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## FOCUS GROUP SCREENING AND DEMOGRAPHIC QUESTIONS

This document includes recruitment screeners for the following audiences:

- Child care centers
- Day care homes
- Sponsoring organizations

**CHILD CARE CENTERS**

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. May I speak with [INSERT NAME]?  
WHEN CORRECT INDIVIDUAL HAS BEEN REACHED, CONTINUE.

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. You participated in a USDA Food and Nutrition Survey last [INSERT FIELD DATE]. You indicated in the survey that you might be willing to participate in a follow-up small group discussion. Is that correct?

|                         |                          |                            |
|-------------------------|--------------------------|----------------------------|
| Yes, that is correct    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, that is not correct | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

Terrific! We are calling today to find out if you would be willing to participate in a small group telephone discussion with a few other people like yourself who work in child care about nutrition, physical activity and electronic media use among children 5 years and younger while they are in a child care setting. We are not selling anything and we will not ask for any contributions or donations. This is not a marketing call. If you qualify to participate and agree to do so, your answers will be completely anonymous and neither you nor your organization will be identified. Do you think you are interested in participating in a small group discussion?

|                    |                          |                            |
|--------------------|--------------------------|----------------------------|
| Yes, interested    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, not interested | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

May I ask you a few questions to see if you qualify to participate in this research?

1 **RECORD:**

|        |                          |                 |
|--------|--------------------------|-----------------|
| Male   | <input type="checkbox"/> | <b>CONTINUE</b> |
| Female | <input type="checkbox"/> | <b>CONTINUE</b> |

2 Have you previously or do you currently work for any of the following? **[READ LIST]**

|  | <b>YES</b>               | <b>NO</b>                |
|--|--------------------------|--------------------------|
| In advertising or public relations?      | <input type="checkbox"/> | <input type="checkbox"/> |
| In marketing or opinion research?        | <input type="checkbox"/> | <input type="checkbox"/> |
| In journalism or for the news media?     | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>TERMINATE IF YES TO ANY OF ABOVE.</b> |                          |                          |

## 3 To ensure that we include the opinions of a variety of participants could you please tell me your age?

|          |                          |                      |
|----------|--------------------------|----------------------|
| Under 18 | <input type="checkbox"/> | <b>TERMINATE</b>     |
| 18 – 20  | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| 21 – 34  | <input type="checkbox"/> |                      |
| 35 – 44  | <input type="checkbox"/> |                      |
| 45 – 54  | <input type="checkbox"/> |                      |
| 55 – 64  | <input type="checkbox"/> |                      |

4 

|             |                          |  |
|-------------|--------------------------|--|
| 65 or older | <input type="checkbox"/> |  |
|-------------|--------------------------|--|

  
Do you currently work at a child care center?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

5 What is your job title or role?

|                                       |                          |                      |
|---------------------------------------|--------------------------|----------------------|
| Director or Site Supervisor/Manager   | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Assistant Director                    | <input type="checkbox"/> |                      |
| Food Service Director or Manager/Cook | <input type="checkbox"/> |                      |
| Teacher                               | <input type="checkbox"/> |                      |
| Graduate Assistant                    | <input type="checkbox"/> | <b>TERMINATE</b>     |
| Teacher Aid or Volunteer              | <input type="checkbox"/> | <b>TERMINATE</b>     |
| Other                                 |                          | <b>TERMINATE</b>     |

6 Which of the following describes the type of center you work at? **[READ LIST]**

|   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| Head Start  | <input type="checkbox"/> | <input type="checkbox"/> |
| State-run preschool   | <input type="checkbox"/> | <input type="checkbox"/> |
| Center or other preschool   | <input type="checkbox"/> | <input type="checkbox"/> |
| Other   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>TERMINATE IF YES TO HEAD START, STATE PRESCHOOL, OR OTHER.</b> |                          |                          |

7 Approximately, how many children are there in the following age groups under your care: **[READ LIST ONE AGE RANGE AT A TIME AND RECORD NUMERIC RESPONSE.]**

|  | NUMERIC RESPONSE | None                     |
|--|------------------|--------------------------|
| a. Ages 0 to 12 months   | _____            | <input type="checkbox"/> |
| b. Ages 1 and 2  | _____            | <input type="checkbox"/> |
| c. Ages 3, 4 and 5   | _____            | <input type="checkbox"/> |
| d. Ages 6+   | _____            | <input type="checkbox"/> |
| <b>TERMINATE IF "NONE" TO A-C; MUST HAVE SOME CHILDREN UNDER AGE 6 TO CONTINUE .</b> |                  |                          |

