an assistant and regular additional income for the family		
		4. Contributed to alleviating distress during difficult situations		
		5. The family could have managed without it		
		6. The assistance is of no importance to cover the family's living expenses		
		88. Not applicable 99. I don't know/no answer		
To the field researcher: record the assistance that the family received during the past 12 months, and allocate a line for each type of assistances				
A03	What kind of assistance did the family or one of its members receive?	What is the value of the assistance received by the family or one of its members?	What is the source of assistance received by the family or one of its members?	What is the nature (frequency) of assistance?
	1.cash 2. food 3. Employment/job opportunities 4. Food parcels/ food vouchers 5. Emergency Aid (COVID) 6. Orphans sponsorship 7. Purchase voucher coupons 8. Free treatment/medicine 9. Clothes 10. Compensation for martyr 11. Health insurance 12. School feeding 13. Electric charging 14. Residential (sheltering center, housing rent, caravan) 15. Exemption of school/university fees 16. Disabled Allowance 17. Elderly Allowance 18. Others/ (specify.....)	Value (sum of amounts, for all times of the same type of aid and source, in shekels)	1.Social development 2. Other Authority institutions 3. Political factions/parties 4. Zakat committees 5. An international body/development institution 6. UNRWA 7. Arab or foreign countries 8. Charitable/religious institutions 9. From family and relatives 10. From friends / acquaintances / neighbors / benefactors 11. Workers unions 12. Local banks 13. Local Reform Committee 14. Others (specify.....)	1.emergency assistance 2. Periodic assistance: weekly 3. Periodic help: monthly 4. Periodic assistance: seasonal (every 3 months) 5. Periodic assistance: biannual 6. Periodic assistance: annually 7. Others/ specify:
1	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
6	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
7	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
8	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
9	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

C03	Did your family receive any remittances from abroad in the last 12 months ?	<input type="checkbox"/>	1.Yes 2.No >> C06
C05	What did you spend these remittances on? (Check all that apply) 1.Yes 2.No		1. Food and living <input type="checkbox"/>
			2. Building <input type="checkbox"/>
			3. Marriage <input type="checkbox"/>
			4. Furniture <input type="checkbox"/>
			5. Medical coverage <input type="checkbox"/>
			6. Education <input type="checkbox"/>
			7. Properties purchase <input type="checkbox"/>
			8. Pay back debts <input type="checkbox"/>
			9. Other <input type="checkbox"/>
C06	Has any member of this household TAKEN loans during the past 10 yrs?	<input type="checkbox"/>	1.Yes 2.No → C10
C07	What was the type of the loan 1.Yes 2.No 99.Don't know		1. housing <input type="checkbox"/>
			2. personal <input type="checkbox"/>
			3. Car loan <input type="checkbox"/>
			4. Housing enhancement <input type="checkbox"/>
			5. agricultural/trade/manufacture <input type="checkbox"/>
			6. credit cards withdrawals <input type="checkbox"/>
			7. other <input type="checkbox"/>
C08	What did you spend these loans on? (Check all that apply) 1.Yes 2.No		1. Food and living <input type="checkbox"/>
			2. Building <input type="checkbox"/>
			3. Marriage <input type="checkbox"/>
			4. Furniture <input type="checkbox"/>
			5. Medical coverage <input type="checkbox"/>
			6. Education <input type="checkbox"/>
			7. Properties purchase <input type="checkbox"/>
			8. Pay back debts <input type="checkbox"/>
			9.Other <input type="checkbox"/>
C09	Have you finished repaying these loans?	<input type="checkbox"/>	1.Yes 2.No
C09-1	The value of the monthly payment of the loan	□□□□□□	
C09-2	Select the type of currency	<input type="checkbox"/>	1.NIS 2.JOD 3.US\$

