

# Modified 2010 CEQ Interview Specifications for Records Study

Section #	Part	Variable Name	Question Text	Skip Instructions
02	-	STLRENT	<p>Last time [YOU_YRCU] reported renting these living quarters. Do you still rent?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> <li>3. No - buying the sample unit</li> </ol>	<p>&lt;1, D, R&gt; [Goto RENTED]                      &lt;2&gt; [Goto RTASPAY]                      &lt;3&gt; [Goto Section 3]</p>
02	-	OWNED	<p>Do you own this home?</p> <p>* Include households with mortgages as owners.</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1&gt; [goto Section 3]                      &lt;2, D, R&gt; [goto RENTED]</p>
02	-	RENTED	<p>Do [Fill: YOU_ANYMEM] [fill: still] pay rent for these living quarters?</p> <ol style="list-style-type: none"> <li>1. Yes</li> </ol>	<p>&lt;1, D, R&gt; [If Intmbr is 1 goto RENTX3]                      [goto RENTX1]                      &lt;2&gt; [goto RTASPAY]</p>
02	-	MOREMENT	<p>Since the first of [fill: REF_MONTH] have [fill: YOU_ANYMEM] rented any houses, apartments, or temporary living quarters NOT used entirely for business or vacation?</p> <p>* Do NOT include college or university regulated housing.</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1&gt; [If Intmbr is 1 goto RENTX3]                      [goto RENTX1]                      &lt;2,D,R&gt; [goto S2_END]</p>
02	-	RENTX1	<p>What was your total rental payment for [Fill: REF_MONTH] for this unit?                      Include any extra charges for garage or parking facilities, but do not include direct payments</p>	<p>&lt;0-9999999, D, R&gt; [goto RENTX2]</p>
02	-	RENTX2	<p>What was the total rental payment for [Fill: TWO_MONTH] for this</p>	<p>&lt;0-9999999, D, R&gt; [goto RENTX3]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
02	-	RENTX3	What was your total rental payment for [Fill: LAST_MON] for this unit?  [fill: Include any extra charges for garage or parking facilities, but do not include	<0-9999999, D, R> [goto RTELECT]
02	-	RTELECT	Does the rental payment include the cost of-  ...Electricity?  1. Yes 2. No	<1, 2, D, R> [goto RTGAS]
02	-	RTGAS	* Repeat if necessary Does the rental payment include the cost of-  ...Gas?  1. Yes 2. No	<1, 2, D, R> [goto RTWATER]
02	-	RTWATER	* Repeat if necessary Does the rental payment include the cost of-  ...Piped in water?  1. Yes 2. No	<1, 2, D, R> [goto RTHEAT]
02	-	RTHEAT	* Repeat if necessary Does the rental payment include the cost of-  ...Heating?  1. Yes 2. No	<1, 2, D, R> [goto RTTRASH]
02	-	RTTRASH	* Repeat if necessary Does the rental payment include the cost of-  ...Trash/garbage collection?	<1, 2, D, R> [goto RTPARK]

1. Yes
2. No

Section #	Part	Variable Name	Question Text	Skip Instructions
02	-	RTPARK	* Repeat if necessary Does the rental payment include the cost of-  ...Garage and parking facilities?  1. Yes 2. No	<1, 2, D, R> [goto RTASPAY]
02	-	RTASPAY	Did [Fill: YOU_ANYMEM] receive any reduced or free rent for this unit as a form of pay since the first of [Fill: REF_MONTH]?  1. Yes 2. No	<1> [goto RTCOMPX] <2, D, R> [goto RTBSNS]
02	-	RTCOMPX	What is the current monthly rental charge to another tenant for a similar unit?	<1-999999, D, R> [goto REGRNTX]
02	-	REGRNTX	What is your regular rental payment?	<0-999999, D, R> [goto RTBSNS]
02	-	RTBSNS	Is any portion of this unit used for your own business?  1. Yes 2. No	<1> [goto RTBSNSZ] <2, D, R> [If PSU = 06037, 06073, 06075, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017, 34023, 34027, 34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103, 36119, goto RENTCONT] [Else,
02	-	RTBSNSZ	What percent of the rental payment is counted as a business expense?  * Enter to the nearest whole percent.	<1-100, D, R> [If PSU = 06037, 06073, 06075, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017, 34023, 34027, 34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103, 36119, goto RENTCONT] [Else,
02	-	RENTCONT	Is this unit under rent control?  1. Yes 2. No	<1, 2, D, R> [goto MORERNT]

Section #	Part	Variable Name	Question Text	Skip Instructions
03	B	WHICH_PROP	<p>[fill: Now I'm going to ask some questions about your owned properties./</p> <p>Now I'm going to ask about your next property.]</p> <p>* Enter type of property</p> <p>[Fill: 2. Former Home]  3. Vacation prop, second home, recreational property  4. Unimproved land  5. Other Property</p>	<1-5> [goto PROPDESC]
03	B	PROPDESC	<p>[Fill: Now I'm going to ask some questions about your Sample Unit.]</p> <p>[Fill: * Briefly describe the [Fill: former home/Vac./sec./rec. prop or time share/unimproved land/other property] ].</p> <p>[Fill: * Press Enter to continue / * Enter 888 to delete this property.</p>	<30 characters> [If OWNYB = 300 goto TIMESHAR] [ELSE goto SHARED2] <888> [goto next property]
03	B	TIMESHAR	<p>? [F1]</p> <p>Is this a time-sharing arrangement where [Fill: YOU_YRCU] [Fill: HAVE_HAS2] use of the property only for a specified time each year?</p> <p>1. Yes  2. No</p>	<1>[goto SHARWKS] <2> [goto SHARED2]

Section #	Part	Variable Name	Question Text	Skip Instructions
03	B	SHARWKS	How many weeks per year can [fill: YOUR_YRCU] use your timeshare?	<1 - 52, D, R> [goto SHARED1]
03	B	SHARED1	[Fill: Do/Does] [fill: YOU_YRCU] own the timeshare with anyone else outside your household?  1. Yes 2. No	<1> [goto SHARPER1] <2, D, R> [goto COUNTRY]
03	B	SHARPER1	What percent of the timeshare [fill: do/does] [fill: YOU_YRCU] own?	<1 - 99, D, R> [goto COUNTRY]
03	B	SHARED2	[Fill: Do/Does] [fill: YOU_YRCU] share ownership of the property with anyone else?  1. Yes 2. No	<1> [goto SHARPER2] <2, D, R> [if OWNYB = 300, goto COUNTRY] [ELSE if INTNMBR = 2 - 5 and NEWCU is not 1 AND OWNYB ne 100 goto STILOWNB] [ELSE goto BSNSEXP]
03	B	SHARPER2	What percentage of the property [fill: do/does] [fill: YOU_YRCU]	<1 - 99, D, R> [if OWNYB = 300, goto COUNTRY] [ELSE, if INTNMBR = 2 - 5 AND NEWCU is not 1 AND OWNYB NE 100 goto STILOWNB] [ELSE, goto BSNSEXP]
03	B	COUNTRY	* Ask if not apparent * If this is a timeshare with multiple locations, select the most often used location.  Where is the property located?  1. United States 2. Foreign Country	<1> [goto STATE] <2, D, R> [if INTNMBR = 2 - 5 AND NEWCU is not 1 and OWNYB ne 100 goto STILOWNB] [ELSE goto BSNSEXP]
03	B	STATE	* Enter the two character State abbreviation	< 2 character state abbreviation, D, R> [goto CNTYCODE]
03	B	CNTYCODE	What county is the property located in?  * If the county name is not found, key X.	<30 characters, D, R> [if INTMBR = 2 - 5 AND NEWCU is not 1 AND OWNYB ne 100 goto STILOWNB] [ELSE goto BSNSEXP']

Section #	Part	Variable Name	Question Text	Skip Instructions
03	B	OTHCNTY	* Specify other county	<30 characters> [If INTNMBR = 2 - 5 AND NEWCU is not 1 AND OWNYB ne 100 goto STILOWNB [ELSE goto BSNSEXP]
03	B	STILOWNB	* Ask if not apparent  Do you still own this property?  1. Yes 2. No	<1, 2, D, R> [goto BSNSEXP]
03	B	BSNSEXP	[Fill: Are/Were] any of the expenses for this property deducted as business, farm, or rental expenses?  1. Yes 2. No	<1> [goto OBSNSZB] <2,D,R> [goto ACQUIRYR]
03	B	OBSNSZB	What percent of the expenses for this property [Fill: are/were] deducted?	<1-99, D, R> [goto ACQUIRYR] <100> [goto Next property, If no more properties, goto S3I_END]
03	B	ACQUIRYR	In what year did [Fill: YOU_YRCU] close or settle on this property?	<1900 - 9999, D, R> [goto ACQUIRMO]
03	B	ACQUIRMO	In what month did [Fill: YOU_YRCU] close or settle on this property?	<1 - 12, D, R> [If ACQUIRMO/ACQUIRYR are within the reference period, goto GIFTPROP] [Else, goto ANPROPTX]
03	B	GIFTPROP	Was this property received as a gift or inheritance?  1. Yes 2. No	<1,D,R> [goto ANPROPTX] <2> [goto OWN_PURX]
03	B	OWN_PURX	(Book) 6 ? [F1]  What was the total price paid for [Fill: this/the] property, not including closing costs? Closing costs include the kinds of things listed	<0-99999999, D,R> [goto CLOSECST]
03	B	CLOSECST	(Book) 6 ? [F1]  About how much were the closing costs?	<0-99999999, D,R> [goto OWNDPMTX]

Section #	Part	Variable Name	Question Text	Skip Instructions
03	B	H_CLOSECOST	Section 3 - OWNED LIVING QUARTERS AND OTHER OWNED REAL ESTATE  Closing Costs: Advertising costs                      Property survey charges Deed preparation                        Recording fees Escrow payment                         Title search Lawyer's fees                             Transfer taxes Points paid by buyer                 Real estate listing service fees	<Esc> [go back to OWN_PURX or CLOSECST]
03	B	OWNDPMTX	What was the amount of the down payment?	<0-99999999, D,R> [goto ANPROPTX]
03	B	ANPROPTX	What [Fill: are/were] the annual property taxes for [Fill: this/the]	<0-99999999, D,R> [If OWNYB = 400 goto S3B_END] [Else if OWNYB ne 400 AND NOT (OWNYB = 100 AND BUILDING (from Section 1C) = 1, 9 , 10] go to PROPTYPE] [Else goto S3B_END]
03	B	PROPTYPE	* Ask if not apparent. * If respondent doesn't know or refuses select pre-code 3.  [Fill: Is/Was] this property a -  1. Condominium? 2. Cooperative? 3. Something else?	<1-3> [goto S3B_END]
03	B	S3B_END	** CHECK ITEM **	[If STILOWNB = 2, goto Section 3D] [ELSE goto Section 3E]
03	E	PRESMORT	Now I am going to ask about mortgages for your [Fill: PROPDESC]. Excluding home equity loans, [Fill: and reverse mortgages], [Fill:do/does] [Fill: YOU_YRCU] presently have a mortgage on your [Fill: PROPDESC]?  1. Yes 2. No	<1> [goto NUMMORT1] <2, D, R> [goto HADMORT]
03	E	NUMMORT1	How many mortgages [Fill: HAVE_HAS2] [Ffill: YOU_YRCU] had on this property since the first of [Fill: REF_MONTH]?	<1-8, D, R> [goto HOMEQ_YN]



Section #	Part	Variable Name	Question Text	Skip Instructions
03	E	HADMORT	<p>[Fill: HAVE_HAS1] [Fill: YOU_YRCU] had a mortgage on this property since the first of [Fill: REF_MONTH]?</p> <p>1. Yes</p>	<p>&lt;1&gt; [goto NUMMORT2] &lt;2, D, R &gt; [goto HOMEQ_YN]</p>
03	E	NUMMORT2	<p>How many mortgages [Fill: HAVE_HAS2] [Fill: YOU_YRCU] had on this property since the first of [Fill: REF_MONTH]?</p>	<p>&lt;1-8, D, R&gt; [goto HOMEQ_YN]</p>
03	E	MRTCPSHA	<p>Since the first of [Fill: REF_MONTH], in addition to [Fill: YR_YRCUS] share of the cooperative's total costs, did [Fill: YOU_YRCU] make payments on a mortgage that was obtained from an outside lender for [Fill: YR_YRCUS] shares in the cooperative?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto NUMMORT3] &lt;2, D, R&gt; [goto HOMEQ_YN]</p>
03	E	NUMMORT3	<p>How many mortgages [Fill: HAVE_HAS2] [Fill: YOU_YRCU] had on this property since the first of [Fill: REF_MONTH]?</p>	<p>&lt;1-8, D, R&gt; [goto HOMEQ_YN]</p>
03	E	HOMEQ_YN	<p>[Fill: Do/Does] [Fill: YOU_YRCU] have a home equity loan or any other loan which gives the lender claim on this property in case the loan is not repaid?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto LSHEL_YN] &lt;2, D, R&gt; [goto S3E_END]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
03	E	LSHEL_YN	<p>[Fill: There are two basic types of home equity loans. I'll describe both types.</p> <p>- A loan where [Fill: YOU_YRCU] received the entire lump-sum borrowed when [Fill: YOU_YRCU] took out the loan; or  - A line of credit loan where [Fill: YOU_YRCU] can increase the amount borrowed by simply writing a check or using a special credit card.]</p> <p>[Fill: HAVE_HAS] [Fill: YOU_YRCU] had a lump sum home equity loan on this property since the first of [Fill: REF_MONTH]?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1&gt; [goto NUMLSHEL]  &lt;2, D, R&gt; [goto LCHEL_YN]</p>
03	E	NUMLSHEL	How many?	<1-8,D,R> [goto LCHEL_YN]
03	E	LCHEL_YN	<p>[Fill: HAVE_HAS] [Fill: YOU_YRCU] had a line of credit home equity loan on this property since the first of [Fill: REF_MONTH]?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1&gt; [goto NUMLCHEL]  &lt;2, D, R&gt; [goto S3E_END]</p>
03	E	NUMLCHEL	How many?	<1-6, D,R> [goto S3E_END]
03	F	ORG_INTR	Now I will ask some questions about your [Fill: 1st/2nd, 3rd, etc.] [Fill: mortgage/lump sum home equity loan]. These questions refer to the [Fill: mortgage/lump sum home equity loan] you are currently making	<p>&lt;1&gt; Continue [goto ORGMRTX]  &lt;2&gt; Delete the loan [goto S3FG_END]</p>
03	F	ORGMRTX	What was the amount of the [Fill: mortgage/lump sum home equity loan] when [Fill: YOU_YRCU] first obtained it, not including any interest?	<1-99999999, D,R> [goto FRSTPYR]
03	F	FRSTPYR	In what year did [Fill: YOU_YRCU] make the first payment on this [Fill: mortgage/lump sum home equity loan]?	<1900-9999, D,R> [goto FRSTPYMO]
03	F	FRSTPYMO	In what month did [Fill: YOU_YRCU] make the first payment on this [Fill: mortgage/lump sum home equity loan]?	<1 - 12, D, R> [goto MTERM]

Section #	Part	Variable Name	Question Text	Skip Instructions
03	F	MTERM	<p>Is this a 30 year [Fill: mortgage/lump sum home equity loan], a 15 year</p> <p>[Fill: mortgage/lump sum home equity loan], or something else?</p> <p>1. 30-year 2. 15-year</p>	<p>&lt;1, 2, D, R&gt; [goto NEWMRRT] &lt;3&gt; [goto MORTTERM]</p>
03	F	MORTTERM	* Enter number of years	<1-50, D,R> [goto NEWMRRT]
03	F	S3FG_ERR	* Soft Edit	<Suppressed> [goto NEWMRRT]
<p>-----</p> <p>-----</p> <p>* Number of payments made to date is greater than the mortgage term</p> <p>Please verify.</p> <p>-----</p> <p>-----</p> <p>Question involved   Value</p> <p>-----</p> <p>(MTERM: mortgage term or MORTTERM: other mortgage term) FRSTPYR: Payment Year</p> <p>-----</p> <p>Close     Suppress   Goto  </p> <p>-----</p>				
03	F	NEWMRRT	<p>What is the current interest rate on this</p> <p>[Fill: mortgage/lump sum home equity loan]?</p>	<00.000 - 99.999, D, R> [goto FIXEDRTE]
03	F	FIXEDRTE	<p>* Enter percent including decimal</p> <p>Is this a fixed rate [Fill: mortgage/lump sum home equity loan]?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto PAYINCL] &lt;2, D,R&gt; [goto PAYTYPE]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
03	F	PAYTYPE	<p>There are many different kinds of [Fill: mortgage/lump sum home equity loan]s. Which of these comes closest to [Fill: YRS_YRCS]?</p> <p>*Read each item on list *Mark all that apply, separate with commas</p> <ol style="list-style-type: none"> <li>1. Variable or adjustable rate of interest (ARM)</li> <li>2. Interest only</li> <li>3. Other - specify</li> </ol>	<1-3, D, R> [If precode 3 is included goto PAYTOTHF], else [goto PAYINCL]
03	F	PAYTOTHF	* Specify:	<30 characters> [goto PAYINCL]
03	F	PAYINCL	<p>(Book) 7 [F1]</p> <p>On [Fill: YR_YRCUS] last payment, which of these things were included?</p> <p>* Read each item on list.</p> <p>* Enter all that apply, separate with commas.</p> <ol style="list-style-type: none"> <li>1. Principal</li> <li>2. Interest</li> <li>3. Property taxes</li> <li>4. Property insurance</li> <li>5. Mortgage guarantee insurance (PMI)</li> <li>6. Any other payments - specify</li> </ol> <p>77. Don't know</p>	<p>&lt;1-5, 77, R&gt; [[if FIXEDRTE = 1 goto MRTPMTX], else [if INTNMBR ne 1goto PAYMTX1], else [goto PAYMTX3] &lt;6&gt; [If 6 selected, goto PAYOTHF]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
03	F	S3FG_ER2	<p>* Soft Edit</p> <p>----- -----</p> <p>* Principal and interest were not included in the mortgage payment.</p> <p>Please verify.</p> <p>----- -----</p> <p>Question involved   Value</p> <p>----- -----</p> <p>PAYINCL: Payment includes</p> <p>----- -----</p> <p>  Suppress   Goto  </p> <p>Close  </p> <p>----- -----</p>	<p>&lt;Suppressed&gt; [If 6 selected in PAYINCL, goto PAYOTHF]</p> <p>Else [If FIXEDRTE = 1 goto MRTPMTX], else [if INTNMBR ne 1 goto PAYTMX1], else {goto PAYMTX3}</p>
03	F	PAYOTHF	* Specify:	< 30 characters> [If FIXEDRTE = 1 goto MRTPMTX], else [If INTNMBR ne 1 goto PAYMTX1], else goto PAYMTX3]
03	F	MRTPMTX	How much is [fill: YR_YRCUS] [Fill: mortgage/lump sum home equity loan] payment per month?	<1-99999999, D, R> [If any codes 3-6 are selected in PAYINCL goto PRNINTX] [Else goto
03	F	PRNINTX	How much of that amount was for [fill:principal/interest/ and/orprincipal and interest]?	<0-99999999, D, R> [goto S3FG_END]
03	F	PAYMTX1	How much was [Fill: YR_YRCUS] payment on this [Fill: mortgage/lump sum home equity loan] in [fill: REF_MONTH]?	<1-99999999, D, R> [if any codes 3-6 selected in PAYINCL goto PRNINTX1] else [goto PAYMTX2] If PAYMTX1 = 0 skip to the next payment (PAYMTX2)
03	F	PRNINTX1	How much of that amount was for [fill:principal/interest/principal and interest]?	<0-99999999, D, R> [goto PAYMTX2]
03	F	PAYMTX2	How much was [Fill: YR_YRCUS] payment on this [Fill: mortgage/lump sum home equity loan] in [fill: TWO_MONTH]?	<1-99999999, D, R> [if any codes 3-6 selected in PAYINCL goto PRNINTX2] else [goto PAYMTX3] If PAYMTX2 = 0 skip to next payment (PAYMTX3)