8 Does your center offer full-day child care for at least nine months out of the year?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

9 Does your center participate in CACFP (Child and Adult Care Food Program), which provides reimbursement for foods served that meet specific meal pattern requirements?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

10 What is the total number of children at your center? [RECORD NUMERIC RESPONSE]

|                  |     |                 |
|------------------|-----|-----------------|
| NUMERIC RESPONSE | ___ | <b>CONTINUE</b> |
|------------------|-----|-----------------|

**RECRUIT A MIX FOR Q10 OF TOTAL NUMBER OF CHILDREN; TOTAL NUMBER BREAKS TO FOLLOW BASED UPON PHASE 1 FINDINGS**

11 How would you describe the area in which your center is located – urban, suburban, small town, rural, or tribal community?

|                  |                          |                      |
|------------------|--------------------------|----------------------|
| Urban            | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Suburban         | <input type="checkbox"/> |                      |
| Small town       | <input type="checkbox"/> |                      |
| Rural            | <input type="checkbox"/> |                      |
| Tribal community | <input type="checkbox"/> |                      |

12 Please tell me, what is the last grade of school you have completed? If you are currently in college, just say so.

|   |                          |                      |
|---|--------------------------|----------------------|
| Less than high school                                     | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| High school or GED  | <input type="checkbox"/> |                      |
| Some university/college or vocational school              | <input type="checkbox"/> |                      |
| College   | <input type="checkbox"/> |                      |
| Postgraduate degree (Masters, Ph.D., professional degree) | <input type="checkbox"/> |                      |

13 Are you of Hispanic or Latino background – such as Mexican, Puerto Rican, Cuban, or another Latin American background??

|                        |                          |                 |
|------------------------|--------------------------|-----------------|
| Hispanic or Latino     | <input type="checkbox"/> | <b>CONTINUE</b> |
| Not Hispanic or Latino | <input type="checkbox"/> |                 |

14 [IF NOT HISPANIC OR LATINO IN Q13] Which of the following categories best describes your race or ethnicity?

|   |                          |                      |
|---|--------------------------|----------------------|
| American Indian or Alaska Native          | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Asian                                     | <input type="checkbox"/> |                      |
| Black or African American                 | <input type="checkbox"/> |                      |
| Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> |                      |
| White                                     | <input type="checkbox"/> |                      |

**INVITATION:**

We would like to invite you to participate in a research discussion group. The group will take 90 minutes of your time. The discussion group will be held on [INSERT DATE] at [INSERT TIME].

Will you be available on \_\_\_\_ from \_\_\_\_ to \_\_\_\_ p.m.?

|     |                          |                                |
|-----|--------------------------|--------------------------------|
| Yes | <input type="checkbox"/> | <b>CONFIRM DATE &amp; TIME</b> |
| No  | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b>   |

We will send you an email confirming the time and how to participate. May I have your email address where it is best to reach you?

---

To verify, do you have access to a computer where you can go to a link or a website?

|     |                          |                              |
|-----|--------------------------|------------------------------|
| Yes | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b> |
| No  | <input type="checkbox"/> |                              |

**DAY CARE HOMES**

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. May I speak with [INSERT NAME]?  
WHEN CORRECT INDIVIDUAL HAS BEEN REACHED, CONTINUE.

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. You participated in a USDA Food and Nutrition Survey last [INSERT FIELD DATE]. You indicated in the survey that you might be willing to participate in a follow-up small group discussion. Is that correct?

|                         |                          |                            |
|-------------------------|--------------------------|----------------------------|
| Yes, that is correct    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, that is not correct | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

Terrific! We are calling today to find out if you would be willing to participate in a small group telephone discussion with a few other people like yourself who work in child care about nutrition, physical activity and electronic media use among children 5 years and younger while they are in a child care setting. We are not selling anything and we will not ask for any contributions or donations. This is not a marketing call. If you qualify to participate and agree to do so, your answers will be completely anonymous and neither you nor your home will be identified. Do you think you are interested in participating in a small group discussion?

|                    |                          |                            |
|--------------------|--------------------------|----------------------------|
| Yes, interested    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, not interested | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

May I ask you a few questions to see if you qualify to participate in this research?

