U.S. DEPARTMENT OF AGRICULTURE

NUTRITION ASSISTANCE AND FARMERS/FARMERS MARKETS STUDY

DIRECT MARKETING FARMER SURVEY

Please complete the **Direct Marketing Farmer** survey if you are <u>not a</u> <u>farmers market manager</u> and sell your farm products directly to consumers at outlets such U-pick operations, farm or road-side stands, farmers markets, community supported agriculture (CSA) or subscription farming.

Public reporting burden for this collection of information is estimated to average <u>25 minutes</u> per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

ABOUT YOU

This section asks about your contact information and the work you do.

Contact information for person completing this survey

Name:
Address:
Telephone: ()
Email:
1. Do you farm full- or part-time?
 Full-time Part-time Not applicable (provide administrative or non-farming related services)
2. How long have you been farming? years months
3. What kind of work do you do? Please check all that apply.
 All farm work Identifying outlets to sell produce
 Attending markets to sell produce Budgeting (for example, estimating costs and income)
 Bookkeeping
Fundraising
Applying for grants
 Managing volunteers and employees Community outreach
Organizing special events
Other responsibilities (please specify)

SECTION A. ABOUT THIS FARM

This section includes questions about the general characteristics of all the land that you farm on.

A1. In what year did you start farming?

A2. Which of the following describes the land that you farm on? CHECK ALL THAT APPLY.

	Owned, if owned, is it
	Sole proprietorship
	Legal proprietorship
	Family corporation, incorporated under state law
	Non-family corporation, incorporated under state
law	
	Limited Liability Corporation (LLC)
	Leased land for cultivation
	Other, (please specify)

A3. How would you describe your or the operating farmer's growing practices?

Conventional farming
Organic farming, not-certified
Organic farming, certified
Other (please specify)

A4. In the table below list the number of people, including yourself, that were employed or volunteered on your or the operating farmer's business, from October 2010 to September 2011.

	Number of people who worked or volunteered between October 2010 and September 2011			
	Full time Part-time			
	Year-Round	Seasonally	Year-round	Seasonally
Farm family/				
Household				
members				
Employees				
Volunteers				

SECTION B. OUTLETS FOR FARM PRODUCTS

This section asks questions about the outlets that you use to sell products from the land you own and/or the land you lease from someone else.

B1.At how many of each of the following outlets do you sell any farm products from your (or the operating farmer's) farming business?

Type of Outlet	Number of Outlets you sell at
Temporary roadside stand (table, tailgate, etc.)	
Permanent roadside stand/market	
Farmers Market	
Pick-your-own	
Direct on-farm, other	
Greenhouse/nursery	
Festival	
Community supported agriculture (CSA) or subscription	
Direct to retailers	
Direct to wholesale markets	
Other (please specify)	

B2.Do you have a credit/debit card processing machine?

 \Box Yes \rightarrow Is it used at all outlets where you sell your farm products?



No

Product	How often sold at any outlet between October 2010 and September 2011?		
	Always	Sometimes	Never
Fruits			
Vegetables			
Milk			
Cheese			
Other dairy products			
Fish or Seafood			
Meat or Poultry			
Breads or rolls			
Other baked goods			
Juice or cider			
Prepared foods			
Non-food items (plants, crafts, etc.)			

B3.For each of the following farm products, did you sell it always, sometimes, or never between October 2010 and September 2011?

- **B4.**Between October 2010 and September 2011, what was the total sale from farm products (food and non-food) from all outlets? Round the amount to the nearest whole number. Total sales: \$ _____
- **B5.**Between October 2010 and September 2011, how much of the farm revenue was generated by food sales?

Less than 25%
 Between 26 and 50%
 Between 51 and 74%
 Between 75% and 100%

SECTION C. SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

This section asks questions about the U.S. Department of Agriculture's (USDA) Supplemental Nutrition Assistance Program (SNAP), formerly called the Food Stamp Program. SNAP gives low-income families a monthly benefit amount (SNAP allotment) to buy food that can be prepared and eaten at home. SNAP benefits are loaded onto an electronic benefit transfer (EBT) card. The EBT card can be used like a regular debit or credit card at authorized retailers with EBT terminals.

C1. Did you know that farmers can be authorized to accept SNAP?

