

NSCCSD Design Phase Feasibility Test
In-Person Household Demand Survey – REVISED 12/17/08

This protocol will be used for qualitative interviews with various parents who use selected providers. Interviewers will probe as needed.

Child demographics

C2. (IF S1>1: For each child under 13, starting with the youngest,) Can you tell me the first names of all of the children under 13 who usually live in this household? It may help you to start with the youngest person.

First names: 1. _____
2. _____
3. _____
4. _____
5. _____

C2a. INTERVIEWER: ASK C2B-C2g8 ABOUT EACH CHILD LISTED IN C2.

C2b (ASK IF NECESSARY:). Is (CHILD) a boy or a girl?

- 1 BOY
- 2 GIRL

C2c. In what month and year was (CHILD) born?

_____MONTH
_____YEAR

C2d. Is (CHILD) of Hispanic, Latino, or Spanish origin?

- 1 YES
- 2 NO

C2e. Is (CHILD)...? CHOOSE ALL THAT APPLY.

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other (Please specify:_____)

C2f. What is (CHILD's) relationship to you?

- 1 Son or daughter (biological or adopted)
- 2 Stepson or stepdaughter
- 3 Brother or sister
- 4 Grandchild
- 5 Foster child
- 6 Other relative (e.g., niece or nephew)
- 7 Other nonrelative

Respondent and Household Adults Demographics

H1a. These next questions are about your family and the other people who live in your household and are 13 years old or older. Please tell me the first names or initials of the teenagers and adults who usually live here. IDENTIFY ALL HOUSEHOLD MEMBERS FIRST, THEN ASK QUESTIONS ABOUT EACH PERSON.

Now I have some questions about each person in the HH. Let me start with you.

b. How old (are you/ is [])? IF NEEDED: Your best guess is fine.

c. (Are you/Is []) male or female?

d. [IF HHMEM NOT R] What is your relationship to []?

- 1 SPOUSE/PARTNER
- 2 PARENT OR PARENT-IN-LAW
- 3 CHILD
- 4 SIBLING OR SIBLING-IN-LAW
- 5 OTHER RELATIVE
- 6 NON-RELATIVE (SPECIFY: _____)

h. [if b >= 16] Last week, (were you/was []) working full time, part time, going to school, keeping house, or something else?

1. WORKING FULL TIME
2. WORKING PART TIME
3. WITH A JOB, BUT NOT AT WORK BECAUSE OF TEMPORARY ILLNESS, VACATION, STRIKE
4. UNEMPLOYED, LAID OFF, LOOKING FOR WORK
5. RETIRED
6. IN SCHOOL
7. KEEPING HOUSE
8. OTHER (SPECIFY: _____)

i. (Do you/Does []) currently attend regular school?

- 1 YES
- 2 NO
- 3 if volunteered: HOME-SCHOOLED

j. [if h1i = 2 or DK/REF] What is the highest grade or level of schooling that (you have/[] has) ever completed? (READ IF NECESSARY)

1. 8th GRADE OR LESS
2. 9th-12th GRADE NO DIPLOMA
3. HIGH SCHOOL GRADUATE OR GED COMPLETED
4. SOME COLLEGE CREDIT BUT NO DEGREE
5. ASSOCIATE DEGREE (AA, AS)
6. BACHELOR'S DEGREE (BA, BS, AB)
7. GRADUATE OR PROFESSIONAL DEGREE

k. [if b >= 16] (Are you/Is []) now married, widowed, divorced, separated, or (has/have) (he/she/you) never been married?

1. Now married
2. Widowed
3. Divorced
4. Separated
5. Never married

m. (Are you/Is []) of Hispanic or Latino origin?

1 YES

2 NO

n. Which of the following (are you/is [])...CODE ALL THAT APPLY

1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Other Pacific Islander

5 American Indian or Alaska Native

6 Other

ASK H1b-H1o_1 ABOUT ALL REMAINING INDIVIDUALS IN HH.

Now I have some additional questions about your household and other family. These questions are about the whole household and not just individual people.

I4k. What language do you usually speak at home?

_____ Language

Child Care: Types and Hours

Q1. [READ FOR FIRST CHILD ONLY:] Next I have some questions about various people who cared for your child/children during the last week (that is, FILL IN DATES FOR LAST MONDAY AND LAST SUNDAY. In addition to a child's parents, a child may be cared for by other adults in the household, by relatives or friends outside of the household, or by a child-care professional in a center or someone's home.