15 **RECORD:**

|        |                          |                 |
|--------|--------------------------|-----------------|
| Male   | <input type="checkbox"/> | <b>CONTINUE</b> |
| Female | <input type="checkbox"/> | <b>CONTINUE</b> |

16 Have you previously or do you currently work for any of the following? **[READ LIST]**

|  | <b>YES</b>               | <b>NO</b>                |
|--|--------------------------|--------------------------|
| In advertising or public relations?      | <input type="checkbox"/> | <input type="checkbox"/> |
| In marketing or opinion research?        | <input type="checkbox"/> | <input type="checkbox"/> |
| In journalism or for the news media?     | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>TERMINATE IF YES TO ANY OF ABOVE.</b> |                          |                          |

## 17 To ensure that we include the opinions of a variety of participants could you please tell me your age?

|          |                          |                      |
|----------|--------------------------|----------------------|
| Under 18 | <input type="checkbox"/> | <b>TERMINATE</b>     |
| 18 – 20  | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| 21 – 34  | <input type="checkbox"/> |                      |
| 35 – 44  | <input type="checkbox"/> |                      |
| 45 – 54  | <input type="checkbox"/> |                      |
| 55 – 64  | <input type="checkbox"/> |                      |

18 

|             |                          |  |
|-------------|--------------------------|--|
| 65 or older | <input type="checkbox"/> |  |
|-------------|--------------------------|--|

  
Do you currently work at a family day care home?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

19 What is your job title or role?

|                         |                          |                  |
|-------------------------|--------------------------|------------------|
| Owner/Co-Owner/Operator | <input type="checkbox"/> | <b>CONTINUE</b>  |
| Assistant               | <input type="checkbox"/> | <b>TERMINATE</b> |
| Teacher                 | <input type="checkbox"/> | <b>TERMINATE</b> |
| Volunteer               | <input type="checkbox"/> | <b>TERMINATE</b> |
| Other                   | <input type="checkbox"/> | <b>TERMINATE</b> |

20 Approximately, how many children are there in the following age groups under your care: **[READ LIST ONE AGE RANGE AT A TIME AND RECORD NUMERIC RESPONSE.]**

|  | NUMERIC RESPONSE | None                     |
|--|------------------|--------------------------|
| a. Ages 0 to 12 months   | _____            | <input type="checkbox"/> |
| b. Ages 1 and 2  | _____            | <input type="checkbox"/> |
| c. Ages 3, 4 and 5   | _____            | <input type="checkbox"/> |
| d. Ages 6+   | _____            | <input type="checkbox"/> |
| <b>TERMINATE IF "NONE" TO A-C; MUST HAVE SOME CHILDREN UNDER AGE 6 TO CONTINUE .</b> |                  |                          |

21 Does your day care home offer full-day child care for at least nine months out of the year?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

22 Does your day care home participate in CACFP (Child and Adult Care Food Program), which provides reimbursement for foods served that meet specific meal pattern requirements?

|     |                          |                  |
|-----|--------------------------|------------------|
| Yes | <input type="checkbox"/> | <b>CONTINUE</b>  |
| No  | <input type="checkbox"/> | <b>TERMINATE</b> |

23 What is the total number of children at your day care home? **[RECORD NUMERIC RESPONSE]**

|                  |       |                 |
|------------------|-------|-----------------|
| NUMERIC RESPONSE | _____ | <b>CONTINUE</b> |
|------------------|-------|-----------------|

**RECRUIT A MIX FOR Q22 OF TOTAL NUMBER OF CHILDREN; TOTAL NUMBER BREAKS TO FOLLOW BASED UPON PHASE 1 FINDINGS**

24 How would you describe the area in which your home is located – urban, suburban, small town, rural, or tribal community?

|                  |                          |                      |
|------------------|--------------------------|----------------------|
| Urban            | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Suburban         | <input type="checkbox"/> |                      |
| Small town       | <input type="checkbox"/> |                      |
| Rural            | <input type="checkbox"/> |                      |
| Tribal community | <input type="checkbox"/> |                      |