Section #	Part	Variable Name	Question Text	Skip Instructions
03	F	PRNINTX2	How much of that amount was for [fill:principal/interest/principal and interest]?	<0-99999999, D, R> [goto PAYMTX3]
03	F	PAYMTX3	How much was [Fill: YR_YRCUS] payment on this [Fill: mortgage/lump sum home equity loan] in [fill: LAST_MONTH]?	<1-99999999, D, R> [if any codes 3-6 selected in PAYINCL goto PRNINTX3] else [goto next loan], else [goto S3FG_END] If PAYMTX3 = 0 goto next loan, else goto S3FG_END
03	F	PRNINTX3	How much of that amount is for [fill:principal/interest/principal and	<0-99999999, D, R> [goto S3FG_END]
03	F	ORG_DEL	** OUT VARIABLE **	
03	H	PAIDLOAN	I'd like to ask some questions about [Fill: YR_YRCUS] line of credit home equity [Fill: loan/loans].  Since the first of [Fill: REF_MON], [Fill: HAVE_HAS2] [Fill: YOU_YRCU] made any payments for [Fill: your/your CU's] [Fill: loan/1st/2nd/3rd/etc. loan]?	<1> [goto PDAMTX1] <2, D, R > [goto TOTOWED] <888> [go to next loan]
			1. Yes 2. No 888. Delete this loan.	
03	H	PDAMTX1	What was the total amount paid in [fill: REF_MONTH]?	<0-99999999, D,R> [if INTNMBR = 1 goto TOTOWED] [else goto PDAMTX2]
03	H	PDAMTX2	What was the total amount paid in [fill: TWO_MONTH]?	<0-99999999, D,R> [goto PDAMTX3]
03	H	PDAMTX3	What was the total amount paid in [fill: LAST_MONTH]?	<0-99999999, D,R> [goto TOTOWED]
03	H	TOTOWED	How much was owed before the last payment?	<0-99999999, D,R> [goto S3H_END]
03	H	S3H_END	* Check Item *	[goto PAIDLOAN for next new loan with LOANTYPE = 3 for this property] [If no more new loans with LOANTYPE = 3, goto Section 3I]

Section #	Part	Variable Name	Question Text	Skip Instructions
04	A	S4A_INTRO	<p>(Book) 8</p> <p>* [Fill: Please jump to section 9 and collect clothing and sewing materials expenditures before asking about telephone expenses.]</p> <p>Now I am going to ask about bills for telephone services. Please refer to any billing statements or other records you have when answering these questions. Please remember to include any bills you receive or pay online or have automatically deducted. Report any telephone bill you have received, even if the bill has not been paid.</p>	<p>&lt;1&gt; [goto TELEBILL] &lt;NODK, NORF&gt;</p>
04	A	TELEBILL	<p>1. Enter 1 to Continue (Book) 8 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill YOU_ANYMEM] received any bills for telephone services, including cellular and Voice Over IP? Do not include bills for telephones used entirely for business purposes.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [If entry in any 8500.TELCOMP 1-20, goto PREVCOMP] [Else, goto TELCOMP &lt;2,D,R&gt; [goto S4A_END]</p>
04	A	PREVCOMP	<p>What is the name of the company which provides the service?</p> <p>[fill: 8500.TELCOMP] 55. Company name not listed 888. Delete the line</p>	<p>&lt;1-20&gt; [goto TELBSNS] &lt;55&gt; [goto TELCOMP] &lt;888&gt; [goto TELOTH]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
04	A	H_S4A	<p>Section 4 - UTILITIES AND FUELS FOR OWNED AND RENTED PROPERTIES</p> <p>Part A - Telephone Expenses</p> <p>TELEPHONE SERVICES INCLUDED IN BILL</p> <p>1 - Residential Service 2 - Mobile/Cellular Service 3 - Voice Over IP</p> <p>OTHER TELEPHONE AND NON-TELEPHONE SERVICE ITEMS</p> <p>1 - Internet access (including broadband, DSL, or dial-up) 2 - Cable or satellite television services 3 - Non-telephone related rentals or purchases such as</p>	<empty> [go back to TELEBILL OR TELTEMP]
04	A	TELCOMP	[fill: What is the name of the company which provides the service?/ * Enter company name]	<30 characters, NODK, NORF> [goto TELBSNS] <888> [goto TELOTH]
04	A	TELBSNS	<p>Will any of the charges be deducted as a business expense?</p> <p>1. Yes 2. No</p>	<1> [goto TELBSNZ] <2,D,R> [If Intnubr = 1, goto TELCHGX3] [Else, goto TELCHGX1]
04	A	TELBSNZ	What percentage will be deducted?	<1-99, D,R> [If Intnubr = 1 goto TELCHGX3] [Else goto TELCHGX1] <100> [ goto, TELOTH]
04	A	TELCHGX1	<p>How much were you billed for in [fill: REF_MONTH]? Do not include any unpaid charges from a previous billing period.</p>	<0-999999, D, R> [goto TELCHGX2]
04	A	TELCHGX2	<p>How much were you billed for in [fill: TWO_MONTH]? Do not include any unpaid charges from a previous billing period.</p>	<0-999999, D, R> [goto TELCHGX3]
04	A	TELCHGX3	<p>How much were you billed for in [fill: LAST_MONTH]? Do not include any unpaid charges from a previous billing period.</p>	<0-999999, D, R> [If TELCHGX1 OR TELCHGX2 OR TELCHGX3 = 0, goto BILPERD] [Else, goto TYPETEL]



Section #	Part	Variable Name	Question Text	Skip Instructions
04	A	BILPERD	<p>What is your usual billing period for this service?</p> <p>1.Month 2.2 Months 3.Quarter 4.Annual 5.Other</p>	<1-5, D, R> [goto TYPETEL]
04	A	TYPETEL	<p>What types of telephone services did the bill include?</p> <p>* Enter all that apply, separate with commas.</p> <p>* Read each item on list.</p> <p>1. Residential Service 2. Mobile/Cellular Service 3. Voice Over IP</p>	<1,2, 3, D, R> [goto TELTEMP]
04	A	TELTEMP	<p>(Book) 8 ? [F1]</p> <p>Which of the following telephone service items were included in the bill(s)?</p> <p>* Enter all that apply, separate with commas.</p> <p>*Read each item on list.</p> <p>0. None 1. Internet access (including broadband, DSL, and dial-up) 2. Cable or satellite television service 3. Non-telephone related rentals or purchases such as a modem</p> <p>77. Misc. Combined (unable to specify/DK)</p>	<p>&lt;0, 77&gt; [if 0 only or 77 only, goto TELOTH]</p> <p>&lt;1&gt; [ [If Intnmbr = 1, goto TINTNTX3] [Else, goto TINTNTX1]</p> <p>&lt;2&gt; [ [If Intnmbr = 1, goto TCABLEX3] [Else, goto TCABLEX1]</p> <p>&lt;3&gt; [ If Intnmbr = 1, goto NTRTPRX3] [Else, goto NTRTPRX1]</p> <p>&lt;D&gt;&lt;R&gt; [goto TELOTH]</p>
04	A	TINTNTX1	How much of the [fill: REF_MONTH] charges were for internet access?	<0-999999,D,R> [goto TINTNTX2]
04	A	TINTNTX2	How much of the [fill: TWO_MONTH] charges were for internet access?	<0-999999,D,R> [goto TINTNTX3]
04	A	TINTNTX3	How much of the [fill: LAST_MONTH] charges were for internet	<p>&lt;0-999999,D,R&gt; [if TELTEMP = 2 AND Intnmbr = 1, goto TCABLEX3] [ Else, goto TCABLEX1]</p> <p>[ if TELTEMP = 3 AND Intnmbr = 1, goto NTRTPRX3] [Else, goto NTRTPRX1]</p> <p>[else goto TELOTH]</p>
04	A	TCABLEX1	How much of the [fill: REF_MONTH] charges were for cable or satellite	<0-999999,D,R> [goto TCABLEX2]

television service?

Section #	Part	Variable Name	Question Text	Skip Instructions
04	A	TCABLEX2	How much of the [fill: TWO_MONTH] charges were for cable or satellite television service?	<0-999999,D,R> [goto TCABLEX3]
04	A	TCABLEX3	How much of the [fill: LAST_MONTH] charges were for cable or satellite television service?	<0-999999,D,R> [ If Intnmbr = 1AND TELTEMP = 3, goto NTRTPRX3] [Else, goto NTRTPRX1] [else goto TELOTH]
04	A	NTRTPRX1	How much of the [fill: REF_MONTH] charges were for non-telephone related rentals or purchases?	<0-999999,D,R> [goto NTRTPRX2]
04	A	NTRTPRX2	How much of the [fill: TWO_MONTH] charges were for non-telephone related rentals or purchases?	<0-999999,D,R> [goto NTRTPRX3]
04	A	NTRTPRX3	How much of the [fill: LAST_MONTH] charges were for non-telephone related rentals or purchases?	<0-999999,D,R> [goto TELOTH]
04	A	TELOTH	Did [fill: YOU_ANYMEM] receive any other bills for telephones not used entirely for business purposes?  1. Yes 2. No	<1> [If Intnmbr = 1, goto TELCOMP, next line of grid] [Else, goto PREVCOMP, next line of grid] <2> [goto S4A_END]
04	B	FONCARD	Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] purchased any pre-paid long distance telephone cards/minutes, not already reported?  1. Yes 2. No	<1> [goto FONCARDX] <2,D,R> [goto PRPYCELL]
04	B	FONCARDX	What was the total amount paid?	<1-9999,D,R> [goto FONCRDCX]
04	B	FONCRDCX	How much of the total was paid this month?	<0-9999, D, R> [goto PRPYCELL]
04	B	PRPYCELL	Since the first of [fill: REF_MO], have you had any expenses for Prepaid Cellular minutes, not already reported?  1. Yes 2. No	<1> [goto PRPYCLX] <2, D, R> [goto PYPHONE]
04	B	PRPYCLX	What was the total amount paid?	<1-9999, D, R> [goto PRPYCCX]
04	B	PRPYCCX	How much of the total was paid this month?	<0-9999, D, R> [goto PYPHONE]

Section #	Part	Variable Name	Question Text	Skip Instructions
04	B	PYPHONE	<p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] had any expenses for public pay phone services not already reported?</p> <p>* Do not include expenses for phone cards associated with the regular phone bill or pre-paid phone cards.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto PYPHONEX] &lt;2,D,R&gt; [goto S4B_END]</p>
04	B	PYPHONEX	<p>What was the total amount spent?</p> <p>* For amounts less than \$0.50, enter \$0 For amounts \$0.50 to \$0.99, enter \$1</p>	<p>&lt;0-9999, D, R&gt; [goto PYPHONCX]</p>
04	B	PYPHONCX	<p>How much of the total amount was spent this month?</p>	<p>&lt;0-9999, D, R&gt; [goto S4B_END]</p>
04	C	S4C_INTRO	<p>(Book) 8</p> <p>Now I am going to ask about cable and satellite TV service, satellite radio service, and internet service expenditures.</p> <p>1. Enter 1 to Continue</p>	<p>&lt;1&gt; [goto UTI_ITEM]</p>
04	C	UTI_ITEM	<p>(Book) 8 ? [F1]</p> <p>Since the first of [fill: REF_MONTH] have [fill: YOU_ANYMEM] had any expenses for ...</p> <p>* Read each item on list.</p> <p>1. Cable or satellite TV services, not already reported?</p> <p>2. Satellite radio services, not already reported?</p> <p>3. Internet connection or an internet service provider, not already reported?</p> <p>4. Listening to or downloading music or audio files?</p> <p>5. Viewing or downloading video files?</p> <p>6. Online games or other internet entertainment sites?</p> <p>7. Internet services away from home such as web cafes or internet kiosks?</p>	<p>&lt;1-7&gt; [goto INTDESC] &lt;99&gt; [goto S4C_END] &lt;888&gt; [goto UTI_ITEM - next line of grid] [If no more grid lines goto S4C_END]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
04	C	H_S4C	<p>Section 4 - INTERNET SERVICES EXPENDITURES</p> <p>Part C - CABLE AND INTERNET SERVICES</p> <p>1 - Cable or satellite TV  Cable TV    DirecTV                  Dish TV  TiVo</p> <p>2 - Satellite Radio Services  Sirius Radio    XM Radio</p> <p>3 - Internet connection or an internet service provider  AOL                  Road Runner                  ISPs  Comcast                  Verizon</p> <p>4 - Listening to or downloading music or audio files  Napster                  Rhapsody                  iTunes</p> <p>5 - Viewing or downloading video files</p> <p>6 - Online games or other internet entertainment sites</p> <p>7 - Internet services away from home such as web cafes or internet kiosks</p>	<Esc Key> [goto UTI_ITEM OR
04	C	INTDESC	What was the expense for?	<30 characters> [goto INTMO]
04	C	INTMO	<p>In what month was the expense?</p> <p>* Enter 13 for same amount each month of the reference period  [list appropriate months]</p> <p>13. Same amount each month</p>	<REF_MONTH - CUR_MONTH, 13, D, R> [goto INTCHGX]
04	C	INTCHGX	[Fill: How much was this expense?/What is your monthly expense?]	<1-999999, D, R> [goto INTCMB_S]
04	C	INTCMB_S	* Enter 'C' for combined expenses.	<C> [goto INTCMB] <empty> [goto INTMORE]

Section #	Part	Variable Name	Question Text	Skip Instructions
04	C	INTCMB	(Book) 8 ? [F1]  What was [fill: description] combined with?  * Enter all that apply, separate with commas.  1. Cable or satellite TV services 2. Satellite radio services 3. Internet connection or an internet service provider 4. Listening to or downloading music or audio files 5. Viewing or downloading video files 6. Online games or other internet entertainment sites 7. Internet services away from home such as web cafes or internet kiosks	<1-6, 77> [goto INTMORE]
04	C	INTMORE	77. Misc. combined (unable to specify/DK) Did you have any other expenses for [fill: description]?  1. Yes 2. No	<1, 2, D, R> [goto INT_ITEM, next line of grid]
04	C	S4C_END	** CHECK ITEM **	[goto Section 4D]
04	D	S4D_INTRO	(Book) 8  Now I am going to ask about utility bills. Please refer to any billing statements or other records you have when answering these questions. Please remember to include any bills you receive or pay online or have automatically deducted. Report any utility bill you have received, even if the bill has not been paid.	<1> [goto UTC_ITEM]

Section #	Part	Variable Name	Question Text	Skip Instructions										
04	D	UTC_ITEM	<p>(Book) 8 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] received any bills for any of the following utilities, fuels, or services? Do not include bills for properties used entirely for business.</p> <p>* Read each item on list:</p> <table border="0"> <tr> <td>1. Electricity</td> <td>6. Piped-in water</td> </tr> <tr> <td>2. Natural or utility gas</td> <td>7. Sewerage maintenance</td> </tr> <tr> <td>3. Fuel oil</td> <td>8. Trash/garbage collection</td> </tr> <tr> <td>4. Bottled or tank gas</td> <td>9. Water softening service</td> </tr> <tr> <td>5. Other fuels including wood</td> <td>10. Septic tank cleaning</td> </tr> </table> <p>99. None/No more entries 888. Delete the line</p>	1. Electricity	6. Piped-in water	2. Natural or utility gas	7. Sewerage maintenance	3. Fuel oil	8. Trash/garbage collection	4. Bottled or tank gas	9. Water softening service	5. Other fuels including wood	10. Septic tank cleaning	<p>&lt;1-10&gt; [goto WHATPROP] &lt;99&gt; [goto S4D_END] &lt;888&gt; [go to next line on grid]</p>
1. Electricity	6. Piped-in water													
2. Natural or utility gas	7. Sewerage maintenance													
3. Fuel oil	8. Trash/garbage collection													
4. Bottled or tank gas	9. Water softening service													
5. Other fuels including wood	10. Septic tank cleaning													
04	D	H_S4D	<p>Section 4 - UTILITIES AND FUEL FOR OWNED AND RENTED PROPERTIES</p> <p>Part D - UTILITIES, FUELS, AND SERVICES</p> <p>1 - Electricity</p> <p>2 - Natural or utility gas</p> <p>3 - Fuel oil</p> <p>4 - Bottled or tank gas</p> <p>5 - Other fuels including wood</p> <p>6 - Piped-in water</p> <p>7 - Sewerage maintenance</p> <p>8 - Trash/garbage collection including - Hazardous waste collection Recyclable material collection Waste disposal</p>	<p>&lt;Esc Key&gt; [goto UTC_ITEM OR UTILCMB]</p>										

9 - Water softening service

10 - Septic tank cleaning



Section #	Part	Variable Name	Question Text	Skip Instructions
04	D	WHATPROP	Which property was the bill for?  [fill: all PROPNUM, PROPDESC from Section 3]  [fill: 40. Rented sample unit] [fill: 41. Other rental unit] 42. Rented vacation property 43. Property not owned or rented by household	<1-20, 40> [If UTC_ITEM = 1-3, 6-8 and no data in any 8500.COMPNAME [1]-[40] goto COMPNAME] [[If UTC_ITEM = 1-3, 6-8 and any data in 8500.COMPNAME [1]-[40] goto LASTCOMP] ELSE goto UTILBUSN] <41,42,43, D, R> [goto UTLPDESC]
04	D	UTLPDESC	* Briefly describe the property.	<30 characters> [If UTC_ITEM = 1-3, 6-8 AND no data in any 8500.COMPNAME [1]-[40] goto COMPNAME], [If UTC_ITEM = 1-3, 6-8 and any data in 8500.COMPNAME [1]-[40] goto
04	D	LASTCOMP	What is the name of the company or government agency which provides [fill: description]? [Fill: Company names reported last interview]  55. Company name not listed	<1-20 > [goto UTILBUSN] <55> [goto COMPNAME]
04	D	COMPNAME	What is the name of the company or government agency which provides [fill: description]?	<30 characters> [goto UTILBUSN]
04	D	UTILBUSN	Will any part of the [fill: description] charges be deducted as a business expense?  1. Yes 2. No	<1-2, D, R> [goto HAVEBILL]
04	D	HAVEBILL	* Does the respondent have a bill or statement showing the charges?  Answer NO if only checkbook records are being used.  1. Yes	<1, 2, D, R> [If INTNMBR = 1 goto UTLCHGX3] else [goto UTLCHGX1]
04	D	UTLCHGX1	How much were you billed for in [fill: REF_MONTH]?	<0-999999, D, R> [goto UTILCHGX2]
04	D	UTLCHGX2	How much were you billed for in [fill: TWO_MONTH]?	<0-999999, D, R> [goto UTILCHGX3]

