**Attachment B: Interviewing Protocols**

**Visit 1 Protocol**

## MATERIALS NEEDED FOR VISIT 1

* + INTERVIEWER PROTOCOL BOOKLET (THIS BOOKLET)
	+ CONSENT FORM (TWO COPIES)
	+ RECORDS STORAGE BOX (PENS/PENCILS, RECEIPT WALLETS, FILE FOLDERS)
	+ DIARIES (CHECK NUMBER IN HOUSEHOLD ON FACESHEET)

## INFORMED CONSENT #1

PROVIDE RESPONDENT WITH A COPY OF THE INFORMED CONSENT FORM #1. ASK THE RESPONDENT TO READ THE FORM (OR READ IT TO HIM/HER, DEPENDING ON RESPONDENT PREFERENCE), ANSWER ANY QUESTIONS, AND HAVE THE RESPONDENT SIGN THE FORM. LEAVE A SEPARATE COPY OF THE FORM WITH THE RESPONDENT.

* SIGNED CONSENT FORM #1 COLLECTED
* COPY OF CONSENT FORM #1 GIVEN TO RESPONDENT
* RECORD TIME: \_\_\_\_\_\_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_\_\_\_AM/PM

## INSTRUCTIONS ON RECORD KEEPING

**REVIEW MEMBERS OF CONSUMER UNIT**

We would like you to collect spending records for the people in your household who are age 14 or older. According to my records, there are [NUMBER – LOOK AT SCREENER INFORMATION] people in your household. How many are age 14 and older? I will write their names here as a reminder that we would like to get spending records for these people.

* RECORD NUMBER OF RECORD KEEPERS IN HOUSEHOLD: \_\_\_\_\_\_\_\_\_\_\_
* FILL IN NAMES ON FILE FOLDERS, ON RECORD BOX AND IN DIARIES WITH RESPONDENT’S HELP

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| What is his/her relationship to you?  | What is his/her relationship to you?  | What is his/her relationship to you?  | What is his/her relationship to you?  | What is his/her relationship to you?  |
| Person 1  | Person 2 | Person 3 | Person 4 | Person 5 |
| 1. Spouse2. Girl/Boyfriend3. Parent4. In-law 5. Aunt/Uncle6. Son/Daughter7. Foster Child 8. Niece/Neph.9. Grandchild10. Cousin11. Boarder12. Roommate13. Other non-related person14. Sibling15. Self16. Grandparent | 1. Spouse2. Girl/Boyfriend3. Parent4. In-law 5. Aunt/Uncle6. Son/Daughter7. Foster Child 8. Niece/Neph.9. Grandchild10. Cousin11. Boarder12. Roommate13. Other non-related person14. Sibling15. Self16. Grandparent | 1. Spouse2. Girl/Boyfriend3. Parent4. In-law 5. Aunt/Uncle6. Son/Daughter7. Foster Child 8. Niece/Neph.9. Grandchild10. Cousin11. Boarder12. Roommate13. Other non-related person14. Sibling15. Self16. Grandparent | 1. Spouse2. Girl/Boyfriend3. Parent4. In-law 5. Aunt/Uncle6. Son/Daughter7. Foster Child 8. Niece/Neph.9. Grandchild10. Cousin11. Boarder12. Roommate13. Other non-related person14. Sibling15. Self16. Grandparent | 1. Spouse2. Girl/Boyfriend3. Parent4. In-law 5. Aunt/Uncle6. Son/Daughter7. Foster Child 8. Niece/Neph.9. Grandchild10. Cousin11. Boarder12. Roommate13. Other non-related person14. Sibling15. Self16. Grandparent |

**OVERVIEW OF RECORDS COLLECTION TASK**

There are several different kinds of records I want you to collect for the next two weeks. First, I would like you to keep receipts or other records for all purchases you and anyone else in your household makes. Here are some examples of places where you may make a purchase and should collect the record. GIVE RESPONDENT THE SHOWCARD.

* Grocery stores
* Department stores
* Restaurants
* Gas stations
* Drug stores
* Online purchases

As you can see, we would like you to keep the receipt for any purchase you make over the next two weeks.