[Let's start with the youngest child (CHILD)./Now let's talk about (CHILD2/etc.).] Please tell me all of the people or organizations that cared for him/her last week. I know that you cared for (CHILD). Shall I put (spouse/partner) on the list as well? Who else? LIST ALL PROVIDERS CARING FOR CHILD LAST WEEK. LIST ALREADY INCLUDES R, 'CHILD HIM/HERSELF', AND 'ALL ADULTS AT HOME.' Q1_1. Also, please tell me whether this person usually takes care of (CHILD) in your home or somewhere else.

Provider	Usual location of care	
1. _____	1 r's home	2 other
2. _____	1 r's home	2 other
3. _____	1 r's home	2 other
4. _____	1 r's home	2 other
5. _____	1 r's home	2 other
6. _____	1 r's home	2 other

Q1B. Now I have a few more questions about each person/organization that cares for your child/children.

LOOP THROUGH EACH PROVIDER (LAST WEEK AND REGULAR) FOR EACH CHILD. IF PROVIDER LIVES IN THIS HOUSEHOLD, SKIP TO Q4A_11. ELSE ASK Q1B_11. ASK ONLY ONCE ABOUT EACH PROVIDER, REGARDLESS OF HOW MANY CHILDREN ARE CARED FOR BY THAT PROVIDER.

Q1B_11. [IF NOT OBVIOUS] Is (PROVIDER) an individual or an organization?

1 INDIVIDUAL ->GO TO Q1C_11

2 INDIVIDUAL WITH FAMILY DAY CARE -> GO TO Q3A_11

3 ORGANIZATION ->GO TO Q3A_11

Q1C_11. Is [provider] male or female?

- 1 MALE
- 2 FEMALE

Q2A_11. Did you have a personal relationship with (PROVIDER) before s/he began caring for your child/children?

- 1 Yes
- 2 No

Q2a_11_1 What is your personal relationship with (PROVIDER)?

1. FORMER SPOUSE/PARTNER->GO TO Q2B_11
2. CHILD/SON/DAUGHTER-IN-LAW->GO TO Q2B_11
3. BROTHER OR SISTER OR BROTHER OR SISTER-IN-LAW ->GO TO Q2B_11
4. OTHER RELATIVE->GO TO Q2B_11
5. FRIEND->GO TO Q2B_11
6. NEIGHBOR->GO TO Q4A_11

Q2B_11 (IF NOT OBVIOUS). Does this individual live in this household?

1. YES
2. NO

IF ORGANIZATION, ASK Q3A_11.

Q3A_11. What is the full name of {provider}? _____

Q3C_11. [IF ORGANIZATION] In what kind of building is provider located?

1. Public school
2. Private building used only by provider
3. Church or other religious building
4. Private home that is also a residence
5. Private home where no one lives currently
6. Private building used by provider and other businesses
7. other

Respondent and Spouse Employment Schedules

ASK FIRST FOR R, THEN ASK FOR R'S SPOUSE/PARTNER IF ANY IN HOUSEHOLD, THEN ASK FOR ANY HH MEMBER WHO PROVIDED 8 OR MORE HOURS OF CARE LAST WEEK OR DOES SO USUALLY.

E1A. I'm going to ask you about (your/HHMEM's) current work situation. Last week, did (you/s/he) do any work for pay? IF NEEDED: Please include freelance work, work in the military, work for a family-owned business even if (you/s/he) did not get paid, and work on (your/his/her) own business or farm.

1. YES
2. NO

E1C. Last week, (were you/was s/he) enrolled in a high school, college or university?

1. YES, ENROLLED
2. NO, NOT ENROLLED

E1D. Other than high school, college, or university, did (you/s/he) attend any courses or training programs last week designed to help people find a job, improve their job skills, or learn a new job?

1. YES, IN TRAINING
2. NO, NOT IN TRAINING

IF R/HHMEM NOT CURRENTLY WORKING, SKIP TO PC9. IF R/HHMEM CURRENTLY WORKS FOR PAY, ASK PC7:

PC7. What kind of work (do you/does s/he) do? RECORD JOB OR OCCUPATION NAME IN TABLE BELOW. IF NECESSARY, What is (your/his/her) title or the name of (your/his/her) job? PROBE: Is there other work that (you do/s/he does), for example in (your/his/her) own business or in a family business, whether or not (you are/s/he is) paid?