25 Please tell me, what is the last grade of school you have completed? If you are currently in college, just say so.

|   |                          |                      |
|---|--------------------------|----------------------|
| Less than high school                                     | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| High school or GED  | <input type="checkbox"/> |                      |
| Some university/college or vocational school              | <input type="checkbox"/> |                      |
| College   | <input type="checkbox"/> |                      |
| Postgraduate degree (Masters, Ph.D., professional degree) | <input type="checkbox"/> |                      |

26 Are you of Hispanic or Latino background – such as Mexican, Puerto Rican, Cuban, or another Latin American background??

|                        |                          |                 |
|------------------------|--------------------------|-----------------|
| Hispanic or Latino     | <input type="checkbox"/> | <b>CONTINUE</b> |
| Not Hispanic or Latino | <input type="checkbox"/> |                 |

27 **[IF NOT HISPANIC OR LATINO IN Q26]** Which of the following categories best describes your race or ethnicity?

|   |                          |                      |
|---|--------------------------|----------------------|
| American Indian or Alaska Native          | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Asian                                     | <input type="checkbox"/> |                      |
| Black or African American                 | <input type="checkbox"/> |                      |
| Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> |                      |
| White                                     | <input type="checkbox"/> |                      |



**INVITATION:**

We would like to invite you to participate in a research discussion group. The group will take 90 minutes of your time. The discussion group will be held on [INSERT DATE] at [INSERT TIME].

Will you be available on \_\_\_\_ from \_\_\_\_ to \_\_\_\_ p.m.?

|     |                          |                                |
|-----|--------------------------|--------------------------------|
| Yes | <input type="checkbox"/> | <b>CONFIRM DATE &amp; TIME</b> |
| No  | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b>   |

We will send you an email confirming the time and how to participate. May I have your email address where it is best to reach you?

---

To verify, do you have access to a computer where you can go to a link or a website?

|     |                          |                              |
|-----|--------------------------|------------------------------|
| Yes | <input type="checkbox"/> |                              |
| No  | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b> |

**SPONSORING ORGANIZATIONS**

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. May I speak with [INSERT NAME]?  
WHEN CORRECT INDIVIDUAL HAS BEEN REACHED, CONTINUE.

Hello, my name is \_\_\_\_\_. I'm calling from KRC Research. You participated in a USDA Food and Nutrition Survey last [INSERT FIELD DATE]. You indicated in the survey that you might be willing to participate in a follow-up small group discussion. Is that correct?

|                         |                          |                            |
|-------------------------|--------------------------|----------------------------|
| Yes, that is correct    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, that is not correct | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

Terrific! We are calling today to find out if you would be willing to participate in a small group telephone discussion with a few other people like yourself who work in child care about nutrition, physical activity and electronic media use among children 5 years and younger while they are in a child care setting. We are not selling anything and we will not ask for any contributions or donations. This is not a marketing call. If you qualify to participate and agree to do so, your answers will be completely anonymous and neither you nor your organization will be identified. Do you think you are interested in participating in a small group discussion?

|                    |                          |                            |
|--------------------|--------------------------|----------------------------|
| Yes, interested    | <input type="checkbox"/> | <b>CONTINUE</b>            |
| No, not interested | <input type="checkbox"/> | <b>THANK AND TERMINATE</b> |

May I ask you a few questions to see if you qualify to participate in this research?

28 **RECORD:**

|        |                          |                 |
|--------|--------------------------|-----------------|
| Male   | <input type="checkbox"/> | <b>CONTINUE</b> |
| Female | <input type="checkbox"/> | <b>CONTINUE</b> |

29 Have you previously or do you currently work for any of the following? **[READ LIST]**

|  | <b>YES</b>               | <b>NO</b>                |
|--|--------------------------|--------------------------|
| In advertising or public relations?      | <input type="checkbox"/> | <input type="checkbox"/> |
| In marketing or opinion research?        | <input type="checkbox"/> | <input type="checkbox"/> |
| In journalism or for the news media?     | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>TERMINATE IF YES TO ANY OF ABOVE.</b> |                          |                          |

## 30 To ensure that we include the opinions of a variety of participants could you please tell me your age?

|          |                          |                      |
|----------|--------------------------|----------------------|
| Under 18 | <input type="checkbox"/> | <b>TERMINATE</b>     |
| 18 – 20  | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| 21 – 34  | <input type="checkbox"/> |                      |
| 35 – 44  | <input type="checkbox"/> |                      |
| 45 – 54  | <input type="checkbox"/> |                      |
| 55 – 64  | <input type="checkbox"/> |                      |