I am also interested in other financial records that would be helpful in determining your household’s spending over the two-week period. So in addition to receipts for specific purchases, please collect records such as:

* Bills—utility bills, phone bills, bills for any services you use
* Credit card statements
* Bank statements
* Automatic payments
* Online statements
* Online order confirmations

Some of your records may be online records. Please print those out and store them along with the paper receipts and records you receive. You may notice that the same purchase might show up on more than one record. For example, if you go to a store and pay for something with your credit card, you will get a store receipt. That same purchase will also show up on your credit card statement. Don’t worry about giving us duplicate information. To make it easier for you, feel free to just include both records.

### RECORDS STORAGE BOX AND RECEIPT WALLETS

I am leaving this Records Storage Box with you to make it easier for you to keep track of your records. Inside the box you will see there is a separate file folder and diary for each person on your list.

We know it can be difficult to remember to put your records in the box if you do not do it right away. I encourage you and other household members to keep your receipt wallet with you as you go about your day.

Put in your receipts immediately after a purchase and then put the receipts in the box at the end of the day. Also include printed confirmations from any online purchases or payments.

I have put a separate file in the box for each family member to put their records in.

WRITE NAME ON BOX

### WHEN TO USE THE DIARY AND HOW TO USE IT

Now let me show you the diary. Sometimes you will not have a receipt for a purchase. For example, you do not get a receipt when you buy something from a vending machine. You can also use the diary if you lose a receipt. We prefer that you print a paper copy of any online purchase confirmations or automatic payments, but if you are unable to print them please enter those in the diary as well.

* TAKE OUT THE DIARIES, POINT OUT THE FOLLOWING:
* DIARY KEEPER NAME ON EACH DIARY
* REVIEW INSTRUCTION PAGE
* USE EXAMPLE DIARY PAGE TO POINT OUT EACH FIELD TO BE COMPLETED

If there is a record or receipt in which you do not want to share the details with us, please write that purchase in the diary.

**DATES OF DATA COLLECTION**

I would like the household to collect records for the entire household for two weeks. You will begin collecting receipts today and continue through the end of the day on [DATE]. I will come back on [DATE] to make copies of the records and collect the diary, and to ask you a few questions.

**INSTRUCTIONS FOR OTHER HOUSEHOLD MEMBERS**

Remember that we want spending records for everyone in the household who is 14 or older. It is up to you to decide whether you will collect records from everyone to put in the box and make diary entries for them or whether you will ask each person in your household do this themselves. But please note that only you, as the household respondent, would be paid.

**ANSWER RESPONDENT QUESTIONS**

* RECORD TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

**CONFIRM APPOINTMENT FOR SECOND VISIT**

I have in my appointment book that my second visit with you is scheduled for [DATE/TIME]. I will call to confirm this appointment with you a few days in advance.

* MAKE SURE SECOND APPOINTMENT IS MARKED IN THE RESPONDENT’S DIARY
* RECORD DATE AND TIME

 **RETURN APPOINTMENT**

 DAY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 DATE \_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_/2012

 TIME \_\_\_\_\_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_\_\_\_ AM/PM

**CONTACT INFORMATION FOR QUESTIONS**

If you have any questions over the next two weeks, please feel free to call. My number is here in the diary and also on the Records Storage Box.

## WRAP-UP

**ANSWER RESPONDENT QUESTIONS.** I would be happy to answer any questions that you have.

**REMIND RESPONDENT OF FOLLOW-UP APPOINTMENT.** Thank you for your help with this study.

* RECORD END OF INTERVIEW #1 TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

**Between Visit Checkup Protocol**

**FOLLOW-UP CALL TO RESPONDENT**

**CALL RESPONDENT 3 -4 DAYS AFTER FIRST VISIT**

* RECORD TIME OF CALL \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM
* RECORD DATE OF CALL \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/ 2012
* HAS RESPONDENT BEGUN THE RECORD-KEEPING TASK?
* DOES RESPONDENT HAVE ANY QUESTIONS?
* INTERVIEWER WILL CALL BACK NEXT WEEK WITH A REMINDER ABOUT THE SECOND APPOINTMENT.

REMIND RESPONDENTS TO ONLY USE THE DIARIES IF THEY DO NOT HAVE -RECORDS OF THEIR PURCHASES.

ASK THEM TO CHECK ONLINE RECORDS AND EITHER PRINT OR NOTE IN THE DIARY. THIS INCLUDES ANY AUTOMATIC PAYMENTS THAT WENT THROUGH DURING THE TWO WEEKS.