PC7_1. What kind of business is that? RECORD FIRM NAME OR INDUSTRY DESCRIPTION IN TABLE BELOW. IF NECESSARY, What does the company make or do?

WHEN UP TO 4 JOBS HAVE BEEN ROSTERED, ASK:

PC7A. (Do you/does s/he) usually work the same number of hours per week at that job?

PC7B. About how many hours (do you/does s/he) usually work at that job each week?

PC7c. (Do you/does s/he) usually work the same days and hours each week at that job?

PC7d. About how much (are you/is s/he) paid at that job? RECORD WAGE AND UNIT (E.G., HOURLY, WEEKLY, PER YEAR, ETC.)

PC7e. How long (have you/has s/he) had that job/worked for that employer?

	job1	job 2	job 3	job 4
PC7. Title or Name of Job				
PC7_1. Name of firm or work they do				
PC7a. Same number of hours per week?	1 Yes 2 No	1 Yes 2 No	1 Yes 2 No	1 Yes 2 No
PC7b. Usual hours per week				
PC7d. Usual Wage and Time Unit	\$ _____ 1 per hour 2 per day 3 per week 4 per year 5 other _____	\$ _____ 1 per hour 2 per day 3 per week 4 per year 5 other _____	\$ _____ 1 per hour 2 per day 3 per week 4 per year 5 other _____	\$ _____ 1 per hour 2 per day 3 per week 4 per year 5 other _____

PC20. Do you or your spouse participate in a cafeteria-style flexible spending account at work so that you can pay for child care expenses out of pre-tax income?

- 1 Yes
- 2 No

Child Care Payment and Subsidy to Each Provider

Now I've some more questions about the regular child care arrangements you use for your child/children whether you used them last week or not.

/* HAS THIS PAYMENT FOR THIS CHILD IN THIS ARRANGEMENT ALREADY BEEN COVERED IN A PREVIOUS LOOP 'S RESPONSE TO QP4C? IF YES, SKIP TO P11. ELSE, ASK P1*/

P1. (Starting with the youngest child,) Does (PROVIDER FILLED IN FROM Q1) charge you anything directly for the care of (CHILD)? Please include charges even if you are later reimbursed.

1. YES ->GO TO P6
2. NO -> GO TO INSTRUCTION ABOVE P10

P2. Is the [provider] paid by someone or someplace else for the care of (CHILD)? Do not include payments, reimbursements or vouchers that go directly to you.

1. YES
2. NO ->GO TO P5
7. DON'T KNOW
8. REFUSED

P3. Who pays them? MARK ALL THAT APPLY

- 1.WELFARE OR OFFICE OF EMPLOYMENT SERVICES
- 2.AGENCY FOR CHILD DEVELOPMENT
- 3.LOCAL OR COMMUNITY PROGRAM
- 4.COMMUNITY OR RELIGIOUS GROUP
- 5.FAMILY OR FRIEND
- 6.EMPLOYER
- 7.OTHER
- 8.DON'T KNOW
- 9.REFUSED

P4. In addition to the payments made by (this source/these sources), do you have a co-payment? In other words, do you need to pay [PROVIDER] yourself with money out of your own pocket?

1. YES
2. NO ->GO TO P8
3. DON'T KNOW ->GO TO P8
4. REFUSED ->GO TO P8

P4A. How much do you pay yourself?

P4B. Is that per hour, per day, per week, bi-weekly, monthly, or something else?

- 1.HOURLY
- 2.DAILY
- 3.WEEKLY
- 4.BI-WEEKLY
- 5.MONTHLY
- 6.SOMETHING ELSE (SPECIFY:_____)

P4c. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or for more than one child?

1. CHILD ONLY
2. OTHER CHILDREN (Which children? _____)

P5 So this care is provided free by [provider]?

1. YES ->GO TO P8
2. NO ->GO TO P2
7. DON'T KNOW-> GO TO P8
8. REFUSED->GO TO P8

P6. Now think about the money you pay for [provider]. Sometimes the amount of money that a parent is charged for a child care arrangement or program depends on how much the family earns. This is sometimes called a sliding fee scale. Is the amount you are charged for the care provided by [provider] determined by how much money you earn?

1. YES
2. NO
7. DON'T KNOW
8. REFUSED

P7A. How much do you pay this [provider]?

\$_____

P7AA. Is that per hour, per day, per week, bi-weekly, monthly, or something else?