C10	(A) In LAST 12 MONTHS, has any family member faced the following shocks? 1. Yes 2. No 88. Not Applicable 99. Don't know
1	Loss in assets (including destruction or robbery) <input type="checkbox"/> <input type="checkbox"/>
2	Loss in assets or projects due to Israeli procedures <input type="checkbox"/> <input type="checkbox"/>
3	Exposure to robbery (inside/outside) house. <input type="checkbox"/> <input type="checkbox"/>
4	Any family member was detained because of their political opinions by the government(at least one year) <input type="checkbox"/> <input type="checkbox"/>
5	Any family member was threatened / arrested / violated / humiliated, because of his political views written or spoken by the government <input type="checkbox"/> <input type="checkbox"/>
6	Any family member was threatened / arrested / violated / humiliated, because of his political views written or spoken by the Israeli occupation <input type="checkbox"/> <input type="checkbox"/>
7	Any family member was exposed to violence by the occupation(wounded / Martyrs / torture) <input type="checkbox"/> <input type="checkbox"/>
8	Inability of any family member to reach his land because of Israeli procedures (barriers/separation wall/curfews...etc) <input type="checkbox"/> <input type="checkbox"/>
9	Inability of any family member to visit parents or relatives or friends because of Israeli procedures (barriers/separation wall/curfews...etc) <input type="checkbox"/> <input type="checkbox"/>
10	Exposure to information threats through social and professional networking sites (such as hacking and illegal access, data theft, racist messages, the appearance of inappropriate content, ... etc.) <input type="checkbox"/> <input type="checkbox"/>

C11	In the LAST 12 MONTHS, have any women or children in this household faced the following problems? YES 2. NO 88. NOT APPLICABLE 99. DON'T KNOW
1	Disallow any female family member to attend university education due to restrictions by the parents/family <input type="checkbox"/> <input type="checkbox"/>
2	Disallow a female family member by choosing the desired specialization due to the restrictions by the parents <input type="checkbox"/> <input type="checkbox"/>
3	Disallow any female family member to work or look for work because of the restrictions imposed by parents, (father, husband, brothers) <input type="checkbox"/> <input type="checkbox"/>
4	Disallow any female family member to visit her doctor\relatives\friends without company <input type="checkbox"/> <input type="checkbox"/>
5	Disallow a female family member t have bank account <input type="checkbox"/> <input type="checkbox"/>
6	Inability of any female to act for her property / income or wages due to family constraints <input type="checkbox"/> <input type="checkbox"/>
7	Any female family member suffered verbal violence by a family member <input type="checkbox"/> <input type="checkbox"/>
8	Any female family member suffered physical violence by a family member <input type="checkbox"/> <input type="checkbox"/>
9	Any child family member exposed to family verbal violence by a family member <input type="checkbox"/> <input type="checkbox"/>
10	Any child family member exposed to family physical violence by a family member <input type="checkbox"/> <input type="checkbox"/>
11	Any child family member exposed to cyber threats such as harmful content, cyberbullying, racist messages, etc. <input type="checkbox"/> <input type="checkbox"/>

C12	In LAST 12 MONTHS, has the household member in school age faced any problems related to education? 1. YES 2. NO 88. NOT APPLICABLE 99. DON'T KNOW	
1	has the household member in school age faced any problems regarding the inefficiency of teachers	<input type="checkbox"/> <input type="checkbox"/>
2	has the household member in school age faced any problems regarding the lack of teaching books	<input type="checkbox"/> <input type="checkbox"/>
3	has the household member in school age faced any problems regarding the lack of services and facilities at the school (bathrooms, squares,, etc)	<input type="checkbox"/> <input type="checkbox"/>

C13	During the LAST 12 MONTHS, did the head of the family 1. Yes 2. No 99. Do not knw	
1.	Participate in cultural club	<input type="checkbox"/> <input type="checkbox"/>
2.	Participate or work with one of the organizations of civil society as an act of voluntary	<input type="checkbox"/> <input type="checkbox"/>
3.	Visit family / friends / relatives / co-workers at least once a month	<input type="checkbox"/> <input type="checkbox"/>
4.	Attend the General / going to the cinema / theater to attend seminars	<input type="checkbox"/> <input type="checkbox"/>
5.	Aid whether cash / amount / kind (one for relatives or friends when they are in need her	<input type="checkbox"/> <input type="checkbox"/>
6.	Is the head of the family received aid) whether cash / amount / kind (of a relatives or friends when he was in need her	<input type="checkbox"/> <input type="checkbox"/>