**REMINDER CALL**

* RECORD TIME OF CALL \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM
* RECORD DATE OF CALL \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/ 2012
* NEXT APPOINTMENT IS…

 DAY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 DATE \_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_/2012

 TIME \_\_\_\_\_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_\_\_\_ AM/PM

* ASK RESPONDENT TO PLEASE HAVE ALL HOUSEHOLD SPENDING RECORDS READY FOR THE VISIT.
	+ COLLECT RECEIPTS AND OTHER RECORDS AND PUT IN THE BOX.
	+ COMPLETE THE DIARY FOR PURCHASES WITH NO RECEIPT.
	+ PRINT OUT ANY ONLINE RECORDS.

**Visit 2 Protocol**

## MATERIALS NEEDED FOR VISIT 2

* INTERVIEWER PROTOCOL
* CONSENT FORM #2 (TWO COPIES)
* PAYMENT RECEIPT
* $40 CASH IN ENVELOPE
* LAPTOP AND SCANNING EQUIPMENT
* AUDIO-RECORDER

## MATERIALS TO TAKE AWAY FROM VISIT

* + - SCANNED OR ELECTRONIC RECEIPTS AND STATEMENTS
		- DIARIES
		- SIGNED CONSENT FORM
		- SIGNED PAYMENT RECEIPT

## INFORMED CONSENT

### PROVIDE RESPONDENT WITH A COPY OF THE INFORMED CONSENT FORM #2. ASK THE RESPONDENT TO READ THE FORM (OR READ IT TO HIM/HER, DEPENDING ON RESPONDENT PREFERENCE), ANSWER ANY QUESTIONS, AND HAVE THE RESPONDENT SIGN THE FORM. LEAVE A SEPARATE COPY OF THE FORM WITH THE RESPONDENT.

* SIGNED CONSENT FORM #2 COLLECTED
* COPY OF CONSENT FORM GIVEN TO RESPONDENT
* RECORD TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

## REVIEW OF RECORDS

Let’s take a look at the records and receipts that you gathered for today’s visit.

1. LOOK AT CONTENTS OF RECORDS STORAGE BOX, LOOK FOR EACH HOUSEHOLD MEMBER’S DIARY. ARE ALL DIARIES ACCOUNTED FOR? IF ANY DIARIES ARE MISSING, ASK 🡪 I see that NAME’S diary is missing. Do you know where that is?
* ALL HOUSEHOLD MEMBERS’ DIARIES ARE COLLECTED
1. IS EACH HOUSEHOLD MEMBER’S RECORDS FILE IN THE BOX? IF ANY FILES ARE MISSING, ASK 🡪 I see that NAME’s file folder is missing. Do you know where that is?
* ALL HOUSEHOLD MEMBERS’ RECORDS FILES COLLECTED

I will now make copies of the records and receipts you placed in the box. Before I get started, do you have any records or receipts online such as for automatic payments or confirmations of online orders that we need to collect? IF YES🡪 You could print those online records out for me while I make copies of the records in the box.

## SCANNING PAPER DOCUMENTS

* SCAN DOCUMENTS

## USE THE SHOW CARD TO REMIND RESPONDENT ABOUT THE THINGS WE WANT TO COLLECT.

## RETRIEVING ELECTRONIC RECORDS

IF RESPONDENT CANNOT PRINT THE ONLINE RECORDS, HELP RESPONDENT UPLOAD ONLINE FILES TO SECURE PROJECT FTP SITE. IF THE RESPONDENT DOES NOT WISH TO UPLOAD THE FILES, HAVE RESPONDENT RECORD THE INFORMATION FROM THE ELECTRONIC RECORDS IN THE DIARY.

* RECORD TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

**RESPONDENT DEBRIEFING**

Now I would like to ask you a few questions about your experiences keeping records and receipts for this study. With your permission, I would like to audio-record our discussion. [IF RESPONDENT AGREES] 🡪 When I turn on the recorder I will ask your consent to record the interview. Please say ‘yes’ to verify I have your consent.

AUDIO-RECORD THE RESPONDENT DEBRIEFING. AT THE BEGINNING OF THE RECORDING, ASK THE RESPONDENT TO CONFIRM ON TAPE THAT HE/SHE HAS CONSENTED TO THE RECORDING 🡪 I would like to confirm that I have your permission to record this interview. RESPONDENT SHOULD SAY “YES” BEFORE YOU PROCEED TO THE DEBRIEFING QUESTIONS.

