

**Form 6**To be filled by Facilitator's  
Assistant

1. Province	12. Sumatra Utara    33. Jawa Tengah    73. Sulawesi Selatan			
2. District	_____			
3. Subdistrict	_____			
4. Village	_____			
5. Hamlet/Neighborhood/R W/RT	1. Hamlet/Neighborhood/RW: _____ 3. RT: A.RT: _____ B.:RW _____ C.Hamlet: _____			
6. Enumeration Area				
7. Nama/Kode Fasilitator	_____			
8. Nama Asisten Fasilitator	_____			
9. Tanggal Pengisian	____/____/____ (Tanggal / Bulan/Tahun)			

**10 HH WITH LOWEST LEVEL OF WELFARE FORM**

No	Name of 10 HH Head with lowest welfare level (1)	HHID (2)
1		____
2		____
3		____
4		____
5		____
6		____
7		____
8		____
9		____
10		____