1. HOURLY
2. DAILY
3. WEEKLY
4. BI-WEEKLY
5. MONTHLY
6. SOMETHING ELSE (SPECIFY:_____)

P7AB. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or for more than one child?

1. CHILD ONLY
2. OTHER CHILDREN (Which children? _____)

P8. Is [provider] *also* paid or reimbursed directly by any person or program? Do not include payments, reimbursements or vouchers that went directly to you.

1. YES
2. NO ->GO TO S1
3. DON'T KNOW->GO TO S1
4. REFUSED ->GO TO S1

P8A. Who pays them? MARK ALL THAT APPLY

1. WELFARE OR OFFICE OF EMPLOYMENT SERVICES
2. AGENCY FOR CHILD DEVELOPMENT
3. LOCAL OR COMMUNITY PROGRAM
4. COMMUNITY OR RELIGIOUS GROUP
5. FAMILY OR FRIEND
6. EMPLOYER
7. OTHER

- 8.DON'T KNOW
- 9.REFUSED

P9A. Do you receive payments, reimbursements or vouchers that are paid directly to you to cover some portion of the payments you make to [provider] for (CHILD)'s care?

- 1.YES
- 2. NO-> GO TO S1
- 3. DON'T KNOW -> GO TO S1
- 4. REFUSED -> GO TO S1

P9B. How much do you receive in payments, reimbursements or vouchers that are paid directly to you for [provider]?
\$ _____

P9BB. Is that per hour, per day, per week, bi-weekly, monthly, or something else?

- 1.HOURLY
- 2.DAILY
- 3.WEEKLY
- 4.BI-WEEKLY
- 5.MONTHLY
- 6.SOMETHING ELSE (SPECIFY:_____)

P9BC. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or for more than one child?

- 1. CHILD ONLY
- 2. OTHER CHILDREN (Which children? _____)

[ASK P10 AND P11 FOR FIRST CHILD WITH EACH PROVIDER ONLY.]

P10. Do you (also) give [provider] anything other than money in exchange for caring for [CHILD]? For example, do you provide groceries or transportation, or do work such as caring for children or small repair jobs in exchange for the care that {} receives?

- 1 YES
- 2 NO

P10a. What do you give [provider] in exchange for caring for your (child/children)?

- 1 groceries
- 2 transportation
- 3 services such as child-care or small repair jobs

P10b. What does it cost you to provide these things? \$ _____

P10b1. Is that per week, per month, or something else?

- 1 Per week
- 2 Per month
- 3 Something else _____

P10b2. How much time do you spend providing these things? _____ Hours

P10b3. . Is that per week, per month, or something else?

- 1 Per week
- 2 Per month
- 3 Something else _____

P11. Do you occasionally give gifts or help out [provider] even if it's not regular payment for caring ou're your (child/children)?

- 1 Yes
- 2 No

P11a. What does it cost you to provide these gifts or help? \$ _____

P11a1. Is that per week, per month, or something else?

- 1 Per week
- 2 Per month
- 3 Something else _____

P11a2. How much time do you spend providing these gifts or help? _____ Hours

P11a3. Is that per week, per month, or something else?

- 1 Per week
- 2 Per month
- 3 Something else _____

REPEAT P1 TO P12ab FOR ALL NON-PARENTAL, NON-SCHOOL PROVIDERS MENTIONED IN Q1 FOR ALL CHILDREN UNDER 13.

P12. You said that the [amount per unit] you pay to [arrangement] includes your payments for [CHILD] as well, is that correct?

- 1 Yes (GO TO INSTRUCTION BELOW P12AB)
- 2 No (ASK P12A)

P12A. How much do you pay this [provider]?
\$ _____

P12AA. Is that per hour, per day, per week, bi-weekly, monthly, or something else?

- 1.HOURLY
- 2.DAILY
- 3.WEEKLY
- 4.BI-WEEKLY
- 5.MONTHLY
- 6.SOMETHING ELSE (SPECIFY: _____)

P12AB. (IF R HAS MORE THAN ONE CHILD WHO USES PROVIDER) Is that amount for (CHILD) only, or for more than one child?

- 1. CHILD ONLY
- 2. OTHER CHILDREN (Which children? _____)

<REPEAT P1 TO P12aB FOR ALL NON-PARENTAL, NON-SCHOOL PROVIDERS MENTIONED IN Q1 FOR ALL CHILDREN UNDER 13>

P10. Do you plan to take a Child and Dependent Care Federal Income Tax Credit for the 2009 tax year?