Section #	Part	Variable Name	Question Text	Skip Instructions												
04	D	UTLCHGX3	How much were you billed for in [fill: LAST_MONTH]?	<0-999999, D, R> [If UTLCHGX1 ne 0 AND UTLCHGX2 ne 0 AND UTLCHGX3 ne 0 goto UTILCMB_S] [else goto BLPERIOD]												
04	D	BLPEROTH		<30 characters> [goto UTILCMB_S]												
04	D	BLPERIOD	* Specify: What is your usual billing period for the service?  <ol style="list-style-type: none"> <li>1. Month</li> <li>2. 2 months</li> <li>3. Quarter</li> <li>4. Annual</li> <li>5. Other</li> </ol>	<1-4, D, R> [goto UTILCMB_S] <5> [goto BLPEROTH]												
04	D	UTILCMB_S	* Enter 'C' for a combined expense	<C> [goto UTILCMB] <empty> [goto MOREBILL]												
04	D	UTILCMB	(Book) 8 ? [F1] What other utilities, fuels, or services was [fill: description] combined with?  * Enter all that apply, separate with commas.  <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Electricity</td> <td style="width: 50%;">6. Piped-in water</td> </tr> <tr> <td>2. Natural or utility gas</td> <td>7. Sewerage maintenance</td> </tr> <tr> <td>3. Fuel oil</td> <td>8. Trash/garbage collection</td> </tr> <tr> <td>4. Bottled or tank gas</td> <td>9. Water softening service</td> </tr> <tr> <td>5. Other fuels including wood</td> <td>10. Septic tank cleaning</td> </tr> <tr> <td></td> <td>77. Misc. combined (unable to specify/DK)</td> </tr> </table>	1. Electricity	6. Piped-in water	2. Natural or utility gas	7. Sewerage maintenance	3. Fuel oil	8. Trash/garbage collection	4. Bottled or tank gas	9. Water softening service	5. Other fuels including wood	10. Septic tank cleaning		77. Misc. combined (unable to specify/DK)	<1-10, 77> [goto MOREBILL]
1. Electricity	6. Piped-in water															
2. Natural or utility gas	7. Sewerage maintenance															
3. Fuel oil	8. Trash/garbage collection															
4. Bottled or tank gas	9. Water softening service															
5. Other fuels including wood	10. Septic tank cleaning															
	77. Misc. combined (unable to specify/DK)															
04	D	MOREBILL	Did you receive any other [fill: description] bills?  <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<1, 2,D,R> [goto UTC_ITEM, next line of grid]												
06	A	S6A_INTRO	(Book) 11  Now I am going to ask about the purchase or rental of major household appliances.	<1> [goto APA_ITEM]												

1. Enter 1 to Continue

Section #	Part	Variable Name	Question Text	Skip Instructions												
06	A	APA_ITEM	<p data-bbox="800 248 957 272">(Book) 11 ? [F1]</p> <p data-bbox="829 297 1409 321">Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM]</p> <p data-bbox="829 345 1394 394">purchased or rented any of the following items for your household or for someone outside of your household?</p> <p data-bbox="837 427 1056 451">* Read each item on list.</p> <table data-bbox="829 492 1360 636"> <tr> <td data-bbox="829 492 999 516">1. Microwave oven</td> <td data-bbox="1125 492 1325 516">6. Portable dishwasher</td> </tr> <tr> <td data-bbox="829 516 1108 540">2. Cooking stove, range or oven</td> <td data-bbox="1125 516 1297 540">7. Garbage disposal</td> </tr> <tr> <td data-bbox="829 540 961 565">3. Range hood</td> <td data-bbox="1125 540 1276 565">8. Clothes washer</td> </tr> <tr> <td data-bbox="829 565 1104 589">4. Refrigerator or home freezer</td> <td data-bbox="1125 565 1276 589">9. Clothes dryer</td> </tr> <tr> <td data-bbox="829 589 1031 613">5. Built-in dishwasher</td> <td data-bbox="1125 589 1360 613">99. None/No more entries</td> </tr> <tr> <td></td> <td data-bbox="1125 613 1293 638">888. Delete the line</td> </tr> </table>	1. Microwave oven	6. Portable dishwasher	2. Cooking stove, range or oven	7. Garbage disposal	3. Range hood	8. Clothes washer	4. Refrigerator or home freezer	9. Clothes dryer	5. Built-in dishwasher	99. None/No more entries		888. Delete the line	<p data-bbox="1486 248 1724 272">&lt;1-12&gt; [goto MAJTYPE]</p> <p data-bbox="1486 272 1717 297">&lt;99&gt; [goto S6A_END]</p> <p data-bbox="1486 297 1864 345">&lt;888&gt; [goto APA_ITEM - next line of grid] [If no more grid lines goto S6A_END]</p>
1. Microwave oven	6. Portable dishwasher															
2. Cooking stove, range or oven	7. Garbage disposal															
3. Range hood	8. Clothes washer															
4. Refrigerator or home freezer	9. Clothes dryer															
5. Built-in dishwasher	99. None/No more entries															
	888. Delete the line															

Section #	Part	Variable Name	Question Text	Skip Instructions
06	A	H_S6A	<p>Section 6 -- APPLIANCES, HOUSEHOLD EQUIPMENT, AND OTHER SELECTED ITEMS</p> <p>Part A - HOUSEHOLD APPLIANCES</p> <p>1 - MICROWAVE OVEN</p> <p>2 - ELECTRIC STOVE, RANGE, OR OVEN (including convection oven)</p> <p>3 - GAS STOVE, RANGE, OR OVEN</p> <p>4 - OTHER STOVE, RANGE, OR OVEN (such as a wood burning stove)</p> <p>5 - RANGE HOOD</p> <p>6 - REFRIGERATOR (including refrigerator/freezer combinations)</p> <p>7 - HOME FREEZER</p> <p>8 - BUILT-IN DISHWASHER</p> <p>9 - PORTABLE DISHWASHER</p> <p>10 - GARBAGE DISPOSAL</p> <p>11 - CLOTHES WASHER (including washer/dryer combinations)</p> <p>12 - CLOTHES DRYER</p>	<Esc Key> [go back to where the F1 was pressed]
06	A	MAJTYPE	<p>What did you purchase or rent?</p> <p>* Enter brief description of the item</p>	<30 characters> [goto GFTC_MAJ]
06	A	GFTC_MAJ	<p>Was this item -</p> <p>1. Purchased for someone inside the household?</p>	<p>&lt;1, 3, D, R&gt; [goto MAJ_MO]</p> <p>&lt;2&gt; [goto MAJ_AMOUNT]</p>

06

A

MAJ\_MO

2. Rented?
3. Purchased for someone outside your household?

When did you purchase it?

<REF\_MONTH - CUR\_MONTH, D, R>  
[goto MAJ\_AMOUNT]

Section #	Part	Variable Name	Question Text	Skip Instructions
06	A	MAJ_AMOUNT	[fill: What was the purchase price ?/ What was the total rental expense since the first of [fill: REF_MONTH]	<1-999999> [goto MAJTAX] <D,R> [goto INSTALL]
06	A	MAJTAX	Did this include sales tax?  1. Yes 2. No	<1, 2, D, R> [goto INSTALL]
06	A	INSTALL	Were there any extra charges for installation or delivery?  *Include charges for disposal of old appliances  1. Yes 2. No	<1> [goto MAJINSTX] <2,D,R> [goto MAJCMB_S]
06	A	MAJINSTX	How much?	<1-999999,D,R> [goto MAJCMB_S]
06	A	MAJCMB_S	* Enter 'C' for a combined expense	<C> [goto MAJCMB] <empty> [goto MAJOTHER]
06	A	MAJCMB	(Book) 11 ? [F1]  What other appliances is the [Fill: (description)] combined with?  * Enter all that apply, separate with commas  1. Microwave oven                      6. Portable dishwasher 2. Cooking stove, range or oven      7. Garbage disposal 3. Range hood                            8. Clothes washer 4. Refrigerator or home freezer      9. Clothes dryer 5. Built-in dishwasher                77. Misc. combined (unable to specify/DK) >Variable Name      MAJCMB	<1-9, 77> [goto MAJOTHER]
06	A	MAJOTHER	Did you purchase or rent any other [fill: description]?  1. Yes 2. No	<1, 2, D, R> [goto APA_ITEM]

Section #	Part	Variable Name	Question Text	Skip Instructions
06	B	S6B_INTRO	(Book) 12 - 17  Now I am going to ask about expenses for the purchase or rental of household appliances and other selected items.	<1> [goto APB_ITEM]
06	B	APB_ITEM	1. Enter 1 to Continue  SCREEN 1 ----- ----- (Book) 22-24 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] purchased or rented any of the following items?  * Read each item on list  1. Small electrical kitchen appliances 2. Electrical personal care appliances 3. Smoke detectors 4. Electric floor cleaning equipment 5. Other household appliances 6. Sewing machines 7. Office machines including fax machines and calculators  8. PDAs and pocket PCs 9. Computers, computer systems, or related hardware 10. Computer software including computer games or accessories, for non-business use 11. Video game hardware, video games, or accessories 12. Telephones or accessories 13. Telephone answering machines 14. Photographic equipment 15. Musical instruments, supplies, or accessories 16. Lawn mowing machinery or other yard equipment 17. Power tools 18. Non-power tools 19. Window air conditioners 20. Portable cooling or heating equipment  95. Continue list 888. Delete the line	<1-40> [goto MINTYPE] <95> [goto next row] <99> [goto S6B_END] <888> [goto APB_ITEM - next line of grid] [If no more grid lines goto S6B_END]



SCREEN 2 -----

(Book) 25 ? [F1]

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

Since the first of [fill: REF\_MONTH], have [fill: YOU\_ANYMEM]

purchased or rented television, radio, video, or sound equipment?  
Do not include purchases installed on vehicles.

\* IF YES - Read each item on list

Which of the following did you purchase or rent?

21. Televisions, all types
22. DVD Players, VCRs, DVRs, or video cameras.
23. Satellite dishes, receivers or accessories
  
24. Handheld personal music players
25. Radios, all types
26. Tape recorders or players
27. Sound components, component systems, or compact disc sound systems
28. Other sound or video equipment, including accessories
  
95. Continue list
888. Delete the line

SCREEN 3 -----

(Books) 16-17 ? [F2]

Since the first of [Fill:REF\_MONTH] have [Fill:YOU\_ANYMEM]  
purchased or rented any ... ?

29. Portable memory, such as flash drives, memory cards, and recordable discs and tapes

95. Continue list
888. Delete the line

SCREEN 4 -----  
 -----  
 (Book) 26-27 ? [F1]

Since the first of [fill: REF\_MONTH], have [fill: YOU\_ANYMEM]

purchased or rented sports, recreation, or exercise equipment?

Section #	Part	Variable Name	Question Text	Skip Instructions
-----------	------	---------------	---------------	-------------------

\* IF YES - Read each item on list

Which of the following did you purchase or rent?

30. General sports equipment (include athletic shoes for sports related use,

such as football, baseball, soccer or bowling)

31. Health and exercise equipment

32. Camping equipment

33. Hunting and fishing equipment

34. Winter sports equipment

35. Water sports equipment

36. Outboard motors

37. Bicycles

38. Tricycles or battery powered riders

39. Playground equipment

40. Other sports or recreation equipment

99. None/No more entries

888. Delete the line

06	B	H_S6B
----	---	-------

Section 6 - APPLIANCES, HOUSEHOLD EQUIPMENT, AND OTHER SELECTED ITEMS -

Continued

Part B - HOUSEHOLD APPLIANCES AND OTHER SELECTED ITEMS

SMALL HOUSEHOLD APPLIANCES

1 - SMALL ELECTRICAL KITCHEN APPLIANCES, including -

blender	electric frying pan	mixer
---------	---------------------	-------

breadmaker	electric iron	pizza oven
------------	---------------	------------

coffee grinder	electric knife	popcorn maker
----------------	----------------	---------------

coffee maker	electric timer	rice cooker
--------------	----------------	-------------

<Esc Key> [go back to where the F1 was pressed]

crockpot	electric wine chiller	sandwich grill
deep fryer	electric wok	slow cooker
electric barbecue	food processor	smoothie mmaker
electric can opener	hot plate	toaster
electric grill	ice cream maker	toaster oven
electric fondue set	juicer	waffle iron

2 - ELECTRICAL PERSONAL CARE APPLIANCES, including -

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

curling iron	facial sauna	make-up mirror
water-pik		
denture cleaner	foot bath	massager
electric hair trimmer	hair dryer	powered scale
electric razor	heating pad	powered toothbrush

3 - SMOKE DETECTORS, including -

battery-operated	ionization chamber type	photo-cell
type wired		

4 - ELECTRIC FLOOR CLEANING EQUIPMENT, including -

floor polisher	hand vacuum	rug shampooer	vacuum
clearer			

5 - OTHER HOUSEHOLD APPLIANCES, including -

carbon monoxide detectors	trash
compactor	
home security devices (burglar alarms)	air purifier
including console control modules, burglar	water filters

alarm console, door and window transmitters

6 - SEWING MACHINES (with or without cabinet)

7 - OFFICE MACHINES, INCLUDING FAX MACHINES AND

CALCULATORS, also including -  
 typewriter copy machine

8 - PERSONAL DIGITAL ASSISTANT OR PDAS

Palm iPaq

9 - COMPUTERS, COMPUTER SYSTEMS OR RELATED HARDWARE FOR NON-BUSINESS

USE, including -  
 CD/DVD drive cables home computers with  
 or without monitors  
 computer printers fax modems external hard drive  
  
 keyboards scanner CD/DVD burner  
 modems memory mouse  
 monitors Micro PC laptops

10 - COMPUTER SOFTWARE INCLUDING COMPUTER GAMES

**Question Text**  
 OR ACCESSORIES FOR NON-BUSINESS USE, including -  
 PC games printer cartridges mouse pads

11 - VIDEO GAME HARDWARE, VIDEO GAMES, OR ACCESSORIES, including -

Nintendo Wii Gamecube Ninetendo DS PSP  
  
 Gameboy Palystation Xbox

12 - TELEPHONES OR ACCESSORIES, including -  
 beepers cell phone covers fax machines  
 phone jacks and cords  
 car chargers chargers headsets  
 telephones  
 cell phones cordless telephones pagers  
 Bluetooth accessories

13 - TELEPHONE ANSWERING MACHINES, including -  
 combinations of telephone/answering machines

14 - PHOTOGRAPHIC EQUIPMENT, including -  
 camera filter projection screen battery  
 pack for camera flash  
 digital camera winder electro flash motor  
 driven film advancer  
 lens enlarger strobe light (for  
 tripod projector photographs)  
 Do not include film, film processing, or other photographic

**Section #**

**Part**

**Variable Name**

**Skip Instructions**

supplies.

15 - MUSICAL INSTRUMENTS, SUPPLIES, OR ACCESSORIES,  
including -

piano	sheet music	saxophone
music books		
guitar	strings for musical instruments	music stand
trumpet		
woodwinds	stringed instruments	clarinet
any other musical		
brass instruments	valve oil	picks
accessories		
trombone		rosin
carrying case		
reeds		drums
keyboards		

Do not include music lessons

Section #	Part	Variable Name	Question Text	Skip Instructions		
			16 - LAWNMOWING MACHINERY OR OTHER YARD EQUIPMENT, including -			
			lawn mowers	motorized tiller	snow blower	
			shovel			
			tractor (farm, spreader	wheelbarrow	electrical lawn	
			garden, etc.)	rake	trimmer	
			TOOLS FOR HOME USE			
			17 - POWER TOOLS, including -			
			electric drill	sander	cordless circular saw	
			electric saw	lathe	electric swimming pool	
			router	electric plane	cleaning	
			equipment			
			cordless drill	electric polisher	air compressor	
			18 - NONPOWER TOOLS, including -			
			wrench	axe	saw	drill
			socket	screwdriver	level	trouble light

hammer   pliers   plane   caulking gun

HEATING AND COOLING EQUIPMENT

19 - WINDOW AIR CONDITIONERS

20 - PORTABLE COOLING OR HEATING EQUIPMENT, including -

space heater   dehumidifier   humidifier   fan

TELEVISIONS, RADIOS, VIDEO AND SOUND EQUIPMENT (Not installed in vehicles)

21 - TELEVISIONS, ALL TYPES, INCLUDING COMBINATIONS OF TV WITH DVD/VIDEO PLAYERS, including

flat screen TV   plasma   high definition TV

22 - DVD PLAYERS, VCRs, DVRs OR VIDEO CAMERAs, including -

TiVo unit   digital TV converter box

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

Blu-ray disc player   video tape recorder/player

high definition disc palyer   video laser disc player  
combination of VCR/DVD player   video cassette  
recorder/player

23 - SATELLITE DISHES, RECEIVERS, OR ACCESSORIES

24 - HANDHELD PERSONAL MUSIC PLAYERS

iPod   Personal MP3 players

25 - RADIO, ALL TYPES, including -

CB (not permanently   clock radio   short-wave  
walky-talky  
mounted in an   console   transistor/portable  
Walkman (radio only)

automobile)

26 - TAPE RECORDERS OR PLAYERS (not permanently mounted in an automobile), including -  
audio tape decks reel-to-reel tape decks  
audio cassette players/recorder Walkman (cassette/radio combination or cassette only)

27 - SOUND COMPONENTS, COMPONENT SYSTEMS, OR COMPACT DISC SOUND SYSTEMS, including -  
speakers amplifier tape deck (not specified)  
mixer turn table compact disc players  
stereo receiver stereo rack system  
tuner equalizer

28 - OTHER SOUND OR VIDEO EQUIPMENT, including -  
earphones/headphones battery packs adapter for sound equipment  
power converter power booster base station for CB antenna  
antenna (TV, radio, etc.) headset microphone

29 - PORTABLE MEMORY, SUCH AS FLASH DRIVES, MEMORY

**Question Text**  
CARDS, AND RECORDABLE DISCS AND TAPES, including -  
thumb drives blank DVDs blank CDs  
zip drives memory stick USB flash drive

SPORTS, RECREATION, AND EXERCISE EQUIPMENT

30 - GENERAL SPORTS EQUIPMENT, including -  
roller blades baseball bat table tennis equipment badminton  
sports uniform set football lawn games  
sports shoes basketball frisbee soccer ball  
tennis racket racquetball boxing equipment sports protective  
bowling ball racquetball racket karate equipment

**Section #**

**Part**

**Variable Name**

**Skip Instructions**

equipment/gear  
 baseball glove    volleyball    golf cart (non-riding)  
 golf clubs  
 skateboard    golf shoes  
 basketball hoop

Include specialized athletic shoes such as for football, baseball, soccer, biking, and bowling, except if included in the rental or activity fee for the sport.