* RECORD TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

RESPONDENT DEBRIEFING QUESTIONNAIRE

***Burden of Keeping Records***

1. How easy or difficult was it for you to collect records for all your purchases during the two-week period?
	* Very easy
	* Somewhat easy
	* Neither easy nor difficult
	* Somewhat difficult
	* Very difficult
2. How much time did you spend altogether over the past two weeks collecting and organizing records for this study?
	* \_\_\_\_\_\_\_ MINUTES
	* \_\_\_\_\_\_\_ HOURS
	* RESPONDENT DID NOT SPEND ANY TIME COLLECTING RECORDS OR RECEIPTS
3. [IF R USED THE DIARY] How much time did you spend altogether over the past two weeks recording items in the diary?
	* \_\_\_\_\_\_\_ MINUTES
	* \_\_\_\_\_\_\_ HOURS
	* RESPONDENT DID NOT USE DIARY

***Completeness of Record-keeping***

Now I want to ask you about all the purchases you made during the last two-weeks. Think about all the purchases you made during the study period for which you have a record.

1. Of those records you obtained, do you think you were able to save…?
	* Just about all 🡪 GO TO QUESTION 6
	* Most
	* Some
	* A few
	* Or just about none
2. [IF NOT “Just about all” RECORDS SAVED] Why were you not able to save all the records?

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1. Were there some types of purchases that you couldn’t save records for?
	* YES
	* NO 🡪 GO TO QUESTION 7

**QUESTION 6A.** What kind of purchases were you not able to save records for?

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1. Were there any purchases for which you could have collected a record but did not?
	* YES
	* NO 🡪 GO TO SKIP BEFORE QUESTION 8

**QUESTION 7A.** What kind of purchases were those?

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**QUESTION 7B.**  Why did you not collect a record?

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**SKIP:** IF RESPONDENT REPORTS ANY PURCHASES WITH NO RECORD, THAT IS, IF QUESTION 4 IS NOT “Just about all” or QUESTION 6=YES or QUESTION 7=YES, THEN ASK QUESTION 8. OTHERWISE, GO TO QUESTION 10.

1. 🡪 Did you record all of the purchases that you did not have a record for in the diary?
	* YES 🡪 GO TO QUESTION 10
	* NO
2. Why were you not able to write all the purchases that did not have a record in the diary?

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1. Did you receive any bank statements or credit card statements during the last two weeks? These can be paper or online.
	* YES
	* NO
2. Did you put those statements…?
	* In the records storage box? 🡪 GO TO QUESTION 12
	* In your receipt wallet? 🡪 GO TO QUESTION 12
	* Somewhere else (please specify) 🡪 GO TO QUESTION 12

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* + DID NOT SAVE STATEMENTS

**QUESTION 11A.** [IF NOT SAVED] Why not?

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***The Respondent’s Usual Payment and Record-keeping Practices***

1. Now I want to learn about forms of payment you use when you make a purchase. Think about all the purchases you made *in the last two months*, whether in-person at a store, online, by telephone, or by mail order. Did you pay for anything with …? [CHECK ALL THAT APPLY]
	* Cash
	* Credit card
	* Debit card
	* Electronic payment service, such as PayPal or BillPay
	* Automatic withdrawals or payments
	* Another form of payment (please specify). WRITE IN BOX

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1. I would like to find out what you usually do with receipts, bills, bank or credit card statements, and other financial documents that you receive. When you are not participating in our study, what do you usually do with…?
2. ***Paper*** bills, receipts, and bank or credit card statements that you receive? [CHECK ALL THAT APPLY]
	* Save all or almost all of them
	* Save them for purchases over a certain amount
	* Save them for items you might want to return
	* Do not tend to save them
	* Something else (please specify)

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1. Where do you save these paper records? Do you put these documents…? [CHECK ALL THAT APPLY]
	* In your wallet, purse, or briefcase
	* In a box or bag
	* In a designated spot in your home or office
	* In a file cabinet
	* Somewhere else (please specify)