- 1 Yes
- 2 No

Household Characteristics

H1. In order to better understand how families and child-care providers interact, we'd like to be able to study your household in relation to the child-care providers that are located near you. Could I have the street address where your household is located? IF NEEDED: Your answers to this and all other questions will be confidential and released only in statistical form. IF NEEDED: Could I know just the zip code and the intersection nearest your house? You can just tell me the two cross-streets

Street Address _____
City _____ ZIP _____ State _____

OR

ZIP _____
Street 1 _____
Street 2 _____

H1. Do [you/you or your spouse/you or your partner] own this (house/apartment), do you rent, or something else?

- 1 OWN
- 2 RENT
- 3 OTHER, NEITHER OWN NOR RENT

H1A (IF OTHER TO H1:) What is your situation?

- 1 Live with parent(s)
- 2 Live with spouse's/partner's parent(s)
- 3 Housing is part of job compensation; live-in servant; housekeeper; gardener; farm laborer
- 4 Housing is a gift paid for by an HU resident other than R or spouse/partner
- 5 Housing is a gift paid for by a friend or relative outside of the HU
- 6 Housing paid for by a government agency/welfare/charitable institution
- 7 Sold home, not moved out of it yet
- 8 Living in house which R will inherit; estate in progress
- 9 Living in temporary quarters (garage, shed) while home is under construction
- 10 Live here without formal arrangements; staying temporarily; squatting
- 97 Other

H2. Do you have a car?

- 1 Yes
- 2 No

H3. In order to understand whether or not child care is affordable to American families, we need to know your household's income. Approximately what was your total income last month? IF NEEDED: Please include the income of anyone who contributes to household expenses and child care costs, also include any child support you may receive if that contributes to household expenses or child care costs. Also include income from pensions or from government programs like food stamps or unemployment insurance.

\$ _____ (ask H3b)
IF DK/REF, GO TO H3B

H3a. Is that before or after taxes and other deductions?

- 1 before taxes
- 2 after taxes
- 3 don't know

SKIP TO H4.

H3b. [if DK/REF] Let me assure you that your responses to this and all other questions in this survey will not be revealed to any agency except in summary form for all study participants combined. Which of the following categories do you think best describes your income after taxes from all sources last month. Just stop me when I get to the right category:

- 1 Less than \$1200
- 2 \$1200 to \$1999
- 3 \$2000 to \$2999
- 4 \$3000 to \$4199
- 5 \$4200 to \$5499
- 6 \$5500 or more

H3A1. And how about all of last year. What is the total amount of income you yourself made in last calendar year through wages, salary, commissions, bonuses, or tips from all jobs? Please report the total amount before deductions for taxes, bonds, due or other items.

TOTAL AMOUNT FOR THE PAST 12 MONTHS: \$ _____

IF DK THEN GO TO H3A1_DK.

IF REFUSED THEN GO TO H3A1_REF.

H3A1_DK. You may not be able to give us an exact figure for your income through wages, salary, commissions, bonuses, or tips from all jobs in last calendar year, but was it

- a) less than \$8,000,
- b) \$8,000 to less than \$15,000
- c) \$15,000 to less than \$25,000
- d) \$25,000 to less than \$40,000
- e) \$40,000 to less than \$60,000
- f) \$60,000 or more?

H3A1_REF. Income is important in analyzing the child care demand information we collect. For example, this information helps us to learn whether persons in one group use non-parental child care more or less than those in another group. Now you may not be able to give us an exact figure, but was your personal income last year through wages and salaries from all jobs

- g) less than \$8,000,
- h) \$8,000 to less than \$15,000
- i) \$15,000 to less than \$25,000
- j) \$25,000 to less than \$40,000
- k) \$40,000 to less than \$60,000
- l) \$60,000 or more?

H3A2. In the last calendar year did you receive any public assistance or welfare payments from the state or local welfare office?

1. YES ->GO TO H3A2_AMT
2. NO ->GO TO H3A3

H3A2_AMT: What is the total amount of public assistance or welfare payments you received in the last calendar year?
\$ _____

IF DK THEN ASK H3A2_DK.

IF REFUSED THEN ASK H3A2_REF.