31 - HEALTH AND EXERCISE EQUIPMENT, including -  
 trampoline    exercise mat    weight bench  
 weights    home gym    treadmill  
 rowing machine    exercycle    pedometer

32 - CAMPING EQUIPMENT, including -  
 air mattress tent    canteen  
 portable heater  
 camping cookware    frame packs and other camping packs  
 sleeping bag  
 camping stove    kerosene lamp  
 sleeping pad

33 - HUNTING AND FISHING EQUIPMENT, including -  
 ammunition    cross bow    knife    scopes  
 (not specified)  
 BB/pellet gun    fishing rod and tackle    rifle    shotgun

bow and arrow

**Section #                      Part                      Variable Name                      Question Text                      Skip Instructions**

34 - WINTER SPORTS EQUIPMENT, including -  
 ice boat    ski boots    sled    snowboard  
 snow skis  
 ice skates    ski poles    sledding equipment    snowboard  
 equipment    toboggan

35 - WATER SPORTS EQUIPMENT, including -  
 diving equipment    raft    surf board    water ski vest  
 wind surf board  
 life jacket    snorkel    wakeboard    water skis

36 - OUTBOARD MOTORS



37 - BICYCLES, including -  
 bicycle helmets      locks      stand      tires  
 bicycle parts      rack      supplies      tubes

06	B	MINTYPE	What did you purchase or rent?  * Enter a brief description of item.  *[Fill: Report items such as flash drives, memory cards, recordable discs, and tapes as code 29, Portable memory.]	<30 characters> [goto GFTCMIN]
06	B	GFTCMIN	Was this item ...  1. Purchased for someone inside the household? 2. Rented? 3. Purchased for someone outside the household?	<1-3,D,R> [goto MIN_MO] <2> [goto MIN_AMOUNT]
06	B	MIN_MO	When did you purchase it?	<REF_MONTH - CUR_MONTH, D, R> [goto MIN_AMOUNT]
06	B	MIN_AMOUNT	[fill: What did it cost?  * Include delivery charges, exclude installation charges. /  What was the total rental expense since the first of [fill: REF_MONTH]	<1-999999> <D,R> [goto MINCMB_S]
06	B	MINTAX	Did this include sales tax?  1. Yes 2. No	<1,2,D,R> [goto MINCMB_S]
<b>Section #</b>	<b>Part</b>	<b>Variable Name</b>	<b>Question Text</b>	<b>Skip Instructions</b>
06	B	MINCMB_S	* Enter 'C' for a combined expense.	<C> [goto MINCMB] <empty> [If APB_ITEM = 9,21,23,27,28, THEN goto INSTLSCR ELSE goto S6BOTHER
06	B	MINCMB	(Book) 12 - 17 ? [F1]  What other item is the [Fill: MINTYPE] combined with?  * Enter all that apply, separate with commas.	<1-40, 77> [If APB_ITEM = 9,21,23,27,28 goto INSTLSCR [ELSE goto 6BOTHER]

1. Small elec kitchen appl
2. Elec personal care appl
3. Smoke detectors
4. Elec floor cleaning equip
5. Other household appl
6. Sewing machines
7. Office machines including fax machines and calculators
8. Personal digital assistants or PDAs
9. Computers/sys/hardware
10. Comp software, including games and accessories
11. Video game hardware, video games, and accessories
12. Telephones or accessories
13. Telephone answering machines
14. Photographic equipment
15. Musical instruments, supplies, or accessories
16. Lawn mowing machinery or other  
yard equipment
17. Power tools
18. Non-power tools
19. Window air conditioners
20. Portable cooling or heating equipment
21. Televisions, all types
22. DVD Players, VCRs, DVRs, or video cameras.
23. Satellite dishes, receivers or accessories
24. Handheld personal music players
25. Radios, all types
26. Tape recorders or players
27. Sound components, component systems, or  
compact disc sound systems
28. Other sound or video equipment, including accessories
29. Portable memory, such as flash drives, memory cards, and  
recordable discs and tapes
30. General sports equipment (include athletic shoes for sports related  
use,  
such as football, baseball, soccer or bowling)
31. Health and exercise equipment
32. Camping equipment

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

33. Hunting and fishing equipment
34. Winter sports equipment
35. Water sports equipment
36. Outboard motors
37. Bicycles
38. Tricycles or battery powered riders
39. Playground equipment
40. Other sports or recreation equipment

06	B	INSTLSCR	Were there any additional charges for installation or set-up?  1.Yes 2.No	<1>[go to INSTLLEX]  <2,D,R.> [go to S6BOTHER]>
06	B	INSTLLEX	How much?	<1 - 99999,D,K> [go to S6BOTHER]>
06	B	S6BOTHER	Did you purchase or rent any other [Fill: description]?  1. Yes 2. No	<1, 2, D, R> [goto APB_ITEM, next line on the grid]
08	A	S8A_INTRO	(Book) 19-22  Now I am going to ask you about expenses for home furnishings and related household items.  1. Enter 1 to Continue	<1> [goto FRA_ITEM]
08	A	FRA_ITEM	SCREEN 1 ----- ----- (Book) 19 - 20 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] purchased for [fill: YOU_YRCU] or for someone outside of your household any furniture, infants equipment, or outdoor equipment?  * IF YES - Read each item on list  Have you purchased any --  1. Sofas? 2. Living room chairs? 3. Living room tables? 4. Wall units, shelves or cabinets? 5. Ping-pong, pool tables or other similar recreation room items?  6. Other living room, family or recreation room furniture including desks? 7. Living room furniture combinations? 8. Dining room or kitchen furniture? 9. Mattresses or box springs? 10. Bedroom furniture other than mattresses or box springs? 11. Infants furniture? 12. Infants equipment? 13. Patio, porch, or outdoor furniture? 14. Barbeque grills or outdoor decorative items?	<1-36> [goto FURDESC] <95> [goto next row] <99> [goto S8A_END] <888> [goto FRA_ITEM - next line of grid] [If no more grid lines goto
<b>Section #</b>	<b>Part</b>	<b>Variable Name</b>	<b>Question Text</b>	<b>Skip Instructions</b>

15. Office furniture for home use?

95. Continue list  
888. Delete the line

SCREEN 2-----  
(Book) 21 ? [F1]

Have you purchased any --

\* Read each item on list

16. Lamps or other lighting fixtures?  
17. Other household decorative items?  
18. Closet storage items?

19. Travel items including luggage?

95. Continue list  
888. Delete the line

S8A\_END]

SCREEN 3 -----  
-----  
(Book) 21 ? [F1]

Have you purchased any dishes, dinnerware, flatware, glassware, or  
cookware?

\* IF YES - Read each item on list

Have you purchased any --

20. Plastic dinnerware?

21. China or other dinnerware?

22. Stainless, silver, or other flatware?

23. Glassware?

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

24. Serving pieces other than silver?

25. Non-electric cookware?

26. Silver serving pieces?

95. Continue list

888. Delete the line

SCREEN 4 -----

-----  
(Book) 22 ? [F1]

Have you purchased any slipcovers, decorative pillows, or household linens such as towels, sheets, or blankets?

\* IF YES - Read each item on list

Have you purchased any --

27. Bedroom linens?

28. Bathroom linens?

29. Kitchen or dining room linens?

30. Other linens?

31. Slipcovers, decorative pillows or cushions?

95. Continue list

888. Delete the line

SCREEN 5 -----

-----  
(Book) 22 ? [F1]

Have you purchased any floor or window coverings?

\* IF YES - Read each item on list



Section #	Part	Variable Name	Question Text	Skip Instructions
08	A	H_S8A	Section 8 - HOME FURNISHINGS AND RELATED HOUSEHOLD ITEMS	<Esc Key> [goto FRA_ITEM]
			Part A - Purchases	
			LIVING, FAMILY, OR RECREATION ROOM FURNITURE	
			1 - SOFAS, including - sofa bed      loveseat      sectionals      futon	
			2 - LIVING ROOM CHAIRS, including - bean bag chair      rocker convertible chair      swivel recliner	
			3 - LIVING ROOM TABLES, including - coffee table      lamp tables end tables      TV table	
			4 - WALL UNITS, SHELVES, OR CABINETS, including - bookcase      entertainment center curio cabinet	
			5 - PING-PONG TABLES, POOL TABLES, AND OTHER SIMILAR RECREATION ROOM ITEMS	
			6 - OTHER LIVING ROOM, FAMILY, OR RECREATION ROOM FURNITURE, including - bar or porta bar      coat rack      gun cabinet  bar stools      desk/chair room divider card table/chairs      foot stool (ottoman)	
			7 - LIVING ROOM FURNITURE COMBINATIONS, including - sofa, chair, and table combinations or suites	
			DINING ROOM AND KITCHEN FURNITURE	
			8 - ALL DINING ROOM AND KITCHEN FURNITURE, including - buffet      dinette set      kitchen	

chairs  
 china cabinet dining table and chairs serving  
 table or cart

Section #	Part	Variable Name	Question Text	Skip Instructions
-----------	------	---------------	---------------	-------------------

BEDROOM FURNITURE

9 - MATTRESSES AND SPRINGS INCLUDING ROLLAWAYS

10 - BEDROOM FURNITURE OTHER THAN MATTRESSES AND SPRINGS

headboard dresser mirrors bunk bed  
 brass bed vanity chairs night tables  
 frames cedar chest amoire water bed  
 chest mattress toper

INFANTS FURNITURE AND EQUIPMENT

11 - INFANTS FURNITURE, including -  
 bassinet crib mattress toy  
 chest changing table dresser playpen  
 chest highchair portable crib

12 - INFANTS EQUIPMENT, including -  
 baby backpack baby monitor guard  
 rail baby bottle sterilizer baby travel system  
 stroller baby carriers car seat swing  
 baby jogger carriage

OUTDOOR FURNITURE AND EQUIPMENT

13 - PATIO, PORCH, OR OUTDOOR FURNITURE

14 - BARBECUE GRILLS OR OUTDOOR DECORATIVE ITEMS,





22 - STAINLESS, SILVER, AND OTHER FLATWARE, EXCEPT PLASTIC

23 - GLASSWARE, including crystal

24 - SERVING PIECES OTHER THAN SILVER

25 - NONELECTRIC COOKWARE, including -  
casserole dishes            roaster  
pans                            saucepan  
pots                            skillet  
pressure cooker            teakettle

Section #	Part	Variable Name	Question Text	Skip Instructions
			26 - SILVER SERVING PIECES, including - bowl pitcher tray	
			HOUSEHOLD LINENS	
			27 - BEDROOM LINENS, including - baby blanket    electric blanket    quilt  bedspread      mattress pad      sheets blanket/cover   pillows            duvets comforter      pillowcases	
			28 - BATHROOM LINENS, including - bath mat      shower curtain      tub mat  bath rug      toilet cover face cloths    towels	
			29 - KITCHEN AND DINING ROOM LINENS, including - cloth napkins    placemats dish cloths      small appliance cover  dish towels      tablecloths	
			30 - OTHER LINENS, including -	

chair pads                      doilies

covers for living room tables    furniture protectors

31 - SLIPCOVERS, DECORATIVE PILLOWS AND CUSHIONS,  
CUSTOM OR READY-MADE

FLOOR AND WINDOW COVERINGS

WALL-TO-WALL CARPETING FOR ONE OR MORE ROOMS

32 - WALL-TO-WALL CARPET (original)

33 - WALL-TO-WALL CARPET (replacement)

34 - ROOM-SIZE RUGS AND OTHER NON-PERMANENT FLOOR  
COVERINGS, including  
carpet squares

35 - CURTAINS AND DRAPES (either custom or ready-made)

36 - BLINDS, SHADES, AND OTHER WINDOW COVERINGS  
(either custom or ready-made)

Section #	Part	Variable Name	Question Text	Skip Instructions
08	A	FURNDISC	What did you purchase?	<30 characters>      [goto FURNMO]
08	A	FURNMO	In what month did you purchase it?	<REF_MONTH - CUR_MONTH, D, R> [goto FURNGFTC]
08	A	FURNGFTC	Was this purchased for your household or for someone outside of your household?  1. For use by household 2. For someone outside the household	<1,2,D,R>      [goto FURNPURX]
08	A	FURNPURX	What was the purchase price?	<1-999999> [goto FRNPURTX] <D,R>      [goto S8ACMB_S]
08	A	FRNPURTX	Did this include sales tax?  1. Yes 2. No	<1,2,D,R> [goto S8ACMB_S]
08	A	S8ACMB_S	* Enter 'C' for a combined expense	<C>      [goto S8A_CMB]

08

A

S8A\_CMB

(Book) 19 - 22 ? [F1]

<empty> [goto ANYOTH8]

<1-37, 77> [goto ANYOTH8]

What was combined with [fill: description]?

\* Enter all that apply, separate with commas.

- |  |                        |
|--|------------------------|
| 1. Sofas                                   | 20. Plastic dinnerware |
| 2. Living room chairs<br>dinnerware        | 21. China or other     |
| 3. Living room tables<br>or other flatware | 22. Stainless, silver, |
| 4. Wall units, shelves,<br>or cabinets     | 23. Glassware          |
| other than silver                          | 24. Serving pieces     |
| 5. Ping pong, pool tables, and<br>cookware | 25. Non-electric       |
| other similar recreation room items        | 26. Silver serving     |
| pieces                                     | 27. Bedroom linens     |
| 6. Other living room, family or            |                        |

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

- |   |                        |
|---|------------------------|
| recreation room furniture<br>including desks                          | 28. Bathroom linens    |
| room linens   | 29. Kitchen or dining  |
| 7. Living room furniture combinations                                 | 30. Other linens       |
| 8. Dining room or kitchen furniture<br>decorative pillows or cushions | 31. Slipcovers,        |
| 9. Mattress or box springs  | 32. Original wall-to-  |
| wall carpet   | 33. Replacement wall-  |
| 10. Bedroom furniture other than<br>to-wall carpet                    | 34. Room size rugs or  |
| mattresses or box springs   | coverings, including   |
| other non-permanent floor   | 35. Curtains or drapes |
| 11. Infants' furniture<br>carpet squares                              |                        |
| 12. Infants' equipment  | 36. Blinds, shades,    |
| 13. Patio, porch, or outdoor furniture<br>other window coverings      | 77. Misc. Combined     |
| 14. Barbeque grills or outdoor decorative items                       |                        |
| 15. Office furniture for home use<br>(unable to specify/DK)           |                        |
| 16. Lamps or other lighting fixtures                                  |                        |
| 17. Other household decorative items                                  |                        |

08	A	ANYOTH8	18. Closet storage items Did you purchase any other [fill: description]?  1. Yes 2. No	<1, 2,D,R> [goto FRA_ITEM, next line of grid]
08	B	FURNRNTL	Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] rented or leased any furniture?  1. Yes 2. No	<1> [goto FURNRNTX] <2,D,R> [goto REPFURN]
08	B	FURNRNTX	What was the total expense?	<1-99999,D,R> [goto FRNRNTCX]
08	B	FRNRNTCX	How much of the total amount was spent this month?	<0-99999,D,R> [goto REPFURN]
08	B	REPFURN	Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] had any expenses for repairing, refinishing or reupholstering furniture, including the cost for fabric?  1. Yes 2. No	<1> [goto REPFURNX] <2, D, R> [goto S8B_END]
08	B	REPFURNX	What was the total expense?	<1-999999, D, R> [goto REPFRCNX]
<b>Section #</b>	<b>Part</b>	<b>Variable Name</b>	<b>Question Text</b>	<b>Skip Instructions</b>
08	B	REPFRCNX	How much of the total amount was spent this month?	<0-999999, D, R> [goto
09	A	S9A_INTRO	(Book) 23 - 24  Now I am going to ask you about clothing expenses. You may find it helpful to refer to receipts, credit card statements or other records to answer the questions.  1. Enter 1 to Continue	<1> [goto CLA_ITEM]
09	A	CLA_ITEM	(Book) 23 - 24 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] purchased any of the following items, for persons age 2 and over either for members of your household or for someone outside your household?  * Read each item on list.  1. Coats, jackets or furs	<1-17> [goto CLODESCA] <99> [goto S9A_END] <888> [goto CLA_ITEM - next line of grid] [If no more grid lines goto S9A_END]

- 2. Sport coats or tailored jackets
- 3. Suits
- 4. Vests
- 5. Sweaters or sweater sets
- 6. Pants, jeans, or shorts
- 7. Dresses
- 8. Skirts
- 9. Shirts, blouses or tops
- 10. Undergarments
- 11. Hosiery
- 12. Nightwear or loungewear
- 13. Accessories
- 14. Swimsuits or warm-up or ski suits
- 15. Uniforms, for which the cost is not reimbursed
- 16. Costumes
- 17. Footwear

99. None/No more entries  
 888. Delete a line

09                    A                    H\_S9A

Section 9 - CLOTHING AND SEWING MATERIALS

<Esc key> [goto CLA\_ITEM or CLOCMBA]

Part A - Clothing (Do not include here - clothing for children under 2 years of age.)

- 1 - COATS, JACKETS, AND FURS, including -
  - down vest                    raincoat
  - fur coat                      shawl

**Section #                    Part                    Variable Name**

**Question Text**

**Skip Instructions**

- jacket                      winter coat
- outerwear

- 2 - SPORT COATS AND TAILORED JACKETS, including blazers

- 3 - SUITS, including -
  - formal suit
  - woman's suit (of two or more pieces)
  - man's suit (of two or more pieces)

- 4 - VESTS (purchased separately, not with a suit), excluding sweater vests and down vests

- 5 - SWEATERS AND SWEATER SETS, including -
  - cardigan                    ski sweater                    V-neck sweater
  - pullover                    sweater vest

- 6 - PANTS, JEANS, OR SHORTS, including -

Do not include any athletic shorts

blue jeans      dress slacks      overalls  
casual pants      jump suit      shorts and short sets

dress pants      maternity pants

7 - DRESSES, including -  
formal or semi formal      two-piece dresses      wedding  
gown

8 - SKIRTS, including short and skirt combination

Do not include any tennis skirts, golf skirts, or other athletic  
skirts

9 - SHIRTS, BLOUSES, AND TOPS, including -  
dress shirt      knit blouse      sport shirt      tops

maternity top      T-shirt

Do not include any sweat shirts or athletic shirts.

10 - UNDERGARMENTS, including -  
bras      slips      undershirts

shapewear      thermal underwear      underwear

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

11 - HOSIERY, including -  
knee-highs      pantyhose      socks      tights

12 - NIGHTWEAR AND LOUNGEWEAR, including -  
garments      night gown      pajamas      robe  
house coat      night shirt      thermal sleeping

13 - ACCESSORIES, including -  
aumbrellas      gloves      apron      fold-up

rain accessories  
belts                    mittens                    ear muffs  
bandannas  
ties                      purse                      handkerchiefs      hair  
accessories  
scarves                  wallet                      bridal headpiece    non-  
prescription sunglasses

14 - SWIMSUITS OR WARM-UP OR SKI-SUITS, including -  
athletic shirt            jogging suit              swimwear  
athletic shorts          leotards                  swimwear accessories  
  
hunting wear            sweatshirt                snow and ski suit

Do not include any sports uniforms.

15 - UNIFORMS, other than sport, for which the cost is not reimbursed,  
including shirts, pants,  
suits, service apparel, such as: medical, barber, boy or girl scout,  
mechanic,  
waiter/waitress, plumber and lab smocks, and military apparel

16 - COSTUMES, including costumes for dance, ballet, Halloween, etc.

17 - FOOTWEAR, including -  
bedroom slippers      dress shoes  
boots                      sandals  
casual shoes            sneakers, jogging, aerobic, basketball,  
tennis shoes



Section #	Part	Variable Name	Question Text	Skip Instructions
09	A	CLODESCA	Do not include specialized athletic shoes such as for football, What did you buy?	<30 characters> [goto CLOINOUT]
09	A	CLOINOUT	* Describe briefly the item purchased. Was this (were these) purchased for someone inside or outside of your household?  1. Inside your household 2. Outside your household	<1> [goto FORWHOM] <2> [goto FOROUTCU] <D,R> [goto CLOTHQA]
09	A	FORWHOM	For whom was it purchased? * Enter all that apply, separate with commas.  [Fill: "active" CU members]  77. Don't know	<1-30, 77, R> [If more than 1 person is selected goto CLONAME] [else goto CLOTHQA]
09	A	FOROUTCU	For whom was this purchased?  * Enter all age/sex categories that apply to the purchase, separate with commas.  40 Male 16 and over 41 Female 16 and over 42 Male 2-15 43 Female 2-15 44 Children under 2 years old 77 Don't know	<40-44, 77, R> [goto CLONAME]
09	A	CLONAME	*Enter name of person(s).	<30 characters> [goto CLOTHQA]
09	A	CLOTHQA	How many did you purchase?  * Enter number of identical items purchased.	<1-100, D, R> [goto CLOTHMOA]
09	A	CLOTHMOA	When did you purchase [fill: it/them]?	<ref_month - cur_month, D, R> [goto CLOTHXA]
09	A	CLOTHXA	How much did [fill: it/they] cost?	<1-999999> [goto CLOHTXA] <D, R> [goto CLOCMBA_S]

Section #	Part	Variable Name	Question Text	Skip Instructions
09	A	CLOTHTXA	<p>Did this include sales tax?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<1, 2, D, R> [goto CLOCMBA_S]
09	A	CLOCMBA_S	*Enter 'C' for a combined expense.	<C> [goto CLOCMBA] <empty> [goto CLOMOREA]
09	A	CLOCMBA	<p>(Book) 23 - 24 ? [F1]</p> <p>What other clothing is [Fill: CLODESCA] combined with?</p> <p>* Enter all that apply, separate with commas.</p> <ol style="list-style-type: none"> <li>1. Coats, jackets or furs</li> <li>2. Sport coats or tailored jackets</li> <li>3. Suits</li> <li>4. Vests</li> <li>5. Sweaters or sweater sets</li> <li>6. Pants, jeans, or shorts</li> <li>7. Dresses</li> <li>8. Skirts</li> <li>9. Shirts, blouses or tops</li> <li>10. Undergarments</li> <li>11. Hosiery</li> <li>12. Nightwear or loungewear</li> <li>13. Accessories</li> <li>14. Swimsuits or warm-up or ski suits</li> <li>15. Uniforms, for which the cost is not reimbursed</li> <li>16. Costumes</li> <li>17. Footwear</li> </ol> <p>77. Misc. combined (unable to specify/DK)</p>	<1-17, 77> [goto CLOMOREA]
09	A	CLOMOREA	<p>Did you purchase any other [fill: description]?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<1, 2, D, R> [goto CLA_ITEM, next line of grid]