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* + RESPONDENT DOES NOT STORE RECORDS AT ALL
	+ R STORES RECORDS, BUT NOT IN A SYSTEMATIC WAY
1. What do you usually do with ***electronic or e-mail bills***, receipts and bank or credit card statements that you receive? [CHECK ALL THAT APPLY]
	* Save all or almost all of them
	* Save them for purchases over a certain amount
	* Save them for items you might want to return
	* Leave/save them in online account to refer back to
	* Do not tend to save them
	* Something else (please specify) WRITE IN BOX BELOW

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* + RESPONDENT DOES NOT RECEIVE ANY ELECTRONIC OR E-MAIL BILLS/RECEIPTS
1. Where do you save these electronic records? [CHECK ALL THAT APPLY]
	* Print them out and store a paper copy
	* Save an electronic file on your computer
	* Leave them in the website or e-mail account to refer back to
	* Something else (please specify)

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* + RESPONDENT DOES NOT STORE RECORDS AT ALL
	+ R STORES RECORDS, BUT NOT IN A SYSTEMATIC WAY
1. Do you keep a check register or other record of paper or electronic checks that you write?
	* YES
	* NO
	* RESPONDENT DOES NOT WRITE CHECKS

***The Respondent’s Use of the Records Storage Box and Diary***

1. When you were keeping records for this study, did you use the records storage box that was provided for you?
	* YES 🡪 GO TO QUESTION 18
	* NO

**QUESTION 17A.** [IF R DID NOT USE BOX] Why not?

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1. Did you use the diary?
	* YES 🡪 GO TO QUESTION 19
	* NO

**QUESTION 18A.** [IF R DID NOT USE THE DIARY] Why not?

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1. Did you use the receipt wallet that was provided for you?
	* YES 🡪 GO TO QUESTION 20
	* NO

**QUESTION 19A.** [IF R DID NOT USE THE WALLET] Why not?

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1. How could we make it easier for you to keep records for this study?

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**SKIP:** ASK THESE NEXT SET OF QUESTIONS IF THERE ARE OTHER HOUSEHOLD MEMBERS WHO ARE ELIGIBLE TO PARTICIPATE IN RECORD-KEEPING, THAT IS, THOSE AGES 14 AND OLDER. IF NOT, GO TO QUESTION 26.

***Other Household Members***

1. Did you ask other members of your household to provide records for the study?
	* YES 🡪 GO TO QUESTION 22
	* NO
	* NO OTHER HOUSEHOLD MEMBERS IN HOUSEHOLD

**QUESTION 21A.** [IF NO] Why not?

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1. Overall, how comfortable would you say other household members felt about sharing their records for this study?
	* Very comfortable
	* Somewhat comfortable
	* Somewhat uncomfortable
	* Very uncomfortable
2. Over the two weeks in which you collected records, how much effort did ***you*** put into getting other household members to collect their records?
	* A great deal of effort
	* Some effort
	* A little effort
	* No effort at all
3. Overall, how much effort do you think ***other household members*** put into collecting their records for the study?
	* A great deal of effort
	* Some effort
	* A little effort
	* No effort at all
	* EFFORT DIFFERED BY HOUSEHOLD MEMBER (PLEASE EXPLAIN)

|  |
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1. About how many of the records were you able to get from each household member?
	* All or almost all their purchases
	* Most of them
	* Some of them
	* A few of them
	* Or none or almost none of their purchases
	* DIFFERED BY HH MEMBER (PLEASE EXPLAIN):

|  |
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***Confidentiality and Privacy Concerns***

1. We were interested in a variety of records, including receipts, bank statements, credit card statements, check registers, or any other records that would provide information on household spending. Were there any records you were not comfortable sharing with us?
	* YES
	* NO 🡪 GO TO QUESTION 27

**QUESTION 26A.** [IF YES] What types of records? [CODE RESPONDENT’S OPEN-ENDED ANSWER.]

* Bank statements
* Credit card statements
* Check register
* Other (please specify)

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**QUESTION 26b.** Could you explain why you were not comfortable sharing some of your records?

* + Confidentiality concerns
	+ Too personal
	+ Too much financial information on the documents
	+ Something else (please specify)

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1. Is there anything else you would like to share with us about your experiences participating in this study?

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* RECORD TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

**WRAP-UP**

ANSWER RESPONDENT QUESTIONS

THANK YOU AND PAYMENT 🡪 I would like to offer you $40 in appreciation for your time. I have a receipt for you to sign acknowledging this payment. Thank you for participating in this study.