H3A2_DK. You may not be able to give us an exact figure for the public assistance or welfare payments you received in the last calendar year, but was it

- a) less than \$500
- b) \$500 to less than \$1000
- c) \$1000 to less than \$1500
- d) \$1500 to less than \$2000
- e) \$2000 to less than \$5000
- f) \$5000 or more

H3A2_REF. Income information is important in analyzing the child care demand information we collected. You may not be able to give us an exact figure for the public assistance or welfare payments you received in the last calendar year, but was it

- a) less than \$500
- b) \$500 to less than \$1000
- c) \$1000 to less than \$1500
- d) \$1500 to less than \$2000
- e) \$2000 to less than \$5000
- f) \$5000 or more

H3A3. Did you have any income from alimony or child care support in the last calendar year?

- 1. YES->GO TO H3A3_AMT
- 2. NO->GO TO H3B

H3A3_AMT. What is the total amount of alimony or child care support you received in the last calendar year?

IF DK, ASK H3A3_DK.

IF REFUSED, ASK H3A3_REFUSED.

H3A3_DK. You may not be able to give us an exact figure for the amount of alimony or child care support you received in the last calendar year, but was it

- a) less than \$500
- b) \$500 to less than \$1000
- c) \$1000 to less than \$1500
- d) \$1500 to less than \$2000
- e) \$2000 to less than \$5000
- f) \$5000 or more

H3A3_REF. Income information is important in analyzing the child care demand information we collected. You may not be able to give us an exact figure for the amount of alimony or child care support you received in the last calendar year, but was it

- a) less than \$500
- b) \$500 to less than \$1000
- c) \$1000 to less than \$1500
- d) \$1500 to less than \$2000
- e) \$2000 to less than \$5000
- f) \$5000 or more

IF R HAS SPOUSE/PARTNER, ASK H3B.

H3B What is the total amount of income your spouse/partner made in last calendar year through wages, salary, commissions, bonuses, or tips from all jobs? Please report the total amount before deductions for taxes, bonds, due or other items.

TOTAL AMOUNT FOR THE PAST 12 MONTHS: \$ _____

IF DK THEN GO TO H3B_DK.

IF REFUSED THEN GO TO H3B_REF.

H3B_DK. You may not be able to give us an exact figure for his/her income through wages, salary, commissions, bonuses, or tips from all jobs in last calendar year, but was it

- a) less than \$8,000,
- b) \$8,000 to less than \$15,000
- c) \$15,000 to less than \$25,000
- d) \$25,000 to less than \$40,000
- e) \$40,000 to less than \$60,000
- f) \$60,000 or more?

H3B_REF. Income is important in analyzing the child care demand information we collect. For example, this information helps us to learn whether persons in one group use non-parental child care more or less than those in another group. Now you may not be able to give us an exact figure, but was his/her personal income last year through wages and salaries from all jobs

- a) less than \$8,000,
- b) \$8,000 to less than \$15,000
- c) \$15,000 to less than \$25,000
- d) \$25,000 to less than \$40,000
- e) \$40,000 to less than \$60,000
- f) \$60,000 or more?

H3C. Did your household have any other source of income in the last calendar year that we haven't talked about yet?

- 1. YES->GO TO H3C_AMT
- 2. NO

H3C_AMT: What is the total amount of other income you had in the last calendar year?

\$ _____

H3C_DK. You may not be able to give us an exact figure for, but was it

- a) less than \$2,500,
- b) \$2,500 to less than \$5,000,
- c) \$5,000 to less than \$7,500
- d) \$7,500 to less than \$10,000
- e) \$10,000 to less than \$12,500
- f) \$12,500 to less than \$15,000
- g) \$15,000 to less than \$20,000
- h) \$20,000 or more?

H3C_REF. Income is important in analyzing the child care demand information we collect. You may not be able to give us an exact figure, but was it...

- a) less than \$2,500,

- b) \$2,500 to less than \$5,000,
- c) \$5,000 to less than \$7,500
- d) \$7,500 to less than \$10,000
- e) \$10,000 to less than \$12,500
- f) \$12,500 to less than \$15,000
- g) \$15,000 to less than \$20,000
- h) \$20,000 or more?

H4. Did you take a Child or Dependent Care Federal Income Tax Credit when you filed your 2008 income taxes?

- 1 Yes
- 2 No
- 3 Didn't file/Haven't filed yet
- 4 Don't know

CON7 Thank you very much for speaking with me today. Those are all of the questions I have for you. We are grateful for your contribution to our improved understanding of the experiences and preferences of parents with young children regarding the care that those children receive [outside of the school day].