Section #	Part	Variable Name	Question Text	Skip Instructions
09	B	S9B_INTRO	(Book) 25  Now I am going to ask you about any clothing purchased for infants under 2 years of age as well as other purchases of watches, jewelry or hairpieces.  1. Enter 1 to Continue	<1> [goto CLB_ITEM]
09	B	CLB_ITEM	SCREEN 1----- ----- (Book) 25) ? [F1]  Have [fill: YOU_ANYMEM] purchased any clothing for infants under 2 years of age, either for members of your household or for someone outside your household, such as-  * Read each item on list.  1. Coats, jackets or snowsuits? 2. Dresses or other outerwear? 3. Underwear or diapers, including disposable? 4. Sleeping garments? 5. Layettes? 6. Accessories?  95. Continue list 888. Delete the line  SCREEN 2----- ----- (Book) 25) ? [F1]  Have [fill: YOU_ANYMEM] purchased any of the following items, either for your household or for someone outside your household?  * Read each item on list.  7. Watches? 8. Jewelry? 9. Hairpieces, wigs or toupees?	<1-9> [goto CLODESCB] <95> [goto next row] <99> [goto S9B_END] <888> [goto CLB_ITEM - next line of grid] [If no more grid lines goto S9B_END]

99. None/No more entries  
888. Delete the line

Section #	Part	Variable Name	Question Text	Skip Instructions																																					
09	B	H_S9B	<p data-bbox="800 248 1381 293">Section 9 - CLOTHING AND SEWING MATERIALS -- Continued</p> <p data-bbox="800 334 1037 354">Part B - Infants Clothing</p> <p data-bbox="856 394 1199 414">Clothing for infants under 2 years of age</p> <p data-bbox="800 454 1171 474">1 - COATS, JACKETS, OR SNOWSUITS</p> <p data-bbox="800 514 1297 535">2 - DRESSES AND OTHER OUTERWEAR, including -</p> <table border="0" data-bbox="800 537 1325 708"> <tr> <td></td> <td>bathing suits</td> <td>overalls</td> <td>shirt</td> </tr> <tr> <td>tops</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>crawler</td> <td>pants</td> <td>short set</td> </tr> <tr> <td>vest</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>jeans</td> <td>pants set</td> <td>sunsuit</td> </tr> <tr> <td></td> <td>jogging suit</td> <td>playsuit</td> <td>sweater</td> </tr> <tr> <td></td> <td>jumpsuit</td> <td>romper</td> <td>T- shirts</td> </tr> </table> <p data-bbox="800 816 1304 836">3 - UNDERWEAR AND DIAPERS, including disposable</p> <p data-bbox="877 876 1136 896">Do not include diaper service.</p> <p data-bbox="800 937 1058 956">4 - SLEEPING GARMENTS</p> <p data-bbox="800 997 947 1016">5 - LAYETTES</p> <p data-bbox="800 1057 1087 1076">6 - ACCESSORIES, including -</p> <table border="0" data-bbox="867 1078 1272 1151"> <tr> <td>bibs</td> <td>bonnets</td> <td>shoes</td> </tr> <tr> <td>boots</td> <td>caps/hats</td> <td>slippers</td> </tr> <tr> <td>booties</td> <td>mittens/gloves</td> <td>socks</td> </tr> </table> <p data-bbox="800 1224 1171 1243">Part B - Watches, Jewelry, and Hairpieces</p> <p data-bbox="800 1284 947 1304">7 - WATCHES</p> <p data-bbox="800 1344 1226 1393">8 - JEWELRY, including - costume jewelry, rings, and infants jewelry</p>		bathing suits	overalls	shirt	tops					crawler	pants	short set	vest					jeans	pants set	sunsuit		jogging suit	playsuit	sweater		jumpsuit	romper	T- shirts	bibs	bonnets	shoes	boots	caps/hats	slippers	booties	mittens/gloves	socks	<Esc key> [goto CLB_ITEM]
	bathing suits	overalls	shirt																																						
tops																																									
	crawler	pants	short set																																						
vest																																									
	jeans	pants set	sunsuit																																						
	jogging suit	playsuit	sweater																																						
	jumpsuit	romper	T- shirts																																						
bibs	bonnets	shoes																																							
boots	caps/hats	slippers																																							
booties	mittens/gloves	socks																																							

9 - HAIRPIECES, WIGS, OR TOUPEES

09

B

CLODESCB

What did you buy?

<30 characters> [goto CLOGFTB]

\* Describe briefly the item purchased.

Section #	Part	Variable Name	Question Text	Skip Instructions
09	B	CLOGFTB	<p>Was this purchased for your household or someone outside your household?</p> <p>1. Your household 2. Someone outside your household</p>	<1,2,D,R> [goto CLOTHQB]
09	B	CLOTHQB	<p>How many did you purchase?</p> <p>* Enter number of identical items purchased.</p>	<1-150, D, R> [goto CLOTHMOB]
09	B	CLOTHMOB	When did you purchase [fill: it/them]?	<REF_MONTH - CUR_MONTH, D, R> [goto CLOTHXB]
09	B	CLOTHXB	How much did [Fill: it/they] cost?	<1-999999> [goto CLOHTXBX] <D,R> [if from CLB_ITEM, screen 1 goto CLOCMBB_S] [if from CLB_ITEM, screen 2 goto CLOMOREB]
09	B	CLOHTXBX	<p>Did this include sales tax?</p> <p>1. Yes 2. No</p>	<1,2,D,R> [If from CLB_ITEM, screen 1 goto CLOCMBB_S] [If from CLB_ITEM, screen 2 goto CLOMOREB]
09	B	CLOCMBB_S	* Enter 'C' for a combined expense.	<C> [goto CLOCMBB] <Empty> [goto CLOMOREB]
09	B	CLOCMBB	<p>(Book) 25 ? [F1]</p> <p>What other clothing is [Fill: CLODESCB] combined with?</p> <p>* Enter all that apply, separate with commas.</p> <p>1. Coats, jackets or snowsuits 2. Dresses or other outerwear 3. Underwear or diapers 4. Sleeping garments 5. Layette 6. Accessories</p> <p>77. Misc. combined (unable to specify/DK)</p>	<1-6, 77> [goto CLOMOREB]
09	B	CLOMOREB	<p>Did you purchase any other [Fill: description]?</p> <p>1. Yes</p>	<1, 2, D, R> [goto CLB_ITEM, next line of grid]

2. No



Section #	Part	Variable Name	Question Text	Skip Instructions
09	C	S9D_INTRO	(Book) 26  Now I am going to ask about expenditures for clothing services.  1. Enter 1 to Continue	<1> [goto CLD_ITEM]
09	C	CLD_ITEM	(Book) 26 ? [F1]  Have [fill: YOU_ANYMEM] had expenses for any of the following, either for members of your household or for someone outside your household?  * Read each item on list.  1. Repair, alteration or tailoring for clothing and accessories  2. Shoe repair or other shoe services 3. Watch or jewelry repair 4. Clothing rental 5. Clothing storage outside the home  99. None/No more entries 888. Delete the line	<1-5> [goto CLODESCD] <99> [goto S9D_END] <888> [goto CLD_ITEM - next line of grid] [If no more grid lines goto S9D_END]
09	C	H_S9D	Section 9 - CLOTHING AND SEWING MATERIALS - Continued  Part D - Clothing Services  1 - REPAIR, ALTERATION, AND TAILORING FOR CLOTHING AND ACCESSORIES  2 - SHOE REPAIR AND OTHER SHOE SERVICES  3 - WATCH OR JEWELRY REPAIR, including cleaning  4 - CLOTHING RENTAL, including formal wear  5 - CLOTHING STORAGE OUTSIDE THE HOME	<Esc key> [goto CLD_ITEM]
09	C	CLODESCD	What kind of service was this?  * Describe briefly the service.	<30 characters> [goto CLSVGFTC]

Section #	Part	Variable Name	Question Text	Skip Instructions
09	C	CLSVGFTC	<p>Was this service for [fill:YOU_YOURCU] or for someone outside your household?</p> <ol style="list-style-type: none"> <li>1. Your household</li> <li>2. Someone outside your household</li> </ol>	<1,2,D,R> [goto CLOTHMOD]
09	C	CLOTHMOD	When did you purchase this service?	<REF_MONTH-CUR_MONTH,D,R> [goto CLSRVCX]
09	C	CLSRVCX	How much did it cost?	<1-999999> [goto CLSRVCTX] <D,R> [goto CLOCMBD_S]
09	C	CLSRVCTX	<p>Did this include sales tax?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<1,2,D,R> [goto CLOCMBD_S]
09	C	CLOCMBD_S	* Enter 'C' for a combined expense.	<C> [goto CLOCMBD] <empty> [goto CLOMORED]
09	C	CLOCMBD	<p>(Book) 26 ? [F1]</p> <p>What other clothing services is [Fill: CLODESCD] combined with?</p> <p>* Enter all that apply, separate with commas.</p> <ol style="list-style-type: none"> <li>1. Repair, alteration or tailoring for clothing and accessories</li> <li>2. Shoe repair or other shoe services</li> <li>3. Watch or jewelry repair</li> <li>4. Clothing rental</li> <li>5. Clothing storage outside the home</li> </ol> <p>77. Misc. combined (unable to specify/ DK)</p>	<1-5, 77> [goto CLOMORED]
09	C	CLOMORED	<p>Did you have any other expenses for [fill: description]?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<1, 2, D, R> [goto CLD_ITEM next line of grid]
09	D	S9C_INTRO	<p>(Book) 26</p> <p>Now I am going to ask about expenses for sewing materials.</p>	<1> [goto CLC_ITEM]

1. Enter 1 to Continue

Section #	Part	Variable Name	Question Text	Skip Instructions
09	D	CLC_ITEM	<p>(Book) 26 ? [F1]</p> <p>Have [fill: YOU_ANYMEM] purchased any sewing materials either for members of your household or for someone outside your household?</p> <p>* If YES - Read each item on list.</p> <ol style="list-style-type: none"> <li>1. Sewing materials for making slipcovers, curtains, or other home handiwork including <ul style="list-style-type: none"> <li>yarn</li> </ul> </li> <li>2. Sewing materials for making clothes</li> <li>3. Sewing notions</li> <li>4. Other sewing materials</li> </ol> <p>99. None/No more entries 888. Delete a line</p>	<p>&lt;1-4&gt; [goto SEWDESC] &lt;99&gt; [goto S9C_END] &lt;888&gt; [goto CLC_ITEM - next line of grid] [If no more grid lines goto S9C_END]</p>
09	D	H_S9C	<p>Section 9 - CLOTHING AND SEWING MATERIALS - Continued</p> <p>Part C - Sewing Materials</p> <ol style="list-style-type: none"> <li>1 - - SEWING MATERIALS FOR MAKING SLIPCOVERS, CURTAINS, OR OTHER HOME HANDIWORK, including yarn</li> <li>2 - SEWING MATERIALS FOR MAKING CLOTHES, including any fabric used for making <ul style="list-style-type: none"> <li>clothing</li> </ul> </li> <li>3 - SEWING NOTIONS, including - <ul style="list-style-type: none"> <li>buttons                      knitting needles, equipment</li> <li>seam binding                  zipper</li> <li>crochet hooks                measuring tapes</li> <li>sewing basket</li> <li>crochet thread               needles/pins</li> <li>sewing kit</li> <li>embroidery hoops            patterns</li> <li>snaps</li> <li>embroidery thread           scissors</li> <li>thread</li> </ul> </li> <li>4 - OTHER SEWING MATERIALS, including -</li> </ol>	<p>&lt;Esc key&gt; [goto CLC_ITEM]</p>

beads, glitter, sequins  
material

foam

rug

Section #	Part	Variable Name	Question Text	Skip Instructions
09	D	SEWDESC	What did you buy?  * Describe briefly the item purchased.	<30 characters> [goto SEWGFTC]
09	D	SEWGFTC	Was this purchased for your household or for someone outside your household?  1. Your household 2. Someone outside your household	<1,2,D,R> [goto SEWINGMO]
09	D	SEWINGMO	When did you purchase it?	<REF_MONTH - CUR_MONTH,D,R> [goto SEWINGX]
09	D	SEWINGX	How much did it cost?	<1-999999> [goto SEWINGTX] <D,R> [goto CLOCMBC_S]
09	D	SEWINGTX	Did this include sales tax?  1. Yes 2. No	<1,2,D,R> [goto CLOCMBC_S]
09	D	CLOCMBC_S	* Enter 'C' for a combined expense.	<C> [goto CLOCMBC] <empty> [goto CLOMOREC]
09	D	CLOCMBC	(Book) 26 ? [F1]  What other sewing materials is [Fill: SEWINGY] combined with?  * Enter all that apply, separate with commas.  1. Sewing materials for making slipcovers, curtains, other home handiwork including yarn 2. Sewing materials for making clothes 3. Sewing notions 4. Other sewing materials  77. Misc. combined (Unable to specify/DK)	<1-4, 77> [goto CLOMOREC]
09	D	CLOMOREC	Did you purchase any other [fill: description]?  1. Yes 2. No	<1, 2,D,R> [goto CLC_ITEM, next line of grid]

Section #	Part	Variable Name	Question Text	Skip Instructions
14	A	S14A_INTRO	(Book) 32  Now I am going to ask about hospitalization and health Insurance.  1. Enter 1 to Continue	<1> [If there are any records on the input with 8500.IHB_STAT=1 goto S14A_INV] [goto S14A_END]
14	A	HHISTILL	[fill: Do you/Does your household] still [fill: make payments on the [fill: description] from [fill: 8500.HINSCMP] for someone outside your household/ have your [fill: description] policy from [fill: 8500.HINSCMP]?  1. Yes 2. No	<1,2, D, R> [If 8500.HHIPRMPD = 3, 4 goto S14A_END] [goto HHIANYPD]
14	A	HHIANYPD	Since the first of [fill: REF_MONTH] were any payments made on this policy by [fill: YOU_ANYMEM]? [fill: (Include those made by payroll deductions.)]  1. Yes	<1> [goto HHIPDAMT] <2, D, R> [goto S14A_END]
14	A	HHIPDAMT	How much was paid?	<1-99999> [goto HHICMXXA] <D, R> [goto S14A_END]
14	A	HHICMXXA	How much was paid this month?	<0-99999, D, R> [goto S14A_END]
14	A	S14A_END	** CHECK ITEM**	[goto HHISTILL for next appropriate policy on the inventory chart] [If no more policies on the inventory chart, go to Section 14B]
14	B	IHB_ITEM	(Book) 32 ? [F1]  [FILL: Do [fill: YOU_ANYMEM] have any hospitalization or health insurance plans or belong to a plan that pays all or part of your medical expenses? Include policies paid for someone outside your household and please consider any special purpose plans you may have, such as those listed on page 32 of the Information Booklet. / Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] purchased any [fill: additional] health or hospitalization insurance? Include any policies paid for	<1> [goto HINSCMP] <99> [goto S14B_END] <888> [goto IHB_ITEM - next line of grid] [If no more grid lines goto S14B_END]

Section #	Part	Variable Name	Question Text	Skip Instructions
			someone outside your household. ]	
			* Do not report Medicare Prescription Drug plans (Medicare Part D) here. Medicare Prescription Drug plans are collected in Section 14C in Interviews 2 through 5.	
			* Read item on list.	
			1. Hospitalization or health insurance plans	
			99. None/No more entries 888. Delete the line	
14	B	HINSCMP	What is the name of the insurance company for this health insurance policy?	<30 characters> [goto HHIBCBS]
			* Enter name of insurance company, not the insurance agent.	
14	B	HHIBCBS	*Do not read to respondent. * Is the insurance company Blue Cross/Blue Shield?	<1,2, D,R> [goto HHICOVQ]
			1. Yes 2. No	
14	B	HHICOVQ	How many household members are/were covered by this policy?	<0-30, D,R> [goto HHICODE]
14	B	HHICODE	(Book) 32 ? [F1]  What type of insurance plan is it?	<1> [goto HHIPOS] <2> [goto HHIFEET] <3> [goto HHIGROUP] <4> [goto HHISPECT] <D,R> [goto HHIGROUP]
			1. Health Maintenance Organization 2. Fee for Service Plan 3. Commercial Medicare Supplement 4. Other special purpose plan	
14	B	H_S14B	Section 14 HOSPITALIZATION AND HEALTH INSURANCE  1 - HEALTH MAINTENANCE ORGANIZATION  Expenses in this type of plan are usually covered in full or there is a modest co-payment at the time of your visit. There are two basic types of HMO's. The first is the group/staff type in which you go to a central facility (group health center) to receive care. The second type is an independent practice association (IPA) in which providers work from	<Esc key> [goto HHICODE or



their individual offices and are referred to as primary care physicians.

Section #	Part	Variable Name	Question Text	Skip Instructions
			<p>2 - FEE FOR SERVICE PLAN</p> <p>In a fee for service type of plan you or your insurance company is generally billed after each visit. In a traditional fee for service plan you may go to any doctor or hospital you choose. In a Preferred Provider Organization (PPO) you are provided with a list of doctors from which you may choose. If you choose to go to one of the doctors on the PPO list, the amount of expenses covered is higher than if you go to a doctor not on the list.</p> <p>3 - COMMERCIAL MEDICARE SUPPLEMENT</p> <p>A Commercial Medicare Supplement is a voluntary contributory private insurance plan available to Medicare recipients, to cover the costs of deductibles, coinsurance, physician services and other medical and health services.</p>	
14	B	HHIPOS	<p>Under normal circumstances, if you go to a doctor who is not part of your plan without a referral, will your insurance pay for the cost?</p> <p>1. Yes 2. No</p>	<1,2,D,R> [goto HHIGROUP]
14	B	HHIFEET	<p>(Book) 32 ? [F1]</p> <p>Is this fee for service plan a -</p> <p>1. Traditional Fee for Service Plan? 2 . Preferred Provider Option Plan?</p>	<1,2,D,R> [goto HHIGROUP]
14	B	H_S14B_2	<p>FEE FOR SERVICE PLAN</p> <p>In a fee for service type of plan you or your insurance company is</p>	

generally billed after each visit. In a traditional fee for service plan you may go to any doctor or hospital you choose. In a Preferred Provider Organization (PPO) you are provided with a list of doctors from which you may choose. If you choose to go to one of the doctors on the

Section #	Part	Variable Name	Question Text	Skip Instructions
14	B	HHISPECT	Is this special purpose insurance plan -  1. Dental insurance?                      4. Mental health insurance? 2. Vision insurance?                      5. Dread disease policy? 3. Prescription drug insurance?        6. Other type of special purpose health insurance? - Specify	<1-5,D,R> [goto HHIGROUP] <6> [goto OTHINTYP]
14	B	OTHINTYP	* Specify:	<30 characters> [goto HHIGROUP]
14	B	HHIGROUP	Was the policy obtained on an individual or group basis?  1. Individually obtained 2. Group through place of employment 3. Group through other organization	<1-3, D,R> [goto HHIPRMPD]
14	B	HHIPRMPD	Are the policy premiums paid -  1. Entirely by [fill: YOU_YRCU]? 2. Partially by [fill: YOU_YRCU]? 3. Entirely by an employer or union? 4. Entirely by another group or persons outside your household?	<1,2> [goto HHIPRDED] <3,4> [goto HHIMORE] <D,R> [goto HHIPRDED]
14	B	HHIPRDED	Are any premiums paid through payroll deductions?  1. Yes 2. No	<1,2, D,R> [goto HHIRPMTB]
14	B	HHIRPMTB	What is your part of the regular health insurance payment [fill: including all payroll deductions]?	<1-99999> [goto HHIRPMPD] <D,R> [goto HHIRPMPD]
14	B	HHIRPMPD	What period of time is covered by the regular payment?  1. Week                      5. 6 months 2. 2 weeks                    6. Year 3. Month                      7. Other - Specify 4. Quarter	<1-6, D,R> [goto HHICPMTB] <7> [goto PTIMEOTH]
14	B	PTIMEOTH	* Specify:	<30 characters> [goto HHICPMTB]
14	B	HHICPMTB	Since the first of [fill: REF_MONTH] were any payments made on this policy?  1. Yes	<1> [goto HHIRPMTB] <2, D,R> [goto HHIMORE]
14	B	HHIRPMTB	Was each payment in the amount of [fill: the regular payment/\$(HHIRPMTB)]?	<1> [goto HHIQMTB] <2,D,R> [goto HHIIRGXB]