Yes
 No →GO TO SECTION D

C2. Have you visited the website of USDA's Food and Nutrition Service (FNS) or have you seen the handbook about SNAP in farmers markets (*SNAP at Farmers Markets: A How-To Handbook*)? <u>Please check all that apply.</u>

□Visited the website of USDA's Food and Nutrition Service
 □Have seen the handbook about SNAP in Farmers Markets
 □Haven't visited the website or seen the handbook

C3. Have you or the operating farmer ever been authorized to accept SNAP?



C4. Were you or the operating farmer authorized to accept SNAP anytime during the last 5 years (October 2006 to September 2011)?

□Yes → GO TO QUESTION C5□No → GO TO QUESTION C4a

C4a. What is the main reason you or the operating farmer stopped accepting SNAP?

_____ → GO TO QUESTION

C6

C5.Were you or the operating farmer authorized to accept SNAP anytime during the last 12 months (October 2010 to September 2011)?

Yes→ GO TO QUESTION C6 No→ GO TO QUESTION C5a

C5a. What is the main reason you or the operating farmer stopped accepting SNAP?

C6. Between October 2010 and September 2011, how did you or the operating farmer redeem SNAP benefits at the outlets where you sold food products?
SNAP benefits were not redeemed at any outlet → GO TO QUESTION C6a

SNAP benefits were always redeemed using <u>your</u> (or the operating farmer's) SNAP authorization

□ SNAP benefits were always redeemed using <u>outlet's</u> SNAP authorization

SNAP benefits were redeemed using either your (or the operating	
farmer's) or outlet's SNAP authorization	

C6a. What is the main reason y	ou or the operating farmer did not redeem SNAP
benefits in the last 12 months?	→ GO TO
QUESTION C13	

C7.Between October 2010 and September 2011, at how many outlets did you or the operating farmer accept SNAP benefits?

All → GO TO QUESTION C8
Most
A few
None

C7a. What is the main reason SNAP benefits were not accepted?

C8.Between October 2010 and September 2011, if you sold products at farmers markets, were you required to inform the outlet manager that you accept SNAP?

☐Yes, at all outlets ☐Yes, at some outlets

No →GO TO QUESTION C10

□Did not sell products at farmers markets → GO TO QUESTION C10

C9. How did you inform the outlet manager that you accept SNAP?

□Informally, through conversations with outlet manager

Official meetings

Submitted a memo

Other (please specify):

C10.How do customers learn about your participation in SNAP? <u>Please check all that apply.</u>

Printed materials (for example, direct mail, flyers or brochures)

 \Box Signs at the stall

Billboards or banners

Workshops, discussions, or presentations at schools or other community

events

Mass media (for example, newspapers, radio, or TV advertising)

Internet (for example, listservs, websites, blogs, social media such as Facebook or Twitter)

Other (please specify)

C11.Who is responsible for conducting and paying for the marketing/outreach activities selected in C10? <u>Please check all that apply.</u>

□Farmers market

Outlet manager

 \Box Individual farmers

□Local, state, or federal government agencies

□Foundations

Nonprofit organizations (please specify)

Other (please specify):

C12.Between October 2010 and September 2011, how did you redeem SNAP payments at all outlets? <u>Please check all that apply</u>.

EBT (customer swipes the EBT card at a machine to pay for their

purchase.)

EBT Offline Voucher

Tokens

Paper scrip

Receipts

Other (please specify)

C13.In your opinion, what are the benefits of accepting SNAP? <u>Please check all that apply</u>.

- □A. Increases sales
- B. Increases different types of customers
- C. Responds to customer interest
- D. Responds to interest from other organizations
- E. Promotes access to healthy food in the community
- F. Improves the market's public image
- G. Other (please specify)

IF YOU CHECKED ONLY ONE ANSWER IN QUESTION C13 \rightarrow GO TO QUESTION C14.

C13a. Of the answers you choose in C13, which one was the strongest motivator for you to participate in SNAP? <u>Please write in the letter from C13</u>: _____

- C14.What do you think makes it hard for you to accept SNAP? Please check all that apply.
 - A. Too many requirements to become SNAP authorized
 - B. SNAP application process is difficult
 - C. Having to provide personal information on SNAP application
 - D. Costs associated with start-up
 - E. Ongoing transaction fee costs associated with EBT
 - F. Staffing needs for at-market operation of EBT
 - G. Additional bookkeeping and "back office" costs
 - H. Not enough SNAP customers
 - I. Hard to get information about these programs from the appropriate

agencies

___J. Other (please specify)_____

IF YOU CHECKED ONLY ONE ANSWER IN QUESTION C14 \rightarrow GO TO SECTION D.

