SUPPLEMENTAL SCHEDULE FOR INDIAN POPULATION

For instructions and illustrative example see other side of this sheet

State____________________________________________________ County____________________________________________________
Supervisor's District No._____________________ Enumeration District No.____________________
Township or other division of county____________________________________________________
Name of city, town, or village____________________________________________________

Institution (if any)________________________________________ Enumerator______________________________

(Signature)

<table>
<thead>
<tr>
<th>Population Schedule</th>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Full Blood or Mixed Blood</th>
<th>Tribe</th>
<th>Post-Office Address</th>
<th>Agency Where Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheet No.</td>
<td>Line No.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>