Section #	Part	Variable Name	Question Text	Skip Instructions
			1. Yes 2. No	
14	B	HHIQMTB	How many payments were made?	<1-15, D,R> [goto HHICMXXB]
14	B	HHIIRGXB	What was the total expense paid for this policy since [fill:	<1-99999, D,R> [goto HHICMXXB]
14	B	HHICMXXB	How much was paid this month?	<0-99999, D, R> [goto HHIMORE]
14	B	HHIMORE	Did you have any other hospitalization or health insurance plans?  1. Yes 2. No	<1, 2, D, R> [goto IHB_ITEM, next line of grid]
14	B	S14B_END	** CHECK ITEM **	[If no more policies and INTNMBR = 1 goto S14_END in section 14c] [if no more policies and intmbr = 2-5 goto Section 14C]
14	C	CHGHHMCR	Last time you said that [fill: 8500.HHMCRCOV] [fill: household member was/household members were] enrolled in Medicare. Has the number of household members enrolled in Medicare changed?  1. Yes 2. No	<1> [goto HHMCRCOV] <2, D,R> [If 8500.HHPARTD = 1 goto 14C_UPDATE] [Else goto RETPARTD]
14	C	HHMCRENR	Are [fill: YOU_ANYMEM] presently enrolled in Medicare? Medicare is the Federal Health Insurance Plan.  1. Yes 2. No	<1> [goto HHMCRCOV] <2, D,R> [If 8500.MDCDENR is 1 goto CHGMDCDE] [Else goto MDCDENR]
14	C	HHMCRCOV	How many members of your household are covered by Medicare?  * If this is a single person household, enter 1 without asking the question	<0-30> [If intnubr = 2 or new CU, goto HHPARTD, if intnubr = 3-5 and not a new CU AND 8500.HHPARTD = 1, goto 14C_UPDATE] [ELSE goto RETPARTD]
14	C	14C_UPDATE	Question Text **Check item**	[goto STILDRUG]
14	C	STILDRUG	Is [fill: NAME] still enrolled in a Medicare Prescription Drug plan?  *Enter 'YES' if the member changed to a different Medicare Prescription Drug plan.  1. Yes	<1> > [goto PREMCHG]  < 2, D, R> [goto next member on 14C_UPDATE; if there exist values of MEMBNO that do not match any value of 8500.PRTDMBNO, goto RETPARTD;

2. No

else, if 8500.MDCDENR ne 1, goto  
MDCDENR] [else, goto CHGMDCDE]

Section #	Part	Variable Name	Question Text	Skip Instructions
14	C	PREMCHG	<p>Is [fill: NAME]'s premium still [fill: \$8500.DRGPREMX/ the same]?</p> <p>1. Yes</p>	<p>&lt;1, D, R&gt; [goto STILDRUG for next member on 14C_UPDATE; if there exist values of MEMBNO that do not match any value of 8500.PRTDMBNO, goto RETPARTD; else if 8500.MDCDENR ne 1, goto MDCDENR] [else, goto CHGMDCDE]</p>
14	C	PREMCHGX	<p>What is [fill: NAME]'s current premium amount for the Medicare Prescription Drug Plan?</p>	<p>&lt;2&gt; [goto PREMCHGX]</p> <p>&lt;0-999, D, R&gt; [goto STILDRUG for next member on 14C_UPDATE; if there exist values of MEMBNO that do not match any value of 8500.PRTDMBNO, goto RETPARTD; else if 8500.MDCDENR ne 1, goto MDCDENR] [else, goto CHGMDCDE]</p>
14	C	RETPARTD	<p>Are [fill: YOU_ANYMEM] presently enrolled in a Medicare Prescription Drug plan since the first of [fill: REF_MO]?</p> <p>* The Medicare Prescription Drug plan is also known as Medicare Part D, which is the plan that began enrollment in November 2005.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto DRUGPLAN]</p> <p>&lt;2, D,R&gt; [If 8500.MDCDENR = 1, goto CHGMDCDE, if 8500.MDCDENR ne 1, goto MDCDENR]</p>
14	C	HHPARTD	<p>Are [fill: YOU_ANYMEM] presently enrolled in a Medicare Prescription Drug plan?</p> <p>* The Medicare Prescription Drug plan is also known as Medicare Part D, which is the plan that began enrollment in November 2005.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto DRUGPLAN]</p> <p>&lt;2, D,R&gt; [Else goto MDCDENR]</p>
14	C	DRUGPLAN	<p>Who [fill: is enrolled/enrolled] in a Medicare Prescription Drug plan?</p> <p>* Enter line numbers for all that apply, separate with commas. * If this is a single person household, enter "1" without asking the question</p>	<p>&lt;1-30&gt; [goto 14C_NEW ]</p> <p>&lt;D, R&gt; [goto MDCDENR]</p>
14	C	14C_NEW	<p>**Check item**</p>	<p>[goto ENROLLMO]</p>



Section #	Part	Variable Name	Question Text	Skip Instructions
14	C	ENROLLMO	In what month and year did [fill: NAME/you] enroll in the prescription drug plan?  * Enter month of enrollment	<1-12, D, R> [goto ENROLLYR]
14	C	ENROLLYR	* Enter year of enrollment	<2005 - 9000, D, R> [goto
14	C	DRGPREMX	What is the monthly premium for [fill: NAME's/your] Medicare Prescription Drug plan?  * Do not include any monthly co-payments paid by the household.	<0 - 999, D, R> [goto HHDRGSS]
14	C	HHDRGSS	Is the monthly premium deducted from a Social Security payment?  1. Yes 2. No	<1, 2, D, R> [goto ENROLLMO for the next line number entered in DRUGPLAN,  [ELSE if no more line numbers AND 8500.MDCDENR ne 1 goto MDCDENR]
14	C	CHGMDCDE	Last time you said that [fill: 8500.MDCDCOV] [fill: household member was/household members were] enrolled in Medicaid. Has the number of members enrolled in Medicaid changed?	<1> [goto MDCDCOV] <2, D,R> [If 8500.OTHPLAN is 1, goto STILLOTH] [ELSE goto OTHPLAN]
14	C	MDCDENR	Are [fill: YOU_ANYMEM] enrolled in Medicaid?  1. Yes 2. No	<1> [goto MDCDCOV] <2, D,R> [If 8500.OTHPLAN is 1, goto STILLOTH] [ELSE goto OTHPLAN]
14	C	MDCDCOV	How many members of your household are covered by Medicaid?	<0-30> [If 8500.OTHPLAN is 1, goto STILLOTH] [ELSE goto OTHPLAN]
14	C	STILLOTH	Are any members of your household still covered by a plan other than Medicare or Medicaid TRICARE, CHAMPUS, or military health care?  1. Yes	<1,2, D,R> [goto S14C_END]



Section #	Part	Variable Name	Question Text	Skip Instructions
14	C	OTHPLAN	<p>Are [fill: YOU_ANYMEM] covered by any plan other than Medicare or Medicaid which provides free health care such as TRICARE, CHAMPUS or military health care?</p> <p>1. Yes</p>	<1,2, D,R> [goto S14C_END]
14	C	IHD_STAT	***OUT VARIABLE***	<1-3>
17	A	SUB_INTRO	<p>(Book) 37</p> <p>Now I am going to ask you about expenses for subscriptions, memberships, books, and entertainment. Please remember to include any payments you made online or had automatically deducted.</p> <p>1. Enter 1 to Continue</p>	<1> [goto SUB_ITEM]
17	A	SUB_ITEM	<p>(Book) 37 ? [F1]</p> <p>SCREEN 1 ----- -----</p> <p>Since the first of [fill: REF_MONTH] have [fill: YOU_ANYMEM] purchased any of the following items for your household or for someone outside your household?</p> <p>* Read each item on list.</p> <p>1. Subscriptions to newspapers, magazines or periodicals. Include online subscriptions  2. Books purchased from a book club  3. Season tickets to theater, concert series, opera, other musical series, or amusement parks  4. Season tickets to sporting events  5. Encyclopedias or other sets of reference books</p> <p>95. Continue list  888. Delete the line</p> <p>SCREEN 2 ----- -----</p>	<1-13> [goto SUBDESC] <95> [goto next row] <99> [goto S17A_END] <888> [goto SUB_ITEM - next line of grid] [If no more grid lines goto S17A_END]

Section #	Part	Variable Name	Question Text	Skip Instructions
			<p>Have [fill: YOU_ANYMEM] had any membership costs or other expenses related to any</p>	
			<p>of the following? Do not include contributions to or membership in religious, professional, business, or other tax deductible organizations.</p>	
			<p>* Read each item on list.</p>	
			<p>6. Golf courses, country clubs, and other social organizations 7. Health clubs, fitness centers, swimming pools, weight loss centers, or other sports and recreational organizations 8. Vacation clubs 9. Civic, service, or fraternal organizations 10. Credit card membership fees 11. Shopping club memberships such as COSTCO and Sam's 12. Services that use Global Positioning System or GPS, such as OnStar, not already reported 13. Direct or online dating services</p>	
			<p>99. None/No more entries 888. Delete the line</p>	
17	A	H_S17A	<p>Section 17 SUBSCRIPTIONS, MEMBERSHIPS, BOOKS, AND ENTERTAINMENT EXPENSES</p>	<p>&lt;Esc Key&gt; [goto SUB_ITEM]</p>
			<p>Part A - SUBSCRIPTIONS AND MEMBERSHIPS</p>	
			<p>1 - Subscription to newspapers, magazines or periodicals, including online subscriptions</p>	
			<p>2 - Books purchased from a book club</p>	
			<p>3 - Season tickets to theater, concert series, opera, other musical series, or amusement parks</p>	
			<p>4 - Season tickets to sporting events</p>	
			<p>5 - Encyclopedias or other sets of reference books</p>	
			<p>6 - Golf courses, country clubs, and other social organizations</p>	
			<p>7 - Health clubs, fitness centers, swimming pools, weight loss centers,</p>	

or other  
sports and recreational organizations

8 - Civic, service, or fraternal organization

9 - Credit card membership fees

Section #	Part	Variable Name	Question Text	Skip Instructions
			10 - Shopping club memberships such as COSTCO and Sam's	
			11 - Global positioning services, or GPS, such as Onstar	
			12 - Direct or on-line dating services	
17	A	SUBDESC	What is the name of the [fill: description]?	<30 characters> [goto S17GFTCA]
17	A	S17GFTCA	Was this purchase for your household or someone outside your household?	<1, 2, D, R> [goto S17PURXA]
			1. For household	
17	A	S17PURXA	What was the total cost since the first of [fill: REF_MONTH]? [fill: (Include shipping and handling fees.) ]	<1-999999, D, R> [goto S17CMEXX]
17	A	S17CMEXX	How much of the total amount was paid this month?	<0-999999, D, R> [goto S17AOTHR]
17	A	S17AOTHR	Did you [fill: purchase/pay for] any other [fill: description]?	<1, 2, D, R> [goto SUB_ITEM, next line of grid]
			1. Yes 2. No	
17	B	SPORTFEE	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH] have [fill: YOU_ANYMEM], . . .  Paid any fees for participating in sports such as golf, bowling, biking, hockey, football, or swimming?	<1> [goto S17BE] <2, D ,R> [goto SPORTADM]
			1. Yes 2. No	
17	B	SPORTADM	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM], . . .	<1> [goto S17BE] <2, D, R> [goto RECADMIT]

Paid any single admission to spectator sports such as football, baseball, hockey, racing, or track events?

\* Include ticket/admission service fees and surcharges.

1. Yes
2. No

Section #	Part	Variable Name	Question Text	Skip Instructions
17	B	RECADMIT	<p>(Book) 38 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM]. . .</p> <p>Paid any single admissions to performances such as movies, plays, operas, or concerts?</p> <p>* Include ticket/admission service fees and surcharges.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto S17BE] &lt;2, D, R&gt; [goto ENTADMIT]</p>
17	B	ENTADMIT	<p>(Book) 38 ? (F1)</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM]. . .</p> <p>Paid any single admission to other entertainment activities such as museums, amusement parks, zoos, or state parks?</p> <p>* Include ticket/admission service fees and surcharges.</p> <p>1. Yes 2. No</p>	<p>&lt; 1 &gt; [goto S17BE] &lt;2,D,R&gt; [goto OTHEBKRF]</p>
17	B	OTHRBKRF	<p>(Book) 38 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] . . .</p> <p>Bought any books, including paperbacks and reference books, which were not purchased through a book club? Do not include school books.</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto S17BE] &lt;2, D, R&gt; [goto NEWSMAG]</p>
17	B	NEWSMAG	<p>(Book) 38 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] . . .</p> <p>Purchased single copies of newspapers, magazines, or periodicals (non-subscription)?</p>	<p>&lt; 1 &gt; [goto S17BE] &lt;2, D, R&gt; [go to RECORDYN]</p>

1. Yes
2. No

Section #	Part	Variable Name	Question Text	Skip Instructions
17	B	RECORDYN	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] . . .  Purchased any CDs, audio tapes, or records?  * Report blank CDs or audio tapes in Section 6B under precode 29.  1. Yes 2. No	<1> [goto S17BE] <2, D, R> [goto FILM]
17	B	FILM	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] . . .  Purchased any photographic film?  1. Yes 2. No	<1> [goto S17BE] <2, D, R> [goto FILMPRCS]
17	B	FILMPRCS	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] . . .  Paid for film processing or the printing of digital photographs?  1. Yes 2. No	<1> [goto S17BE] <2, D, R> [goto VIDEOPUR]
17	B	VIDEOPUR	(Book) 38 ? [F1]  Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM]. . .  Purchased any video tapes or DVD's?  * Report blank video tapes or blank DVDs in Section 6B under item code 29.  1. Yes 2. No	<1> [goto S17BE] <2, D ,R> [goto VIDEORNT]





Section #	Part	Variable Name	Question Text	Skip Instructions
17	B	VIDEORNT	<p>(Book) 38 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM]. . .</p> <p>Rented any video tapes or DVD's?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto S17BE] &lt;2, D, R&gt; [goto S17B_END]</p>
17	B	H_S17B	<p>Section 17 - SUBSCRIPTIONS, MEMBERSHIPS, BOOKS, AND ENTERTAINMENT</p> <p>Part B - BOOKS AND ENTERTAINMENT EXPENSES</p> <ul style="list-style-type: none"> <li>- Fees for participating in sports, including - tennis    golf    bowling    swimming    billiards</li> <li>- Single admissions to spectator sports, including - football    baseball    hockey    soccer auto racing    basketball</li> <li>- Single admission to performances, including - concerts    movies    plays    operas</li> <li>- Single admission to other entertainment activities, including - museums    amusement parks    zoos    state parks historic sites</li> <li>- Books not purchased through book clubs, including - paperbacks    hardcover    audio    digital books</li> </ul> <p>Exclude reference books or school books</p> <ul style="list-style-type: none"> <li>- Single copies of newspapers, magazines, periodicals (non-subscription)</li> <li>- Compact discs, audio tapes, or records</li> </ul> <p>Do not include blank CDs or blank audio tapes.</p>	<p>&lt;Esc&gt; [go back to appropriate item]</p>

- Photographic film, including disposable cameras
- Photo processing  
     digital photo processing                      video film processing

Section #	Part	Variable Name	Question Text	Skip Instructions
			<ul style="list-style-type: none"> <li>- Purchase of video tapes or DVDs</li> </ul> <p>Do not include blank DVDs or blank audio tapes.</p> <ul style="list-style-type: none"> <li>- Rental of video tapes or DVDs including -              mail delivery DVD rentals</li> </ul>	
17	B	S17BE	What was the total expense?	<1-99999>    [ goto S17BCM] <D, R>        [goto next appropriate screener]
17	B	S17BCM	How much of the total amount was spent this month?	<0-99999, D, R>    [goto next appropriate screener]
19	A	S19A_INTRO	(Book) 41-42	<1>            [goto MIS_ITEM]
			<p>Now I am going to ask about miscellaneous expenses which have not been collected anywhere else in this survey. Please remember to include any payments you made online or had automatically deducted.</p> <p>1. Enter 1 to Continue</p>	
19	A	MIS_ITEM	<p>(Book) 41 - 42 ? [F1]</p> <p>Since the first of [fill: REF_MONTH], have [fill: YOU_ANYMEM] had expenses for any of the following, either for [fill: YOU_YRCU] or for someone outside your household?</p> <p>* Read each item on list.</p> <ol style="list-style-type: none"> <li>1. Fresh flowers or potted plants</li> <li>2. Professional photography</li> <li>3. Services of lawyers or other legal professionals</li> <li>4. Accounting fees</li> <li>5. Occupational expenses, such as union dues or professional licenses</li> </ol> <p>6. Gardening or lawn care services</p>	<1-24>    [goto MISDESC] <99>        [S19A_END] <888>      [goto MIS_ITEM - next line of grid] [If no more grid lines goto S19A_END]

- 7. Housekeeping services
- 8. Home security system service fees
- 9. Other home services or small repair jobs around the house, not previously reported
- 10. Moving, storage, or freight
- 11. Stamp or coin collecting
- 12. Lotteries or games of chance
- 13. Babysitting, nanny services, or other child care in YOUR home

Section #	Part	Variable Name	Question Text	Skip Instructions
			14. Babysitting, nanny services, or other child care in someone ELSE's home	
			95. Continue 888. Delete the line	
			SCREEN 2	
			(Book) 42 ? [F1]	
			Have [fill: YOU_ANYMEM] had expenses for toys, games, or arts and crafts kits, either for [fill: YOU_YRCU] or for someone outside your household?	
			* IF YES - Read each item on list.	
			Were your expenses for -	
			15. Toys or games? 16. Arts or crafts kits?	
			95. Continue 888. Delete the line	
			SCREEN 3	
			(Book) 42 ? [F1]	
			Have [fill: YOU_ANYMEM] had expenses for the purchase of pets, pet supplies, pet medicines, pet services, or veterinarian services, either for [fill: your/your household's] pets or for pets belonging to someone outside your household?	

\* IF YES - Read each item on list.

Were your expenses for -

17. Purchase of pets, pet supplies, or medicine for pets?

18. Pet services?

19. Veterinarian expenses for pets?

95. Continue

888. Delete the line

SCREEN 4

**Section #**

**Part**

**Variable Name**

**Question Text**

**Skip Instructions**

(Book) 42 ? [F1]

Have [fill: YOU\_ANYMEM] had expenses for catered affairs, parties, or events, either for [fill: YOU\_YRCU] or for someone outside your household?

\* IF YES - Read each item on list.

Were your expenses for -

20. Food and beverages for catered affairs?

21. Live entertainment?

22. Rental of party supplies?

95. Continue

888. Delete the line

SCREEN 5

(Book) 42 ? [F1]

Have [fill: YOU\_ANYMEM] had expenses for the purchase or upkeep or cemetery lots or vaults or for funerals, burials, or cremation, either for [fill: YOU\_YRCU] or for someone outside your household?

\* IF YES - Read each item on list.

Were your expenses for -

- 23. Purchase or upkeep of cemetery lots or vaults?
- 24. Funerals, burials, or cremation?

99. None/no more entries  
888. Delete the line

19                    A                    H\_S19A

Section 19 - MISCELLANEOUS EXPENSES  
Part A - Miscellaneous Expenses

<Esc key>    [goto MIS\_ITEM]

1 - FRESH FLOWERS OR POTTED PLANTS

2 - PROFESSIONAL PHOTOGRAPHY

3 - SERVICES OF LAWYERS OR OTHER LEGAL PROFESSIONALS,  
including -  
Arbitration services    Contracts    Divorce    Mediation  
Services    Wills

**Section #                    Part                    Variable Name**

**Question Text**

**Skip Instructions**

Do not include fees for business purposes or those related to closing costs for the purchase of real estate.