C14	During the last 30 days, can the following statement be applied to your household	Yes 2. No 99. Do not know
1.	You were worried you would not have enough food to eat due to lack of money or other resources?	<input type="checkbox"/>
2.	You were unable to eat healthy and nutritious food due to lack of money or other resources?	<input type="checkbox"/>
3.	You ate only a few kinds of foods due to lack of money or other resources?	<input type="checkbox"/>
4.	You had to skip a meal due to lack of money or other resources?	<input type="checkbox"/>
5.	You ate less than you thought you should due to lack of money or other resources?	<input type="checkbox"/>
6.	Your household ran out of food due to lack of money or other resources?	<input type="checkbox"/>
7.	You were hungry but did not eat due to lack of money or other resources?	<input type="checkbox"/>
8.	You went without eating for a whole day due to lack of money or other resources?	<input type="checkbox"/>

Section 7: Income and means of generating income

I00	Data name giver:	Number of data giver	I00_1	<input type="checkbox"/> <input type="checkbox"/>	
I01	which of the following sources were included as source of household income 1.Yes 2.No	<input type="checkbox"/>	1. Agriculture		
		<input type="checkbox"/>	2. Household business		
		<input type="checkbox"/>	3. Wages and salaries from public sector		
		<input type="checkbox"/>	4. Wages and salaries from private sector		
		<input type="checkbox"/>	5. Wages and salaries from Israeli work sector		
		<input type="checkbox"/>	6. Remittances from Palestine		
		<input type="checkbox"/>	7. Remittances from abroad		
		<input type="checkbox"/>	8. International Institutions (Aid)		
		<input type="checkbox"/>	9. Social Aid		
		<input type="checkbox"/>	10. Wages and salaries from international institutions		
		<input type="checkbox"/>	11. National insurance (Jerusalem)		
		<input type="checkbox"/>	12. Property Income		
		<input type="checkbox"/>	13. Other		
		<input type="checkbox"/>	14. Retirement		
I02	From the above stated sources, what is the main source of household income (specify using the code)			<input type="checkbox"/> <input type="checkbox"/>	
I03	In your opinion Total amount of money that a household need to satisfy its basic needs (necessities) such as Food, clothes, housing, education, health,..etc.			In NIS	
I04	To what extent your HH Income is close to this	<input type="checkbox"/>	1. Much higher than this		
		<input type="checkbox"/>	2. Slightly higher than this		
		<input type="checkbox"/>	3. About\ almost the same		
		<input type="checkbox"/>	4. Slightly less than this		
		<input type="checkbox"/>	5. Much less than this		
		<input type="checkbox"/>	99. Dk		
I05	In your point of view, do you think that family income at the moment, compared with the past 12 months has improved or stayed the same or declined?	<input type="checkbox"/>	1. Today is much better		
		<input type="checkbox"/>	2. Today somewhat better		
		<input type="checkbox"/>	3. About the same		
		<input type="checkbox"/>	4. Today somewhat worse		
		<input type="checkbox"/>	5. Today much worse		
		<input type="checkbox"/>	99. DK		
I06	In your point of view, do you think that family income during the next 12 months will improve or remain the same or decline?	<input type="checkbox"/>	1. will increase		
		<input type="checkbox"/>	2. will remain the same		
		<input type="checkbox"/>	3. will decrease		
		<input type="checkbox"/>	99. DK		
I07	In general, is your household	<input type="checkbox"/>	1. Very good 2. Good 3. Middle 4. Poor 5. Very poor		
I08	Does the Household have owned land?	<input type="checkbox"/>	1. Yes 2. No → I12		
I09	What is the area of the owned land by household			[in M ²]	
I10	Have you been confiscated / isolate the territory of the family by Israel since the 2000 uprising	Yes 2. No → I12			
I11	Is the family able to gain access to the land confiscated / isolated?	Yes , always 2. Yes, seasonally 3. no			
I12	Did the household have livestock	<input type="checkbox"/>	1. Yes 2. No (move to I14)		
I13	What are the numbers of livestock as in (the visit date including economic projects) (register the number, write 0 in the box in case no animals)	1. Milk cows	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	6. Egg chickens	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		2. Fattening calves	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7. beehives	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		3. Sheep	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	8. Camel	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		4. goats	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	9. other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		5. Meat chicken	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

Notes
