OMB No. xxxx-xxxx Exp. Date xx/xx/xxxx

Interview Incentive Receipt

U.S. Food and Drug Administration

and

RTI International

Thank you for participating in the Evaluation of the Fresh Empire Campaign on Tobacco.

In appreciation of your participation in this important study, you are eligible to receive \$25 in cash.

Since maintaining the confidentiality of your information is important to us, your name will not be entered on this form. However, the interviewer must sign and date this form to certify you received (or declined) the cash incentive.

Interviewer	Date	Case ID
Accepted Cash Incentive Incentive		Declined Cash