4 - ACCOUNTING FEES, including -  
estate management                    trust management  
income tax preparation

Do not include fees for business purposes.

5 - OCCUPATIONAL EXPENSES, such as union dues or professional licenses.

6 - GARDENING OR LAWN CARE SERVICES, including -  
fertilize lawn, etc.                    planting                    tree pruning  
hedge trimming                    plowing                    tree removal  
lawn cutting                    tilling

Include any services provided under service contracts. Do not include services which are covered by management or maintenance fees.

7 - HOUSEKEEPING SERVICES, including -  
carpet cleaning                    cooking                    window washing



aquarium            collars            guinea pig  
tropical fish  
bird                    dog                   hamster  
bird cage            dog house           hamster cage  
cat                     gerbil                pet toys

18 - PET SERVICES, including -  
grooming            kennels            license    pet daycare    pet  
resorts

19 - VETERINARIAN EXPENSES FOR PETS  
vet insurance

20 - FOOD AND BEVERAGES FOR CATERED AFFAIRS, including -  
anniversaries        bridal showers       parties  
Bar Mitzvah           confirmations        weddings  
Bat Mitzvah           graduations

21 - LIVE ENTERTAINMENT

22 - RENTAL OF PARTY SUPPLIES

23 - PURCHASE OR UPKEEP OF CEMETERY LOTS OR VAULTS

24 - FUNERALS, BURIALS, OR CREMATION

burial fees    flowers for funeral    musician honoraria  
limousines (used  
burial plans    clergy                   funeral transcript  
during funeral)  
headstones    footstones

Section #	Part	Variable Name	Question Text	Skip Instructions
19	A	MISCDESC	What was the expense for?	<30 characters>    [goto MISCMO]
19	A	MISCMO	In what month did you have this expense?  Fill: [ * Enter 13 for same amount each month of the reference period.]	<REF_MONTH - CUR_MONTH, 13, D, R> [goto MISCGFTC]
19	A	MISCGFTC	Was this expense for someone inside or outside your household?	<1, 2, D, R>    [goto MISCEXPX]

			<ol style="list-style-type: none"> <li>1. For household</li> <li>2. For someone outside your household</li> </ol>	
19	A	MISCEXPX	<p>[fill: What was the total amount of this expense?/What is your monthly expense?]</p> <p>[fill: * Do not include legal fees related to real estate closing costs reported in Section 3]</p>	<p>&lt;1-999999, D, R&gt; [If MIS_ITEM = 15-24 goto S19ACM_S] [goto MISCMORE]</p>
19	A	S19ACM_S	*Enter a 'C' for a combined expense.	<p>&lt;C&gt; [goto S19ACMB] &lt;empty&gt; [goto MISCMORE]</p>
19	A	S19ACMB	(Book) 41-42	<15-24> [goto MISCMORE]
			<p>What other expense is the [fill: description] combined with?</p> <p>* Enter all that apply, separate with commas.</p> <p>[display: (combination)]</p>	
19	A	MISCMORE	<p>Did you have any other expenses for [fill: description]?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1, 2, D, R&gt; [goto MIS_ITEM, next line in grid]</p>



Section #	Part	Variable Name	Question Text	Skip Instructions																
22	A	ANYWORK	<p>Since the first of [fill: Ref_Month], did [fill: you/NAME] earn any income from wages or salary?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto 22A_INTRO] &lt;2,D,R&gt; [If CUR_MONTHNUM = 7-9 AND ( 85.SOCSECIN = 1 or 85.RRRETINC = 1 or 85.SUPPLINC = 1 or 85.SLSSI = 1) then goto PYMT2009] [ELSE, goto S22A_CHECK]</p>																
22	A	S22A_INTRO	<p>The next few questions are about income. We know people aren't used to discussing their income, but please be assured that, like all other information you have provided, these answers will be kept strictly confidential.</p>	<p>&lt;1&gt; goto INCWEEKQ</p>																
22	A	INCWEEKQ	<p>In the past 12 months, including paid vacation and sick leave, how many weeks did [fill: you/NAME] work?</p> <p>* If household member did not work, enter zero.</p>	<p>&lt;0&gt; [goto INCNONWK ] &lt;1-52, D,R &gt; [goto</p>																
22	A	INC_HRSQ	<p>In the weeks that [fill: you/NAME] worked, how many hours did [fill: you/he/she] usually work per week?</p>	<p>&lt;1-168 D,R&gt; [goto</p>																
22	A	OCCUCODE	<p>(Book) 46 ? [F1]</p> <p>Which of the following categories best describes the job in which [fill: you/NAME] received the most earnings during the last 12 months?</p> <table border="0"> <tr> <td>1. Administrator, manager operator, assembler, inspector</td> <td>11. Machine</td> </tr> <tr> <td>2. Teacher operator</td> <td>12. Transportation operator</td> </tr> <tr> <td>3. Professional laborer</td> <td>13. Handler, helper, laborer</td> </tr> <tr> <td>4. Administrative support including clerical repairer, precision production</td> <td>14. Mechanic,</td> </tr> <tr> <td>5. Sales, retail mining</td> <td>15. Construction,</td> </tr> <tr> <td>6. Sales, business goods and services</td> <td>16. Farming</td> </tr> <tr> <td>7. Technician groundskeeping</td> <td>17. Forestry, fishing,</td> </tr> <tr> <td>8. Protective service</td> <td>18. Armed Forces</td> </tr> </table>	1. Administrator, manager operator, assembler, inspector	11. Machine	2. Teacher operator	12. Transportation operator	3. Professional laborer	13. Handler, helper, laborer	4. Administrative support including clerical repairer, precision production	14. Mechanic,	5. Sales, retail mining	15. Construction,	6. Sales, business goods and services	16. Farming	7. Technician groundskeeping	17. Forestry, fishing,	8. Protective service	18. Armed Forces	<p>&lt;1-18 D,R&gt; [goto INCOMEY ]</p>
1. Administrator, manager operator, assembler, inspector	11. Machine																			
2. Teacher operator	12. Transportation operator																			
3. Professional laborer	13. Handler, helper, laborer																			
4. Administrative support including clerical repairer, precision production	14. Mechanic,																			
5. Sales, retail mining	15. Construction,																			
6. Sales, business goods and services	16. Farming																			
7. Technician groundskeeping	17. Forestry, fishing,																			
8. Protective service	18. Armed Forces																			
22	A	H_OCCUCODE	<p>Section 22 OCCUPATIONS</p>	<p>&lt;Esc&gt;</p>																

1 - ADMINISTRATOR, MANAGER  
administrator manager funeral director

2 - TEACHER  
teacher guidance counselor

3 - PROFESSIONAL  
accountant computer programmer  
computer systems analyst  
engineer physician clergy registered nurse  
social worker lawyer

4 - ADMINISTRATIVE SUPPORT, INCLUDING CLERICAL  
assistant bookkeeper clerk computer  
receptionist secretary typist

5 - SALES, RETAIL  
apparel salesperson cashier  
commodity salesperson  
door to door salesperson motor vehicle salesperson

6 - SALES, BUSINESS GOODS AND SERVICES  
salesperson financial services insurance  
representative manufacturing sales representative mining sales  
representative real estate sales person wholesale sales  
representative

7 - TECHNICIAN  
clinical laboratory technician drafting  
electronic technician  
health technician practical nurse

8 - PROTECTIVE SERVICE  
firefighter police officer private guard

9 - PRIVATE HOUSEHOLD SERVICE  
household worker nanny

10 - OTHER SERVICE

child care worker    cook                    food  
 counter/fountain worker orderly  
 food preparer        hairstylist maid/houseman    janitor  
 waiter/waitress

11 - MACHINE OPERATOR, ASSEMBLER, INSPECTOR  
 assembler            inspector            machine  
 operator

12 - TRANSPORTATION OPERATOR  
 bus driver            tractor operator        truck  
 driver

13 - HANDLER, HELPER, LABORER  
 construction laborer        freight handler  
 packager  
 material handler            stock handler

14 - MECHANIC, REPAIRER, PRECISION PRODUCTION  
 automobile mechanic        machine repairer  
 machinist  
 meat cutter                    sheet metal  
 worker        tailor

15 - CONSTRUCTION, MINING  
 carpenter            electrician  
 mining worker  
 painter                    plumber

16 - FARMING  
 farmer                    farm worker

17 - FORESTRY, FISHING, GROUNDSKEEPING  
 animal caretaker        fisher            forestry  
 worker  
 groundskeeper

18 - ARMED FORCES  
 [fill: Were/Was] [fill: you/NAME]:

22

A

INCOMEY

<1-4, 6, D, R>  
 <5>

[goto SALARYST]  
 [goto INCORP]

1. An employee of a PRIVATE company, business, or individual working for wages or salary?
2. A Federal government employee?

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	INCORP	<p>3. A State government employee?  4. A local government employee?  5. Self-employed in [fill: your/his/her] OWN business, partnership, professional practice, or farm?  6. Working WITHOUT PAY in a family business or farm?</p> <p>Is [fill: your/NAME's] business incorporated?</p> <p>1. Yes  2. No</p>	<1,2,D,R> [goto SALARYST]
22	A	INCNONWK	<p>What was the main reason [fill: you/NAME] did not work during the last 12 months?  [fill: Were/Was] [fill: you/he/she] -</p> <p>1. Retired?  2. Taking care of home/family?  3. Going to school?  4. Ill, disabled, unable to work?  5. Unable to find work?  6. Doing something else? Specify</p>	<1-5,D,R> [goto SALARYST] <6> [goto INCOTH]
22	A	INCOTH	* Specify:	<30 characters> [goto
22	A	SALARYST	<p>During the last 12 months, did [fill: you/NAME] receive any money in wages or salary?  Include all bonuses and overtime pay, commissions, tips, allowances, Armed Forces pay, severance pay, teaching fellowships, etc.</p> <p>1. Yes  2. No</p>	<1> [goto SALARYX] <2,D,R> [goto NONFARM]
22	A	SALARYX	During the last 12 months, how much did [fill: you/NAME] receive in wages and salaries for ALL JOBS before any deductions?	<1-99999999> [goto GROSPAYX]
22	A	SALARYB	<p>(Book) 47</p> <p>Could you tell me which range on CARD A best reflects [fill: your/NAME] total wages and salaries for ALL JOBS during the last 12 months?</p> <p>1. \$0-\$4,999      7. \$40,000-\$49,999  2. \$5,000-\$9,999      8. \$50,000-\$69,999  3. \$10,000-\$14,999      9. \$70,000-\$89,999  4. \$15,000-\$19,999      10. \$90,000-\$119,999</p>	<1-11,D,R> [goto GROSPAYX]

22

A

GROSPAYX

- 5. \$20,000-\$29,999
- 6. \$30,000-\$39,999
- 11. \$120,000 and over

What was the amount of [fill: your/NAME's] last pay before any

<1-99999999,D,R>  
PAYPERD]

[goto

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	PAYPERD	What period of time did this cover?  1. One week 2. Two weeks 3. Month 4. Quarter 5. Year 6. Twice a month 7. Other	<1-6,D,R> [goto FEDTAX] <7> [goto PAYPRDOT]
22	A	PAYPRDOT	* Specify:	<30 characters> [goto FEDTAX]
22	A	FEDTAX	Was there any money deducted from [fill: your/NAME's] pay for-  Federal income tax?  1. Yes 2. No	<1> [goto AMTFED] <2,D,R> [goto SLTAX]
22	A	AMTFED	How much?	<1-99999999 D,R> [goto SLTAX]
22	A	SLTAX	Was there any money deducted from [fill: your/NAME's] pay for-  State or local income tax?  1. Yes 2. No	<1> [goto SLTAXX] <2,D,R> [goto PRIVPENS]
22	A	SLTAXX	How much?	<1-99999999, D, R> [goto PRIVPENS]
22	A	PRIVPENS	Was there any money deducted from [fill: your/NAME's] pay for-  Private pension fund?  1. Yes 2. No	<1> [goto PRIVPENX] <2,D,R> [goto GOVRET]
22	A	PRIVPENX	How much?	<1-99999999 D,R> [goto GOVRET]
22	A	GOVRET	Was there any money deducted from [fill: your/NAME's] pay for-  Government retirement?  1. Yes 2. No	<1> [goto GOVRETX] <2,D,R> [goto RRRDED]

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	GOVRETX	How much?	<1-99999999 D,R> [goto RRRDED]
22	A	RRRDED	Was there any money deducted from [fill: your/NAME's] pay for- Railroad retirement?  1. Yes 2. No	<1> [goto RRRDEDX] <2,D,R> [goto SDED]
22	A	RRRDEDX	How much?	<1-99999999 D,R> [goto SDED]
22	A	SSDED	Was there any money deducted from [fill: your/NAME's] pay for- Social Security including Medicare?  1. Yes 2. No	<1> [goto MEDICOV] <2,D,R> [goto SSNORM]
22	A	SSNORM	Are Social Security payments NORMALLY deducted from [fill: your/NAME's] pay?  1. Yes 2. No	<1> [goto MEDICOV] <2,D,R> [goto EMPLUN]
22	A	MEDICOV	Does the money deducted for Social Security cover only the Medicare portion of Social Security?  1. Yes 2. No	<1,2,D,R> [goto EMPLCONT]
22	A	EMPLCONT	Other than Social Security, did any employer or union contribute to [fill: your/NAME's] pension or retirement plan in the last 12 months?  1. Yes 2. No	<1,2,D,R> [goto NONFARM]
22	A	NONFARM	During the last 12 months, did [fill: you/NAME] have any income or loss from [fill: your/NAME's] own nonfarm business, partnership, or professional practice?  1. Yes 2. No	<1> [goto NONFARMX] <2,D,R> [goto FARMINC]
22	A	NONFARMX	What was the amount of income or loss after expenses?	<0> [goto FARMINC] <1-99999999> [goto NFRMLOSS] <D,R> [goto NONFARMB]

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	NFRMLOSS	Was this an income or loss?  1. Loss 2. Income	<1, 2, D, R> [goto FARMINC]
22	A	NONFARMB	(Book) 47  Could you tell me which range on CARD A best reflects [fill: your/NAME's] income or loss from [fill: your/NAME's] own nonfarm business, partnership or professional practice during the last 12 months?  0. Loss 1. \$0-\$4,999 2. \$5,000-\$9,999 3. \$10,000-\$14,999 4. \$15,000-\$19,999 5. \$20,000-\$29,999 6. \$30,000-\$39,999 7. \$40,000-\$49,999 8. \$50,000-\$69,999 9. \$70,000-\$89,999 10. \$90,000-\$119,999 11. \$120,000 and over	<0-11,D,R> [goto FARMINC]
22	A	FARMINC	During the last 12 months, did [fill: you/NAME] have any income or loss from [fill: your/NAME's] own farm?  1. Yes 2. No	<1> [goto FARMINCX] <2,D,R> [goto INDRETAC]
22	A	FARMINCX	What was the amount of income or loss after expenses?	<0> [goto INDRETAC]
22	A	FARMLOSS	Was this an income or loss?  1. Loss 2. Income	<1-99999999> [goto FARMLOSS] <1,2,D,R> [goto INDRETAC]
22	A	FARMINCB	(Book) 47  Could you tell me which range on CARD A best reflects [fill: your/NAME's] income or loss from [fill: your/NAME's] own farm during the last 12 months?  0. Loss 1. \$0-\$4,999 2. \$5,000-\$9,999 3. \$10,000-\$14,999 4. \$15,000-\$19,999 6. \$30,000-\$39,999 7. \$40,000-\$49,999 8. \$50,000-\$69,999 9. \$70,000-\$89,999 10. \$90,000-\$119,999	<0-11,D,R> [goto INDRETAC]



5. \$20,000-\$29,999      11. \$120,000 and over

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	INDRETAC	During the last 12 months, did [fill: you/NAME] place any money in a retirement plan such as an Individual Retirement Account (IRA) or Keogh? Do not include rollovers.  1. Yes 2. No	<1> [goto INDRETAC] <2,D,R> [goto SOCSECIN]
22	A	INDRETX	How much?	<1-99999999,D,R> [goto SOCSECIN]
22	A	SOCSECIN	During the last 12 months, did [fill: you/NAME] receive, from the US Government, any money from-  Social Security checks?  1. Yes 2. No	<1,2,D,R> [goto RRRETINC]
22	A	RRRETINC	During the last 12 months, did [fill: you/NAME] receive, from the US Government, any money from-  Railroad Retirement checks?  1. Yes 2. No	<1,2,D,R> [if SOCSECIN is 1 or RRRETINC is 1, goto RRRETINC] [else, goto SUPPLINC]
22	A	RRRETIRX	What was the amount of the last Social Security or Railroad Retirement payment received?	<1-99999999> [goto INCMEDCR] <D,R> [goto
22	A	RRRETIRB	(Book) 48  Could you tell me which range on CARD B best reflects the amount of [fill: your/NAME's] last Social Security or Railroad Retirement payment during the last 12 months?  1. Less than \$300      7. \$800-\$899 2. \$300-\$399        8. \$900-\$999 3. \$400-\$499        9. \$1,000-\$1,499 4. \$500-\$599        10. \$1,500 and over 5. \$600-\$699 6. \$700-\$799	<1-10,D,R> [goto INCMEDCR]
22	A	INCMEDCR	Is this amount AFTER the deduction for a Medicare premium?  1. Yes	<1,2,D,R> [goto SS_RRQ]

2. No

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	SS_RRQ	During the last 12 months, how many Social Security or Railroad Retirement payments did [fill: you/NAME] receive?	<1-52,D,R> [goto SUPPLINC]
22	A	SUPPLINC	During the last 12 months, did [fill: you/NAME] receive any-  Supplemental Security Income (SSI) payments from the US Government?  1. Yes	<1,2,D,R> [goto SLSSI]
22	A	SLSSI	During the last 12 months, did [fill: you/NAME] receive any-  Supplemental Security Income (SSI) payments from the STATE or LOCAL government?  1. Yes 2. No	<1,2,D,R> [if SUPPLINC is 1 or SLSSI is 1, goto SSIX] [ELSEIF CUR_MONTHNUM = 7-9 AND (SOCSECIN = 1 or RRRETINC = 1) then goto PYMT2009] [else, goto S22A_CHECK]
22	A	SSIX	During the last 12 months, how much did [fill: you/NAME] receive in Supplemental Security Income checks from ALL government sources?	<1-99999999> [IF CUR_MONTHNUM = 7-9 then goto PYMT2009] [ELSE goto S22A_CHECK] <D,R> [goto SSIB]
22	A	SSIB	(Book) 49  Could you tell me which range on CARD C best reflects the amount [fill: your/NAME] received in Supplemental Security income from all government sources during the last 12 months?  1. \$0-\$999                      7. \$10,000-\$14,999 2. \$1,000-\$1,999              8. \$15,000-\$19,999 3. \$2,000-\$2,999              9. \$20,000-\$29,999 4. \$3,000-\$3,999              10. \$30,000-\$39,999 5. \$4,000-\$4,999              11. \$40,000-\$49,999 6. \$5,000-\$9,999              12. \$50,000 and over	<1-12,D,R> [IF CUR_MONTHNUM = 7-9 then goto PYMT2009] [ELSE goto S22A_CHECK]

