**Attachment D: Instructions to States for submitting Excel spreadsheets with participant contact lists**

**Characteristics and Circumstances of Zero-Income SNAP Households**

**INSTRUCTION SHEET FOR SUBMITTING DATA FILES**

**Contents of the lists:** Please submit a list of all SNAP units who either applied and were deemed eligible or were recertified AND declared zero gross income *in January, February, or March 2012*. **Table a** below provides a list of the variables that Insight is requesting to select the sample. **Table B** provides an example of what the spreadsheet will look like.

**Deadline for list submission:** Please submit the lists by **April 20, 2012.** Insight plans to conduct interviews throughout the spring of 2012.

**Method of transmission:** To protect these data, you will be able to submit the data in either of two ways.

1. A secure file transfer site which encrypts both commands and data, preventing passwords and sensitive information from being accessed during transmission, or
2. States can mail the files directly to FNS on a password-protected CD with the password communicated under separate cover (i.e., with a phone call to the Project Officer, Melissa Abelev).

Please submit the data using a secure FTP protocol via the Web site ftp://insightpolicyresearch.com. You will receive the login information under separate cover. Alternatively, you can submit the data directly via password-protected CD to Melissa Abelev, Ph.D., Office of Research and Analysis, 3101 Park Center Drive, Alexandria, VA, 22302. We will accept the file in any format; however, we prefer these data in Microsoft Excel format.

**Data Security:** In both methods, the data will require user authentication (login and password), provide appropriate firewalls, and encrypt stored data. Personally identifiable information will be available only to project staff with a need to know for the purposes of data collection or data editing. The analysis will be performed on secondary files from which the identifying data have been deleted, and ***no identifiers will be disclosed in reports***.

**TABLE A: Requested Variables List**

Zero-Gross Income SNAP Units

***(Note: See Table B for an example of the list)***

| **Column** | **Variable Name** | **Description** | **Data Format** |
| --- | --- | --- | --- |
| 1. | Case ID  | State-Assigned ID Number | Character |
| 2. | Last Name | Household Head: Contact Person Last Name | Character |
| 3. | First Name | Household Head: Contact Person First Name  | Character |
| 4. | Street Address | Street Address (number and street) | Character |
| 5. | Apartment No. | Apartment Number  | Character |
| 6. | City | City  | Character |
| 7. | State | State | Character |
| 8. | ZIP Code | ZIP Code | Character |
| 9 | Primary Phone Number | 10-Digit Phone Number | Character |
| 10. | Alternate Phone Number | 10-Digit Phone Number | Character |
| 11. | Gross Income | Gross Annual Income at Most Recent Certification Date (note: must be 0) | Numeric  |
| 12. | Household Size | Number of Persons in Household | Numeric |
| 13. | Date of Recertification (or, if new applicant, application date) | Date of New Application or Recertification (whichever is most recent) | Numeric (mm/dd/yyyy) |
| 14. | Age | Age of Household Head | Numeric |
| 15. | Primary Language Spoken | Whether Primary Language Is Spanish or English | Character |
| 16. | ABAWD Status  | Whether Household Head Is an ABAWD | Character |

**TABLE B: Example Spreadsheet**

Zero-Gross Income SNAP Units

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|   | Case ID  | Last Name | First Name | Street Address | Apt. No. | City | State | ZIP Code | Primary Phone # | Alternate Phone # | Gross Income | Household Size | Date of Recertification (or, application date) | Age | Primary Language Spoken | ABAWD Status  |
|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
| Client X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
| Client Y |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
| Client Z |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
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