C14a. Of the answers you choose in C14, which makes it the hardest for you to participate in SNAP? <u>Please write in the letter from C14</u>: _____

C15. Is there anything else you can tell us about how SNAP works for you?

SECTION D. NUTRITION ASSISTANCE PROGRAMS OTHER THAN SNAP

This section asks about nutrition assistance programs other than SNAP. The USDA also offers the Special Supplemental Nutrition Program for Women, Infants and Children (**WIC**); the Women, Infants, and Children Farmers Market Nutrition Program (**WICFMNP**); or the Senior Farmers Market Nutrition Program (**SFMNP**).

D1. Did you know that farmers can participate in other nutrition assistance programs besides SNAP?

D2. Between October 2010 and September 2011, which of the following USDA nutrition assistance programs did you or the operating farmer participate in? <u>Please check all that apply</u>.

Special Supplemental Nutrition Program for Women, Infants and Children (**WIC**)

□ Women, Infants, and Children Farmers Market Nutrition Program (**WICFMNP**)

Senior Farmers Market Nutrition Program (**SFMNP**)

□ Did not participate in any USDA nutrition assistance programs

SECTION E. COMMUNITY OUTREACH AND SOURCES OF SUPPORT

This next section is about the community outreach that is done by you as part of your (or the operating farmer's) farming business. It also asks about sources of support for your farm business.

E1. Do you or the operating farmer conduct any community outreach activities? □Yes



E2. Between October 2010 and September 2011, what community activities did you or the operating farmer conduct? <u>Please check all that apply</u>.

Nutrition education at schools or other community locations
 Food donations (for example, homeless shelters, gleaning programs)
 Community gardening and agricultural education
 Healthy cooking demonstrations at the outlets
 Other (please specify)

- **E3.** Between October 2010 and September 2011, how did you or the operating farmer get information out to the community?
 - □ Printed materials (for example, flyers or brochures)

□ Billboards

Workshops, demonstrations, discussions, or presentations at schools or other community <u>locations other than the farmers market</u>

 \Box Workshops, demonstrations, discussions, or presentation <u>at the farmers</u> <u>market</u>

- ☐ Mass media (for example, newspapers, radio, or T.V advertisements)
- □ Web (for example, listservs, e-mail newsletters, Web sites, blogs, social media such as Facebook or Twitter)

Other (please specify)

E4. Many community, state, and national organizations provide different kinds of support for farmers. The questions in the table below ask for the name and information about five organizations that have provided you with the most meaningful support between October 2010 and September 2011. An example has been provided for you.

		EXAMPLE		
What is the name of the organization that provided meaningful support?	What type of organization is it? Please check only one.	Did the organization provide financial support?	What kinds of non- financial support were provided?	How did the organization provide non- financial support? Check all that apply.
1 . Hamden County Harvest Coalition	[_] City government [_] State government [_] Federal government [X] Local foundation [_] Regional foundation [_] National foundation [_] Regional network or organization [_] State organization [_] State organization [_] National trade association [_] Other (please specify)	 [_] Yes, the organization provided financial support [X]No, the organization did not provide financial support 	[_]Information [_]Logistical/ Technical Assistance [_] Other (please specify) [X] The organization did not provide non- financial support	 [_] E-mail/listservs [_] Telephone [_] In-person [_] Training [_]]Publications [_]]Publications [_]] Web site [_] Online forums [_] Other (please specify) [X]The organization did not provide nonfinancial support

Section F

	What is the name of the organization that provided meaningful support?	What type of organization is it? Please check only one.	Did the organization provide financial support?	What kind of non- financial support was provided?	How did the organization provide non- financial support? Check all that apply.
1		[_] City government [_] State government [_] Federal government [_] Local foundation	[_] Yes, the organization provided financial support [_]No, the organization did not provide	[_]Information [_] Logistical/ Technical Assistance [_] Other (please specify)	[_] E-mail/listservs [_] Telephone [_] In-person [_] Training [_]Publications [_] Web site [_] Online forums [_] Other (please

