

**APPENDIX L**  
**YOUTH FOOD BOOKLET**



The U.S. Department of Agriculture's

OMB Control Number:  
Expiration Date:

## The National Food Study

### Youth Booklet

For foods you get when not with a parent or guardian



First Day: \_\_\_\_\_

Last Day: \_\_\_\_\_

Booklet for: \_\_\_\_\_



## About the Study

The **National Food Study** is collecting information from households throughout the United States. This study will answer questions like:

- Where do people get their food?
- What types of food do people get?
- How often do people get food?
- How much money do people spend on food?

Your family has agreed to take part in this national study.

**Help us make sure that kids count!  
We need your help!**

For the next week we want you to keep track of all the foods and drinks you buy or get for free.

- **Use** this book to track foods and drinks that you get when you are not with a parent or guardian
- **Give** your book to your parent or guardian on days 2, 5, and 7 when they call us to report the foods your family got
- **Earn** \$20 for completing this book
- **Help** us to make the National Food Study a big success!

Remember ... the information that you provide will be kept confidential. Your name will be removed from your book after it is received. Your answers, and all the information provided by your household, will be grouped with others.

**HOW to USE This Food Book**  
 Follow these easy **STEPS** every day!

**1** **START** a new **red page** for each place where get food from outside your home

**2** **WRITE CLEARLY** and be careful when writing numbers

**3** **DESCRIBE** each food and drink that you get

**4** **SAVE** receipts and tape them to the back pages

QUESTIONS? Call 1-866-275-8659

**Remember ...**

- Write down foods and drinks you got **ON YOUR OWN** when you were not with your parent or guardian
- Write each food and drink on a separate line
- Don't tell us what you **EAT**, tell us what you **GET!**

**Ways to Describe Food and Drinks**

<i>What to look for....</i>	<i>Examples....</i>
√ The <b>BRAND</b> or product name	Pepsi, Doritos, Gatorade, Dannon Yogurt
√ The <b>TYPE</b> of food	White or whole wheat bread, chicken nuggets or grilled chicken breast
√ The <b>FORM</b> of the food	Raw carrots or cooked carrots
√ The <b>FLAVOR</b>	Chocolate milk, oatmeal cookie, or vanilla yogurt
√ The <b>FAT</b> and <b>SUGAR</b>	Whole milk or 1% milk; regular or diet soda; 100% juice or fruit-flavored drink
√ Things you <b>ADDED</b>	Butter on bread, ketchup on fries, dressing on salad

Write down the **size** or **weight** if it is on the package (such as 12 oz can of soda) and how many you got (such as 2 cookies).

**Save receipts** in pocket at back page

## Meals, Snacks, and Drinks

Complete one RED page each time you get food or drinks outside your home

(√) DAY you got food	<input type="checkbox"/> Mon	<input checked="" type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun
Name of PLACE where you got food:	School cafeteria						
(√) CHECK the meal or snack	<input type="checkbox"/> Breakfast	<input checked="" type="checkbox"/> Lunch	<input type="checkbox"/> Dinner/Supper	<input type="checkbox"/> Snack/drink			
TOTAL PAID (including tax)	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input checked="" type="checkbox"/> (√) if free						
Complete this section if you DO NOT have a receipt or the receipt DOES NOT list each food item							
Write each food and drink on a separate line	Write size or amount if you know it (S, M, L or ounces, grams, lbs, etc.)	How many?	Amount paid				
Bean & Cheese burrito with salsa & sour cream		1					
Spanish rice		1					
Chocolate milk - 1%	8 oz.	1					

**SAMPLE**

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Name of PLACE where you got food:	McDonalds						
(√) CHECK the meal or snack	<input type="checkbox"/> Breakfast	<input type="checkbox"/> Lunch	<input checked="" type="checkbox"/> Dinner/Supper	<input type="checkbox"/> Snack/drink			
TOTAL PAID (including tax)	\$ 6.93 <input type="checkbox"/> (√) if free						
Complete this section if you DO NOT have a receipt or the receipt DOES NOT list each food item							
Write each food and drink on a separate line	Write size or amount if you know it (S, M, L or ounces, grams, lbs, etc.)	How many?	Amount paid				
Quarter pounder with cheese		1	\$3.45				
French fries	Large	1	\$1.89				
Coke	Large	1	\$1.59				

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<b>Name of PLACE where you got food:</b>							
<b>(√) CHECK the meal or snack</b>	<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner/Supper <input type="checkbox"/> Snack/drink						
<b>TOTAL PAID (including tax)</b>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> (√) if free						
Complete this section if you <b>DO NOT</b> have a receipt or the receipt <b>DOES NOT</b> list each food item							
Write each food and drink on a separate line	Write size or amount if you know it (S, M, L or ounces, grams, lbs, etc.)	How many?	Amount paid				

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## Questions and Answers *(continued)*

### Q: Should I estimate or guess the amount or size?

A: No. Write the amount (for example, the number of ounces or grams) or the size (for example, small, medium, large) only if it is listed on a package or menu.

### Q: What should I do if someone buys food for me?

A: If someone buys food for you, list the place where they got the food and write down \$0.00 for the total paid since the food was free.

### Q: What should I do if I only paid for part of the meal?

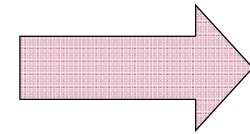
A: If you have a receipt but you only paid for part of the meal, circle the items that you paid for and write the amount that you paid.

Still have questions? Call us! We're here to help!

**1-866-275-8659**

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**SAVE** receipts in  
pocket



According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX. The time required to complete this information collection is estimated to average 53 minutes per week, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.



The National Food Study is a project of the United States Department of Agriculture Economic Research Service. To learn more, go to [www.usdafoodstudy.org](http://www.usdafoodstudy.org).