



COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF HEALTH AND HUMAN SERVICES BUREAU OF PUBLIC HEALTH

Form 100-100
(10/01/00)

Name: _____ Title: _____
 Date: _____
 Department: _____
 Position: _____
 Address: _____

1. Number of cases in the region
2. Number of cases in the region
3. Number of cases in the region
4. Number of cases in the region
5. Number of cases in the region
6. Number of cases in the region
7. Number of cases in the region
8. Number of cases in the region
9. Number of cases in the region
10. Number of cases in the region

250
100
100
100
100
100
100
100
100
100

No.	Name	Age		Sex	Race	Religion	Marital Status	Occupation	Education	Income	Health Status	Other
		1	2									
1	John	25	25	M	W							
2	Jane	25	25	F	W							
3	John	25	25	M	W							
4	Jane	25	25	F	W							
5	John	25	25	M	W							
6	Jane	25	25	F	W							
7	John	25	25	M	W							
8	Jane	25	25	F	W							
9	John	25	25	M	W							
10	Jane	25	25	F	W							
11	John	25	25	M	W							
12	Jane	25	25	F	W							
13	John	25	25	M	W							
14	Jane	25	25	F	W							
15	John	25	25	M	W							
16	Jane	25	25	F	W							
17	John	25	25	M	W							
18	Jane	25	25	F	W							
19	John	25	25	M	W							
20	Jane	25	25	F	W							
21	John	25	25	M	W							
22	Jane	25	25	F	W							
23	John	25	25	M	W							
24	Jane	25	25	F	W							
25	John	25	25	M	W							
26	Jane	25	25	F	W							
27	John	25	25	M	W							
28	Jane	25	25	F	W							
29	John	25	25	M	W							
30	Jane	25	25	F	W							
31	John	25	25	M	W							
32	Jane	25	25	F	W							
33	John	25	25	M	W							
34	Jane	25	25	F	W							
35	John	25	25	M	W							
36	Jane	25	25	F	W							
37	John	25	25	M	W							
38	Jane	25	25	F	W							
39	John	25	25	M	W							
40	Jane	25	25	F	W							
41	John	25	25	M	W							
42	Jane	25	25	F	W							
43	John	25	25	M	W							
44	Jane	25	25	F	W							
45	John	25	25	M	W							
46	Jane	25	25	F	W							
47	John	25	25	M	W							
48	Jane	25	25	F	W							
49	John	25	25	M	W							
50	Jane	25	25	F	W							
51	John	25	25	M	W							
52	Jane	25	25	F	W							
53	John	25	25	M	W							
54	Jane	25	25	F	W							
55	John	25	25	M	W							
56	Jane	25	25	F	W							
57	John	25	25	M	W							
58	Jane	25	25	F	W							
59	John	25	25	M	W							
60	Jane	25	25	F	W							
61	John	25	25	M	W							
62	Jane	25	25	F	W							
63	John	25	25	M	W							
64	Jane	25	25	F	W							
65	John	25	25	M	W							
66	Jane	25	25	F	W							
67	John	25	25	M	W							
68	Jane	25	25	F	W							
69	John	25	25	M	W							
70	Jane	25	25	F	W							
71	John	25	25	M	W							
72	Jane	25	25	F	W							
73	John	25	25	M	W							
74	Jane	25	25	F	W							
75	John	25	25	M	W							
76	Jane	25	25	F	W							
77	John	25	25	M	W							
78	Jane	25	25	F	W							
79	John	25	25	M	W							
80	Jane	25	25	F	W							
81	John	25	25	M	W							
82	Jane	25	25	F	W							
83	John	25	25	M	W							
84	Jane	25	25	F	W							
85	John	25	25	M	W							
86	Jane	25	25	F	W							
87	John	25	25	M	W							
88	Jane	25	25	F	W							
89	John	25	25	M	W							
90	Jane	25	25	F	W							
91	John	25	25	M	W							
92	Jane	25	25	F	W							
93	John	25	25	M	W							
94	Jane	25	25	F	W							
95	John	25	25	M	W							
96	Jane	25	25	F	W							
97	John	25	25	M	W							
98	Jane	25	25	F	W							
99	John	25	25	M	W							
100	Jane	25	25	F	W							

TOTAL NUMBER OF CASES: 203

PREPARED BY: _____
 REVIEWED BY: _____
 APPROVED BY: _____
 DATE: _____

25-00000-2-023

Supervisor's Printing Area