	What is the name of the organization that provided meaningful support?	What type of organization is it? Please check only one.	Did the organization provide financial support?	What kind of non- financial support was provided?	How did the organization provide non- financial support? Check all that apply.
		[_] Regional foundation [_] National foundation [_] Regional trade association [_] National trade association [_] Other (please specify) 	financial support	[_] The organization did not provide non- financial support	specify) [_]The organization did not provide non-financial support
2		[_] City government [_] State government [_] Federal government [_] Local foundation [_] Regional foundation [_] National foundation [_] Regional trade association [_] National trade association [_] Other (please specify) 	 [_] Yes, the organization provided financial support [_]No, the organization did not provide financial support 	[_]Information [_] Logistical/ Technical Assistance [_] Other (please specify) 	[_] E-mail/listservs [_] Telephone [_] In-person [_] Training [_]Publications [_] Web site [_] Online forums [_] Other (please specify)
3		[_] City government [_] State government [_] Federal government [_] Local foundation [_] Regional foundation	[_] Yes, the organization provided financial support [_]No, the organization did not provide financial support	[_]Information [_] Logistical/ Technical Assistance [_] Other (please specify)	[_] E-mail/listservs [_] Telephone [_] In-person [_] Training [_]Publications [_] Web site [_] Online forums [_] Other (please specify)

	What is the name of the organization that provided meaningful support?	What type of organization is it? Please check only one.	Did the organization provide financial support?	What kind of non- financial support was provided?	How did the organization provide non- financial support? Check all that apply.
		[_] National foundation [_] Regional trade association [_] National trade association [_] Other (please specify) 		[_] The organization did not provide non- financial support	- - [_] The organization did not provide non- financial support
4		[_] City government [_] State government [_] Federal government [_] Local foundation [_] Regional foundation [_] National foundation [_] Regional trade association [_] National trade association [_] Other (please specify) 	[_] Yes, the organization provided financial support [_]No, the organization did not provide financial support	[_]Information [_] Logistical/ Technical Assistance [_] Other (please specify) 	[_] E-mail/listservs [_] Telephone [_] In-person [_]Publications [_] Web site [_] Online forums [_] Other (please specify)
5		[_] City government [_] State government [_] Federal government [_] Local foundation [_] Regional foundation [_] National foundation	 [_] Yes, the organization provided financial support [_]No, the organization did not provide financial support 	[_]Information [_] Logistical/ Technical Assistance [_] Other (please specify) 	[_] E-mail/listservs [_] Telephone [_] In-person [_] Training [_]Publications [_] Web site [_] Online forums [_] Other (please specify)

What is the name of the organization that provided meaningful support?	What type of organization is it? Please check only one.	Did the organization provide financial support?	What kind of non- financial support was provided?	How did the organization provide non- financial support? Check all that apply.
	[_] Regional trade association [_] National trade association [_] Other (please specify) 		did not provide non- financial support	- [_] The organization did not provide non- financial support

SECTION F. OUTLET WHERE YOU REDEEM THE MOST SNAP BENEFITS

Farmers can sell their produce at many outlets. Please select **one** outlet where you or the operating farmer **redeem the most SNAP benefits** and think about this outlet only when answering the questions in this section.

If you or the operating farmer did not redeem SNAP benefits at any outlet between October 2010 and September 2011 → GO TO END OF SURVEY.

NAME OF OUTLET SELECTED TO ANSWER QUESTIONS IN THIS SECTION:

ADDRESS:

- **F1.** Since what year have you or has the operating farmer been selling farm products at this outlet?
- F2. What type of outlet is this? Please check only one.
 - Temporary roadside stand (table, tailgate, etc.)
 - Permanent roadside stand/market
 - Farmers markets; please specify how many _____
 - Pick-your-own
 - \Box Direct on-farm, other
 - Greenhouse/nursery
 - Festival
 - Community supported agriculture (CSA) or subscription
 - Direct to retailers
 - Direct to wholesale markets
 - Other (please specify)

F3. In the table below, please indicate for each month, the days and average number of hours the outlet was open in each month from October 2010 to September 2011. Draw a line through the days the outlet did not operate.