Section #	Part	Variable Name	Question Text	Skip Instructions
22	A	PYMT2009	<p>In early 2009, the Federal government approved the American Recovery and Reinvestment Act.</p> <p>As a result of the act, in May or June 2009 many people who receive Social Security, SSI, or Railroad Retirement benefits also received a one time stimulus payment of \$250. This is different from a refund on your annual income taxes.</p> <p>In May or June 2009, did [fill: you/NAME] receive a one time stimulus payment of \$250?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto HWUSED09] &lt;2,D,R&gt; [goto S22A_CHECK]</p>
22	A	HWUSED09	<p>Did the \$250 stimulus payment lead [fill: you/NAME] mostly to increase spending, mostly to increase savings, or mostly to pay off debt?</p> <p>1. Mostly to increase spending 2. Mostly to increase savings</p>	<p>&lt;1-3,D,R&gt; [goto S22A_CHECK]</p>
CONTROL CARD	-	PRE_CC1	<p>** CHECK ITEM **</p>	<p>[If INTNMBR is 1 or replacement household (3rd position of CASEID = R) goto FNAME]</p>
CONTROL CARD	-	STLLIV	<p>I have listed . . . READ NAMES Are all of these persons still living or staying here?</p> <p>[fill: * This case is part of a Multi-CU address. There are [fill: RT8500.TOTALCU] CU's for this address]</p> <p>[fill: Name of all household members]</p> <p>1. Yes 2. No</p>	<p>&lt;1, 2&gt; [goto PERSTAT]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	PERSTAT	<p>* [fill: Use up/down arrows to move to the correct row for membership change. When done, REVIEW/Update demographics. Press END key /</p> <p>Use left/right arrows to move to REVIEW/Update demographics. When done, Press END key ]</p> <p>7. Delete person 9. Reinstate person</p>	<7, 9, 99>
CONTROL CARD	-	FNAME	<p>99. Error - person should not have been listed [Fill: What are the names of all persons living or staying here? Start with the name of the person, or one of the persons, who owns/rents this home/ What is the name of the  next person living or staying here?]</p>	<16 characters> [goto LNAME] <999> [goto CHECKS]
CONTROL CARD	-	LNAME	* Enter Last Name	<16 characters> [goto CU_CODE] <empty>
CONTROL CARD	-	CU_CODE	<p>* Ask if not apparent</p> <p>What is [Fill: your/name's] relationship to [Fill: you/name of reference person/the owner/renter]?</p> <p>* If the is the Reference Person, enter 1 (The Reference person is one of the persons who owns or rents this home.)</p> <ol style="list-style-type: none"> <li>1. Reference person</li> <li>2. Spouse (Husband/Wife)</li> <li>3. Child or adopted child</li> <li>4. Grandchild</li> <li>5. In-Law</li> <li>6. Brother or Sister</li> <li>7. Mother or Father</li> <li>8. Other related person (Aunt, Uncle, etc.)</li> <li>9. Unrelated Person (Lodger, Lodger's spouse, foster child, etc.)</li> <li>10. Unmarried Partner</li> </ol>	<1-10, D, R> [goto SEX] <Empty>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	SEX	<p>* Ask if not apparent</p> <p>[Fill: Are you/Is (name)] male or female?</p> <p>1. Male 2. Female</p>	<p>&lt;1, 2, D, R&gt; [goto AWAY_COL] &lt;Empty&gt;</p>
CONTROL CARD	-	ERR_SEX1	<p>Soft Edit</p> <p>-----</p> <p>-----</p> <p>* Is one of the following SEX entries incorrent?</p> <p>* Pless Verify</p> <p>-----</p> <p>-----</p> <p>Question involved   Value</p> <p>-----</p> <p>-----</p> <p>cu_code:Rel sex:sex (SEX) sex:sex</p> <p>-----</p> <p>-----</p> <p>Suppress     Close     Goto    </p> <p>-----</p>	<p>[go back to SEX or Rel as appropriate] &lt;suppressed&gt; [goto ERR_SEX2]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	ERR_SEX2	<p>Soft Edit</p> <p>-----</p> <p>-----</p> <p>You said that [Fill: name] is [Fill: (name of reference person)'s] spouse?</p> <p>Is that correct?</p> <p>-----</p> <p>-----</p> <p>Question involved   Value</p> <p>-----</p> <p>-----</p> <p>CU_CODE: Rel (CU_CODE of refper) CU_CODE: Rel (Spouse (husband/wife) SEX: Sex</p> <p>-----</p> <p>-----</p> <p>    Close     Goto     Suppress</p> <p>-----</p>	<suppressed> [goto AWAY_COL]
CONTROL CARD	-	AWAY_COL	<p>* Ask if not apparent</p> <p>[Fill: Are you/Is (name)] living away at college?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto SEX for next person on grid]</p> <p>&lt;2, D, R&gt; [If PERSTAT = 7 then goto SEX for next person on grid] [goto HH_MEM]</p>
CONTROL CARD	-	HH_MEM	<p>[Fill: Do you/Does (name)] usually live here?</p> <p>* Probe if usual place of residence is elsewhere.</p> <p>1. Yes 2. No</p>	<p>&lt;1, 2, D, R&gt; [goto next line of grid]</p> <p>&lt;empty&gt;</p>



Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	HHRESP	<p>* Ask if necessary</p> <p>With whom am I speaking? Enter line number</p> <p>[fill: Name of all household members]</p> <p>95. Proxy Respondent</p>	<p>&lt;1-30, 95&gt; [If ((intnubr is 1 or newcu is 1) AND Newunit is not S) OR Replace is 1, goto MCHILD] [Else goto NEWLIV]</p>
CONTROL CARD	-	MCHILD	<p>I have listed . . . * READ NAMES Have I missed any babies or small children?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [go back to where FNAME = 999]</p>
CONTROL CARD	-	MAWAY	<p>Have I missed anyone who usually lives here but is away now - traveling, at school, or in a hospital?</p> <p>1. Yes, 2. No</p>	<p>&lt;1&gt; [go back to where FNAME = 999]</p>
CONTROL CARD	-	MLODGE	<p>Have I missed any lodgers, boarders, or persons you employ who live here?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [go back to where FNAME = 999]</p>
CONTROL CARD	-	MELSE	<p>Have I missed anyone else staying here?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [go back to where FNAME = 999]</p>
CONTROL CARD	-	NEWLIV	<p>Is anyone else living or staying here, including newborn babies?</p> <p>[fill: Name of all household members]</p> <p>1. Yes, add new person 2. No</p>	<p>&lt;1&gt; [go back to where FNAME = 999] &lt;2&gt; [goto CK_SUBFAMILY]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	CK_SUBFAMILY	** CHECK ITEM **	<p>1. If there are no non-rels is the household who are cu/household members then, store line numbers in SUBFAM2(1,X) and goto SET_CUNUMBER</p> <p>2. If there are more than 1 non-rel who are CU/household members in the household (CU_CODE = 9) then goto SUBFAM1</p> <p>3. All others go to SET_SUBFAMS</p>
CONTROL CARD	-	SUBFAM1	<p>Earlier you said that [fill: (name) was/you were] not related to [fill: name(refper)]. [Fill: Are you/Is (name)] related to anyone else in this household?</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto SUBFAM2] &lt;2&gt; [goto SUBFAM1 for next unassigned non-rel] [if no more non-rels, goto SET_SUBFAMS]</p>
CONTROL CARD	-	SUBFAM2	<p>Who [fill: are you/is (name)] related to?</p> <p>PROBE: Anyone else?</p> <p>Enter line number(s), separate with commas</p>	<p>&lt;1-30&gt; [goto SUBFAM, for next unassigned non-rel] [If no more non-rels, goto SET_SUBFAMS]</p>
CONTROL CARD	-	SHELTX	<p>[fill: * Begin financial responsibility questions to determine CU's]</p> <p>[fill: Do/Does] (READ NAME) pay for all [fill: your/his/her/their] housing expenses with [fill: your/his/her/their] own money?</p> <p>( List the names of persons in this subfamily )</p> <p>1. Yes 2. No</p>	<p>&lt;1,2,D,R&gt; [goto FOODX]</p>
CONTROL CARD	-	FOODX	<p>fill: Do/Does] (READ NAMES) pay for all [fill: your/his/her/their] food expenses with [fill: your/his/her/their] own money?</p> <p>( List the names of persons in this subfamily )</p> <p>1. Yes</p>	<p>&lt;1&gt; [if SHELTX is 1, goto SHELTC for next subfam; if not more subfams then goto UPDATE_SUBFAM] [else goto OTHERX]</p>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	OTHERX	<p>[Fill: Do/Does] [(READ NAMES) pay for all [fill: (your/his/her/their)] other living expenses such as clothing or transportation with [fill: your/his/her/their] own money?</p> <p>( List the names of persons in this subfamily )</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [If sheltx is 1 OR foodx is 1, goto sheltx for next subfamily: if no More subfamilies, goto UPDATE_SUBFAM] [goto SUPSRC] &lt;2,D,R&gt; [goto SUPSRC]</p>
CONTROL CARD	-	SUPSRC	<p>Does all or part of the money to pay for (READ NAMES) [fill description] come from someone in this household?</p> <p>( List the names of persons in this subfamily )</p> <p>1. Yes 2. No</p>	<p>&lt;1&gt; [goto SUPRT1] &lt;2,D,R&gt; [goto SHELTX for next subfamily] [if no more subfamilies, goto</p>
CONTROL CARD	-	SUPRT1	<p>Who is that person(s)?</p> <p>* Enter line number(s), separate with commas</p>	<p>&lt;1-30,D,R&gt; [goto SHELTX for next subfamily] [if no more, goto UPDATE_SUBFAM]</p>
CONTROL CARD	-	CONSUMER_UNITS	<p>* HOUSEHOLD MEMBERS BROKEN INTO APPROPRIATE CU's</p> <p>(List CU# Line number and name)</p> <p>1. Enter 1 to Continue</p>	<p>&lt;1&gt; [goto CU_INTRO]</p>
CONTROL CARD	-	CU_INTRO	<p>During this interview, I will use the word household to refer to the group of related persons who are independent of all other persons living at this address for payment of their major expenses.</p> <p>* A "household" is considered one Consumer Unit</p> <p>The [fill: person/persons] I'm including in your household [fill: is/are] (READ NAME(S))</p> <p>[Fill: CU MEMBERS]</p>	<p>&lt;1&gt; [goto BIRTH_MO]</p>

1. Enter 1 to Continue

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	BIRTH_MO	<p>[fill: * UPDATE Marital, Education, College and Armed Forces Press END when done ]</p> <p>What is the month and year of [Fill: your/(name)'s] birth?</p> <p>* Enter Birth Month</p> <p>1. January            7. July  2. February           8. August  3. March               9. September  4. April                10. October  5. May                 11. November  6. June                12. December</p>	<1-12, D, R> [goto BIRTH_YR] <empty>
CONTROL CARD	-	BIRTH_DY	**CHECK ITEM**	
CONTROL CARD	-	BIRTH_YR	* Enter Birth Year (Enter 4 digit year - ex: 1964)	<1900 - current year, D, R> [goto AGE] <empty>
CONTROL CARD	-	AGE	<p>[Fill: As of today, that would make [Fill: you/(name)] [Fill: less than 1/over98/ approximately (age)] [Fill: year/years] old.</p> <p>Is that correct?</p> <p>PRESS ENTER if correct /</p> <p>Even though you don't know [Fill: your/(name)'s] exact birthdate, what is your best guess as to how old [Fill: you/he/she] [Fill: were/was] on [Fill: your/his/her] last birthday? ]</p> <p>99.        99 years or older  00 - 98    0 to 98 years old    ]</p>	<00-200> [goto HORIGIN] <D,R> [goto AGE2] <Empty>
CONTROL CARD	-	AGE2	<p>* Ask if necessary</p> <p>[Fill: Are/Is] [Fill: you/he/she] under 16?</p> <p>1. Yes  2. No</p>	<1,2,D,R> [goto HORIGIN]

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	HORIGIN	(Book) 2  [Fill: Are/Is] [fill: you/name] Hispanic, Latino, or Spanish?  1. Yes 2. No	<1> [goto HISPANIC] <2, D, R> [goto MULTRACE] <Empty>
CONTROL CARD	-	HISPANIC	(Book) 2 [Fill: Are/Is] [Fill: you/name] -  1. Mexican? 2. Mexican-American? 3. Chicano? 4. Puerto Rican? 5. Cuban? 6. Cuban-American? 7. Central or South American? 8. Other? (Specify)	<1-7, D, R> [goto MULTRACE] <8> [goto HISPOTH] <Empty>
CONTROL CARD	-	HISPOTH	* Specify:	<30 characters> [goto MULTRACE] <Empty>
CONTROL CARD	-	MULTRACE	(Book) 2  Please chose one or more races that [fill: [fill: (name)/you] [fill: considers/consider] [fill: himself/herself/yourself] to be. / you consider [fill: child's name] to be.]  * Probe if necessary  * Enter all that apply, separate with commas  1. White 2. Black or African American 3. American Indian or Alaska Native 4. Asian 5. Native Hawaiian or other Pacific Islander 6. Other Specify 7. Don't Know	<1-3, 5, 7, R> [goto MARITAL] <4> [goto ASIAN] <6> [goto RACESP] <Empty>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	ASIAN	(Book) 2  Please select one of the following to describe [fill: your/name's] origin.  [fill: Are/Is] [Fill: you/name] -  1. Chinese? 2. Filipino? 3. Japanese? 4. Korean? 5. Vietnamese? 6. Asian Indian? 7. Other? (Specify)	<1-6, D, R> [goto MARITAL] <7> [goto ASIANOTH] <Empty>
CONTROL CARD	-	ASIANOTH	* Specify:	<30 characters> <Empty>
CONTROL CARD	-	RACESP	* Specify other race	<40 characters> [goto MARITAL] <empty>
CONTROL CARD	-	MARITAL	* Ask if not apparent  [fill: Are you/Is (name)] now -  1. Married? 2. Widowed? 3. Divorced? 4. Separated? 5. Never married?	<1-5,D,R> [if AGE ge 14 or Agerng is 8 or 9 goto EDUCA] [goto BIRTH_MO for next member] <Empty>

Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	EDUCA	<p>(Book) 3</p> <p>What is the highest level of school [fill: name has/you have] completed or the highest degree [fill: name has/you have] received?</p> <ol style="list-style-type: none"> <li>0. Never attended, preschool, kindergarten</li> <li>1. 1st grade</li> <li>2. 2nd grade</li> <li>3. 3rd grade</li> <li>4. 4th grade</li> <li>5. 5th grade</li> <li>6. 6th grade</li> <li>7. 7th grade</li> <li>8. 8th grade</li> <li>9. 9th grade</li> <li>10. 10th grade</li> <li>11. 11th grade</li> </ol> <p>38. 12th grade NO DIPLOMA</p> <p>39. HIGH SCHOOL GRADUATE - high school DIPLOMA, or the equivalent</p> <ol style="list-style-type: none"> <li>40. Some college but no degree</li> <li>41. Associate degree in college - Occupational program</li> <li>42. Associate degree in college - Academic program</li> <li>43. Bachelor's degree (Example: BA, AB, BS)</li> <li>44. Master's degree (Example: MA, MS, Meng, MSW, MBA)</li> </ol> <p>45. Professional School Degree (Example: MD, DDS, DVM, LLB, JD)</p> <p>46. Doctorate degree (Example: PhD, EdD)</p>	<p>&lt;00-11,38,D,R&gt; [if AGE 16-65 or agerng is 8 or 9, goto ARM_FORC]        [else goto BIRTH_MO for next member]        &lt;39-46&gt; [goto IN_COLL]        &lt;empty&gt;</p>
CONTROL CARD	-	IN_COLL	<p>[Fill: Are you/Is name] currently enrolled in a college or university either -</p> <ol style="list-style-type: none"> <li>1. Full-time?</li> <li>2. Part-time?</li> </ol>	<p>&lt;1-3,D,R&gt; [If AGE is 16 - 65 or agerng is 8 or 9, goto ARM_FORC]        [goto BIRTH_MO for next member]        &lt;empty&gt;</p>
CONTROL CARD	-	ARM_FORC	<p>(Book) 3 ? [F1]</p> <p>[Fill: Are you/Is (name)] now in the Armed Forces?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>&lt;1,2,D,R&gt; [If this is the last person, goto CHECKS2]        [Else goto BIRTH_MO for the next person]        &lt;empty&gt;</p>



Section #	Part	Variable Name	Question Text	Skip Instructions
CONTROL CARD	-	H_ARMFORC	<p>ARMED FORCES -- A person is considered to be in the armed forces if they serve in any branch of the U.S. military. This includes the Army, Navy, Marine Corps, Air Force and Coast Guard, their Reserve components and the Air and Army National Guard.</p> <p>ARMED FORCES includes:</p> <ul style="list-style-type: none"> <li>U.S. Army</li> <li>U.S. Navy</li> <li>U.S. Marine Corps</li> <li>U.S. Air Force</li> <li>U.S. Coast Guard</li> <li>Reserve components for any of the above</li> <li>Air National Guard</li> <li>Army National Guard</li> </ul>	<Esc key> [goto ARM_FORC]
CONTROL CARD	-	CE_INTRO	<p>As we start, please understand that we ask the same questions of everybody we talk to. I realize some of these questions may not apply to your household.</p> <p>Most questions that I will be asking refer to a specific time period. During this interview, the time period, unless I state otherwise is for the</p> <p>Past [fill: month/three months], that is, from the 1st day of [Fill: REF_MONTH] to today.</p> <p>Most of my questions are about expenses your household had or bills you've received. You will find it helpful to have your checkbook register, credit card statements, and other records as you answer the questions.</p>	<1> [goto SECTION1]
Control Card	-	AGE62	**Check Item**	

<b>Section #</b>	<b>Part</b>	<b>Variable Name</b>	<b>Question Text</b>	<b>Skip Instructions</b>
INTROSEC		INTRO	<p>You are one of the approximately 100 people that have been recruited to participate in this research study. You will receive 100 dollars upon the completion of both interviews.</p> <p>Your participation is voluntary and you may stop the interview at any time. You may also refuse to answer any question. If we come to a question you don't want to answer, you can let me know and we can skip over it. Your participation in this study and the information you give will in no way affect your legal status. On average, the interview takes about 90 minutes.</p>	<1 > [goto INTRO1]
INTROSEC		INTRO1	<p>HAND R CONSENT FORM. This will review what I just talked about, and it will give you more information about the study. Let's go over this together.</p> <p>READ THE CONSENT FORM TO R. READ FROM YOUR OWN COPY.</p> <p>Do you have any questions? ANSWER ANY OF R'S QUESTIONS.</p> <p>PRESS [ENTER] TO CONTINUE</p>	<1 > [goto INTRO2]
INTROSEC		INTRO2	<p>IF R AGREES TO PARTICIPATE, HAND R PEN AND INSTRUCT R TO CHECK THE BOX ON THE CONSENT FORM. TAKE BACK THE PEN AND THE FORM. SIGN AND DATE THE FORM. GIVE R BOTTOM COPY.</p> <p>RETURN YOUR COPY OF THE CONSENT FORM TO YOUR INTERVIEWING MATERIALS FOR LATER SHIPMENT TO RTI. MAKE SURE YOU HAVE SIGNED AND DATED THE FORM.</p> <p>DID R CONSENT TO THE INTERVIEW BY CHECKING THE BOX OR DID R REFUSE THE INTERVIEW?</p> <ol style="list-style-type: none"> <li>1. R CONSENTED TO THE INTERVIEW</li> <li>2. R REFUSED THE INTERVIEW</li> </ol>	<p>&lt;1 &gt; [goto FNAME]</p> <p>&lt;2&gt; END INTERVIEW</p>
INTROSEC		INTRO3	<p>DID R CONSENT TO THE INTERVIEW BEING AUDIO-RECORDED?</p> <ol style="list-style-type: none"> <li>1. R CONSENTED TO THE INTERVIEW BEING AUDIO-RECORDED</li> <li>2. R DID NOT CONSENT TO THE INTERVIEW BEING AUDIO-RECORDED</li> </ol>	<1-2> [goto INTRO4]
INTROSEC		INTRO4	<p>DID R CONSENT TO THE INTERVIEW BEING OBSERVED?</p> <ol style="list-style-type: none"> <li>1. R CONSENTED TO THE INTERVIEW BEING OBSERVED</li> <li>2. R DID NOT CONSENT TO THE INTERVIEW BEING</li> </ol>	<1-3> [goto FNAME]

OBSERVED

3. NOT APPLICABLE. NO ONE IS OBSERVING THE INTERVIEW.