* COLLECT SIGNED RECEIPT
* COMPLETE INTERVIEWER DEBRIEFING QUESTIONS WHEN YOU PREPARE SUMMARY OF CASE
* RECORD END OF INTERVIEW TIME: \_\_\_\_\_\_\_\_:\_\_\_\_\_\_\_\_\_ AM/PM

**Diary**

|  |  |  |
| --- | --- | --- |
|  |  | Household Spending Study |

*Diary Keeper’s Name*

Your participation in the Household Spending Study helps us to improve the quality of the Consumer Expenditure Surveys, which tell us about the products and services that are bought by the people in the United States.

Please record in this diary your household’s expenses and purchases ***for which you have no receipt or other record*** for the following period:

|  |
| --- |
|  |

I will return on at .

If you have any questions, please call:

|  |  |
| --- | --- |
| Field Interviewer’s Name: | Telephone: |
| Field Manager’s Name: | Telephone: |
| Project Director’s Name: | Telephone: |



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| SUID |  |  |  |  |  |  |  |  |

Acting as a collecting agent for the U.S. Department of Labor, Bureau of Labor Statistics.

OMB Control No: 1220-0141

|  |  |  |
| --- | --- | --- |
|  |  | **Instructions** |

1. Use this diary to write down things you buy ***for which you have no receipt or other record.***
2. For each purchase, please enter the following information:
* Who made the purchase
* When the purchase was made
* Where the purchase was made
* How it was paid for
* How the purchase was made (for example—in person, mail order, online)
* Total price paid (and whether tax was included in the price)
* Why you don’t have a receipt
1. If you buy more than one item at a time, you do not have to record the price of each item, only the total spent on the entire purchase.

Please record information for everyone in your household who is 14 years or older:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  | **This is an example of how to fill out the diary page**  |

If you are keeping track of purchases for other people in your household, write in the name of the purchaser here.

|  |  |
| --- | --- |
| **Who made this purchase?** | **When was the purchase made?** |
|  Me Another household member: Who? \_\_Lisa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_Jan\_ \_\_8\_\_\_, 20\_12\_ Month day year  |
| **Where was the purchase made?** |
| Examples: drug store; vending machine; gas station; online (such as amazon.com). Grocery store |
| **How did you pay for this purchase?** | **What was the total purchase price?** |
|  Cash  Online payment service Credit card  Other Debit card Please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Automatic payment  | Enter the total price paid. You do not need to enter the amounts of any individual items – just the total. .amount. $ **\_\_67\_.\_35\_** Does this price include tax? Yes  No |
| **How was this purchase made?** | **Why don’t you have a record for this purchase?** |
|  In person with a cashier or sales clerk In person at a self-checkout or vending machine Online Phone order Mail order Some other way Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Lost or misplaced receipt Left behind at place of purchase  None provided Did not want to provide receipt for this studyAlthough we would like to obtain copies of all receipts you collected during the study period, we realize there may be some receipts you do not wish to share. Another reason Please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- | --- |
|  |  | **Diary Entry #1**  |

|  |  |
| --- | --- |
| **Who made this purchase?** | **When was the purchase made?** |
|  Me Another household member: Who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_ \_\_\_\_\_, 20\_\_\_\_ Month day year |
| **Where was the purchase made?** |
|   |
| **How did you pay for this purchase?** | **What was the total purchase price?** |
|  Cash  Online payment service Credit card  Other Debit card Please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Check \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Automatic payment  | $ \_\_\_\_\_\_\_.\_\_\_\_\_\_ Does this price include tax? Yes  No |
| **How was this purchase made?** | **Why don’t you have a record for this purchase?** |
|  In person with a cashier or sales clerk In person at a self-checkout or vending machine Online Phone order Mail order Some other way Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Lost or misplaced receipt Left behind at place of purchase  None provided Did not want to provide receipt for this study Another reason Please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Showcard**

|  |
| --- |
| **TYPES OF PURCHASES** |
| * Grocery stores
 |
| * Department stores
 |
| * Restaurants
 |
| * Gas stations
 |
| * Drug stores
 |
| * Online purchases
 |
| **TYPES OF RECORDS** |
| * Bills (utility, phone, etc)
 |
| * Credit card statements
 |
| * Bank statements
 |
| * Automatic payments
 |
| * Online statements
 |
| * Online order confirmations
 |