The first two rows show an example of how to fill in this table. In this example, a line was marked for all days in April, when the outlet did not operate. In May, the outlet was open on Fridays from 9 AM to 12 PM (3 hours), and on Saturday and Sunday from 8AM to 12 PM (4 hours on each day).

	AVERAGE NUMBER OF HOURS THE MARKET WAS OPEN OCTOBER 2010 TO SEPTEMBER 2011						
	MONDAY S	TUESDAY S	WEDNEDAY S	THURSDAY S	FRIDAY S	SATURDAY S	SUNDAY S
April	1						
Мау	I.				3	4	4
October 2010							
November 2010							
December 2010							
January 2011							
February 2011							
March 2011							
April 2011							
May 2011							
June 2011							
July 2011							
August 2011							
September 2011							

F4. Between October 2010 and September 2011, did you sell each of the following products always, sometimes, or never at this outlet?

Product	How often sold at this outlet between October 2010 and September 2011?			
	Always	Sometim es	Never	
Fruits				
Vegetables				
Milk				
Cheese				

Other dairy products		
Fish or Seafood		
Meat or Poultry		
Breads or rolls		
Other baked goods		
Prepared foods		
Juice or cider		
Non-food items (plants, crafts, etc.)		

- **F5.** Please rank the following reasons why you choose to sell products at this outlet. Write in "1" in front of the most important reason, "2" for the second most important reason, and so on.
 - ___ Convenience
 - ____ Receive retail value for products
 - Customer interaction
 - To advertise your products
 - _____ To sell surplus products
 - _____ To reach SNAP customers
 - Other (please specify):
- **F6.** How is this outlet authorized to accept SNAP?
 - □ Individual vendors/farmers are authorized
 - ☐ The market as a whole is authorized
 - The market is authorized and some individuals are also authorized
- **F7.** Between October 2010 and September 2011, did you use your (or the operating farmer's) SNAP authorization or the outlet's authorization for SNAP transactions at this outlet?
 - □Used your authorization
 - Used outlet's authorization
 - Used both
- **F8.** Between October 2010 and September 2011, how many food vendors accepted SNAP at this outlet?

☐All →GO TO N	EXT PAGE
Most	
A few	
None	
Don't know	→GO TO NEXT PAGE

F8a. What is the main reason SNAP benefits were not accepted by food vendors at this outlet?

Some outlets offer incentives for their USDA nutrition assistance program customers to shop there. These incentives are in the form of vouchers to buy food items from farmers market vendors. The vouchers are paid for by local government agencies, foundations, or nonprofit organizations. Please tell us about the incentives that are offered by you or the outlet where you or the operating farmer redeem the most SNAP benefits.

- **F9.** Between October 2010 and September 2011, did you, or the outlet at which you or the operating farmer redeemed the most SNAP benefits, offer any financial incentives or nonfinancial incentives to USDA nutrition assistance program customers? <u>Please check all that apply.</u>
 - \square Financial incentives were offered by you or the operating farmer
 - □ Non-financial incentives were offered by you or the operating farmer
 - \Box Financial incentives were offered by the outlet
 - □ Non-financial incentives were offered by the outlet
 - □ Incentives were not offered to USDA nutrition assistance program customers →GO TO SECTION G

F9a. Please describe or provide the name of the incentives that you or the outlet offered to USDA nutrition assistance program customers at all outlets.

- **F10.** Do the incentives have a specific start and end date, or are they available on an ongoing basis throughout the season?
 - $\hfill\square$ Available for a limited time only (specific start and end date)
 - Available on an ongoing basis, provided funding is available
 - \Box Varies by outlet
- **F11.** Organizations such as foundations or government entities can provide funding, equipment, or other types of support for USDA nutrition assistance incentive programs. How many organizations provided **any kind of support** for the incentives that **you, the operating farmer, or the outlet** offered between October 2010 and September 2011?

of organizations _____ → IF "ZERO" GO TO QUESTION F12

F12. Please list the top three organizations that helped to support the incentives **you** offered to USDA nutrition assistance program customers between October 2010 and September 2011.