31 

|             |                          |  |
|-------------|--------------------------|--|
| 65 or older | <input type="checkbox"/> |  |
|-------------|--------------------------|--|

  
 What is your job title or role?

|                                 |                          |                  |
|---------------------------------|--------------------------|------------------|
| Executive Director              | <input type="checkbox"/> | <b>CONTINUE</b>  |
| Assistant Director/Supervisor   | <input type="checkbox"/> | <b>CONTINUE</b>  |
| Food Program/Nutrition Manager  | <input type="checkbox"/> | <b>CONTINUE</b>  |
| Food Program Specialist/Monitor | <input type="checkbox"/> | <b>CONTINUE</b>  |
| Board Member                    | <input type="checkbox"/> | <b>TERMINATE</b> |
| Finance Director                | <input type="checkbox"/> | <b>TERMINATE</b> |
| Human Resources Director        | <input type="checkbox"/> | <b>TERMINATE</b> |
| Community Operations Director   | <input type="checkbox"/> | <b>TERMINATE</b> |
| Other                           | <input type="checkbox"/> | <b>TERMINATE</b> |

32 If you sponsor centers, are they affiliated, that is sponsor-owned, or unaffiliated, that is not sponsor-owned, or both?

|              |                          |                      |
|--------------|--------------------------|----------------------|
| Affiliated   | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Unaffiliated | <input type="checkbox"/> |                      |
| Both         | <input type="checkbox"/> |                      |

33 What is the total number of child care centers and/or day care homes that your organization sponsors: **[READ LIST AND RECORD NUMERIC RESPONSE.]**

|                       | NUMERIC RESPONSE | None                     |
|-----------------------|------------------|--------------------------|
| a. Child care centers | _____            | <input type="checkbox"/> |
| b. Day care homes     | _____            | <input type="checkbox"/> |

**RECRUIT A MIX OF TOTAL NUMBER OF CENTERS AND DAY CARE HOMES; TOTAL NUMBER BREAKS TO FOLLOW BASED UPON QUANTITATIVE FINDINGS**

34 Please tell me, what is the last grade of school you have completed? If you are currently in college, just say so.

|   |                          |                      |
|---|--------------------------|----------------------|
| Less than high school                                     | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| High school or GED  | <input type="checkbox"/> |                      |
| Some university/college or vocational school              | <input type="checkbox"/> |                      |
| College   | <input type="checkbox"/> |                      |
| Postgraduate degree (Masters, Ph.D., professional degree) | <input type="checkbox"/> |                      |

35 Are you of Hispanic or Latino background – such as Mexican, Puerto Rican, Cuban, or another Latin American background??

|                        |                          |                 |
|------------------------|--------------------------|-----------------|
| Hispanic or Latino     | <input type="checkbox"/> | <b>CONTINUE</b> |
| Not Hispanic or Latino | <input type="checkbox"/> |                 |

36 **[IF NOT HISPANIC OR LATINO IN Q35]** Which of the following categories best describes your race or ethnicity?

|   |                          |                      |
|---|--------------------------|----------------------|
| American Indian or Alaska Native          | <input type="checkbox"/> | <b>RECRUIT A MIX</b> |
| Asian                                     | <input type="checkbox"/> |                      |
| Black or African American                 | <input type="checkbox"/> |                      |
| Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> |                      |
| White                                     | <input type="checkbox"/> |                      |

**INVITATION:**

We would like to invite you to participate in a research discussion group. The group will take 90 minutes of your time. The discussion group will be held on [INSERT DATE] at [INSERT TIME].

Will you be available on \_\_\_\_ from \_\_\_\_ to \_\_\_\_ p.m.?

|     |                          |                                |
|-----|--------------------------|--------------------------------|
| Yes | <input type="checkbox"/> | <b>CONFIRM DATE &amp; TIME</b> |
| No  | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b>   |

We will send you an email confirming the time and how to participate. May I have your email address where it is best to reach you?

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To verify, do you have access to a computer where you can go to a link or a website?

|     |                          |                              |
|-----|--------------------------|------------------------------|
| Yes | <input type="checkbox"/> | <b>THANK &amp; TERMINATE</b> |
| No  | <input type="checkbox"/> |                              |