Name:

Type:

Foundation

Government Agency

Other (please

specify)

Name:

Name:

Name:

Name:

Type: Foundation Government Agency Other (please specify)

- **F13.** What things do you measure to know if the incentives **you** offer are successful? <u>Please check all that apply.</u>
 - □ Dollar amount of EBT/FMNP redemptions
 - □ Number of EBT/FMNP transactions
 - □ Number of repeat EBT/FMNP shoppers
 - □ Number of first time EBT/FMNP shoppers
 - □ Ratio of tokens/scrip disseminated vs. tokens/scrip spent
 - □ EBT/SNAP customer testimonials or interviews
 - □ None
 - Other (please specify)
- **F14.** Between October 2010 and September 2011, did you pay a flat fee or a percentage of total sales to sell products at the outlet where you or the operating farmer redeemed the most SNAP benefits?

Flat fee (specify fee)______
 Is the flat fee: <u>Please check only one.</u>
 Per season
 Per month
 Per week
 Per market day
 Percentage of sales (specify percentage) _____%
 Other (please specify) _____

Farmers do not pay to participate in this outlet

F15. Between October 2010 and September 2011, what were your (or the operating farmer's) total sales at this outlet? Please round the amount to the nearest whole number. Total sales: \$ _____

- **F16.** Between October 2010 and September 2011, what portion of your total sales was from EBT transactions at this outlet?
 - □ Less than 24%
 - □ Between 25 and 50%
 - \square Between 51% and 74%
 - \square Between 75% and 100%
- **F17.** Are you required to report your sales at this outlet to the outlet manager?
 - 🗆 Yes
 - No
 - Not applicable
- **F18.** How satisfied were you with your total sales at this outlet between October 2010 and September 2011?
 - Very satisfied
 - Mostly satisfied
 - Somewhat satisfied
 - Not satisfied
- **F19.** Which of the following methods did you or the operating farmer use to promote products at this outlet between October 2010 and September 2011? <u>Please check all that apply.</u>
 - Signs indicating the price of products
 - Signs indicating credit and debit cards are accepted
 - Signs indicating SNAP/EBT is accepted
 - Signs for product information
 - Samples/taste tasting
 - Giving recipes (orally or on cards)
 - Bulk discounts
 - Other (please specify)
- **F20.** How do you normally determine your prices at this outlet? <u>Please check all</u> <u>that apply.</u>
 - Grocery store comparison
 - ☐ Matching other vendor prices
 - Pricing below other vendors
 - Cost of production plus mark-up
 - Other (please specify)

F21. How did you measure your success at this outlet? <u>Please check all that apply.</u>

Gross sales

🗌 Net sales

SNAP sales

Selling enough to cover expenses

Selling most of the products by the end of the day

Having return customers

Other (please specify)

SECTION G. DESCRIPTION OF THE AREA WHERE THE FARMERS MARKET IS LOCATED

G1. Is the outlet where you or the operating farmer redeem the most SNAP benefits a farmers market?

□Yes □No

GO TO END OF SURVEY

- **G2.** What kind of buildings or property are within a half mile radius of this farmers market? <u>Please check all that apply</u>.
 - Residential buildings or yards
 Commercial or industrial buildings
 Schools
 Parking lots or garages
 Undeveloped land or vacant lots
 Designated green space or parks
 Other (please specify)
 Don't know
- **G3.** What other kinds of stores sell food within half mile radius of this farmers market? <u>Please check all that apply.</u>

Fast-food restaurants	
Cafés or coffee shops	
Non fast-food restaurants	
Large grocery stores	
Small corner stores or convenience stores	
Liquor stores, bars, taverns, or nightclubs	
Other (please specify)	
□ None	
Don't know	

G4. What types of public transportation are available near this farmers market? <u>Please check all that apply.</u>

Bus

□Light rail or subway

Senior transit

□None

Don't know

- **G5.** What kind of parking is there within a half mile radius of this farmers market? <u>Please check all that apply.</u>
 - On-street, parallel or angled parking
 Small lot or garage (fewer than 30 spaces)
 Medium to large lot or garage
 None
 Don't know
- **G6.** Which of the following amenities are present at farmers market? <u>Please</u> <u>check all that apply</u>.
 - Areas shaded by trees or canopies
 - Trash cans
 - Benches or other places to sit
 - Bicycle racks
 - □Working drinking fountains
 - □Working public telephones
 - □Public restrooms
 - \Box None of the above
 - Don't know

Thank you for taking the time to complete this survey. The information you've provided is valuable to us. Please return the completed survey in the enclosed postage paid envelope.