Section	CAPI Variable Name	Question Text	Skip Instructions
FRONT	H_PURPOSE	 FREQUENTLY ASKED QUESTIONS 1. What is this survey all about? 2. Who uses this information? What good is it? 3. How is the data collected? How many times will I be interviewed? 4. I hesitate to tell some things about myself, what protection do I have? 5. Is this survey authorized by law? 6. Proceed with the interview 	1: Goto H_PURPOSE1 2: Goto H_PURPOSE2 3: Goto H_PURPOSE3 4: Goto H_PURPOSE4 5: Goto H_PURPOSE5 6: Return to interview
FRONT	H_PURPOSE1	◆ WHAT IS THIS SURVEY ALL ABOUT? The Consumer Expenditure Survey collects information from the Nation's households and families on their buying habits (expenditures), income, and characteristics. The strength of the survey is that it allows data users to relate the expenditure and income of consumers to the characteristics of those consumers. 1. Enter 1 to Continue	Return to interview
FRONT	H_PURPOSE2	♦ WHO USES THIS INFORMATION? WHAT GOOD IS IT? Data from the Consumer Expenditure Survey are used in a number of different ways by a variety of users. An important use of the survey by the Bureau of Labor Statistics is for the periodic revisions of the Consumer Price Index (CPI). Survey results are used to select new market basket of goods and services for the CPI, to determine the relative importance of CPI components and to derive new cost weights for the market basket. Government and private agencies use the data to study the welfare of particular segments of the population. Economic policymakers use the data to study the impact of policy changes in the welfare of different socioeconomic groups. Researchers use the data in a variety of studies, including those that focus on the spending behavior of different family types and historical spending trends.	Return to interview
FRONT	H_PURPOSE3	HOW IS THE DATA COLLECTED? HOW MANY TIMES WILL I BE INTERVIEWED?	Return to interview

^H_PURPOSE3

1. Enter 1 to Continue

Section	CAPI Variable Name	Question Text	Skip Instructions
RONT	H_PURPOSE4	I HESITATE TO TELL SOME THINGS ABOUT MYSELF. WHAT PROTECTION DO I HAVE?	Return to interview
		The information that respondents provide is used solely for statistical purposes. All	
		Census Bureau data collectors take an oath of confidentiality and are subject	
		to fines and imprisonment for improperly disclosing information provided by respondents	
		Names and addresses are removed from all forms and that information is not released as part of any statistical data.	
		1. Enter 1 to Continue	
RONT	H_PURPOSE5	◆ IS THIS SURVEY AUTHORIZED BY LAW?	Return to interview
		The Bureau of Labor Statistics conducts the Consumer Expenditure Survey under the authority of Title 29 of the U.S. Code. Congress authorizes the financial support for the C survey through Public Laws 94-439 and 95-205. The Bureau of the Census collects the CE data under the authority of Title 13, U.S. Code, Section 8b, which allows the Census Bureau of the Census Bureau of the Allows the Census Bureau of the Census of the Census Bureau of the Census Bureau of the Census Bureau of the Census Bureau of the Census of the Census Bureau of the Census of the Ce	
		to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau.	on
-RONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue	
-RONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau.	1: IF INTNMBR = 1 then goto GENINTRO
-RONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS	1: IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM	1: IF INTNMBR = 1 then goto GENINTRO
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS	1: IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS QUARTERLY INTERVIEW SURVEY	1: IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT 2: Goto GENINTRO
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS QUARTERLY INTERVIEW SURVEY DATE: (current date) TIME: (time)	 IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT Goto GENINTRO exit block and goto BBACK.TRANS
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS QUARTERLY INTERVIEW SURVEY DATE: (current date) INTERVIEW NUMBER: (1/2/3/4/5) CASE STATUS IS: (case status) (THIS HOUSEHOLD IS A CONFIRMED REFUSAL/)	 IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT Goto GENINTRO exit block and goto BBACK.TRANS Exit block and goto BBACK.VERIFY_INFO
FRONT	START	to undertake surveys for other government agencies. Participation in the survey is voluntary. Under Title 13, the Census Bureau holds all information in strict confidence. We will not release information reported in the survey which would permit the identification of a household or any of its members to anyone outside of the Census Bureau. 1. Enter 1 to Continue CENSUS CATI/CAPI SYSTEM CONSUMER EXPENDITURE SURVEYS QUARTERLY INTERVIEW SURVEY DATE: (current date) INME: (time) INTERVIEW NUMBER: (1/2/3/4/5) CASE STATUS IS: (case status) (THIS HOUSEHOLD IS A CONFIRMED REFUSAL/) (Press END to move to the next unanswered item/)	 IF INTNMBR = 1 then goto GENINTRO ELSE goto SHOSTAT Goto GENINTRO exit block and goto BBACK.TRANS Exit block and goto BBACK.VERIFY_INFO

Section	CAPI Variable Name	Question Text	Skip Instructions
		4. Quit 5. Non-interview	
FRONT	SHOSTAT	(This household was not in sample last quarter. /) INTERVIEW NUMBER PREVIOUS OUTCOME DESCRIPTION (1 /) (1st month outcome #) (outcode description) (2 /) (2nd month outcome #) (Outcome description) (3 /) (3rd month outcome #) (Outcome description) (4 /) (4th month outcome #) (Outcome description) (BC NAME: (name) /) (BC TITLE: (title) /) ABC_Phon_Fill (BC ADDRESS: (Street address) /) ABC_Add2_Fill (BC CITY: (city) /), (BC STATE: (State) /) (BC ZIP CODE: (zipcode) /) (BC OBSERVATION: (Yes/No) /)	IF ROSTERNAMEONINPUT = Yes then goto SHOWROS ELSE goto SHOW_NOTES
		1. Enter 1 to Continue	
FRONT	SHOWROS	STATUS OF HOUSEHOLD COMPOSITION Resp. LN Name Member Relationship CU Sex Age (X /) (Line #) (Name) (Yes/No) (Relationship) ^Cu (1/2) (Age)	Goto SHOW_NOTES
		1. Enter 1 to Continue	
FRONT	SHOW_NOTES	◆ INFORMATION FROM PREVIOUS QUARTERS INTERVIEW PRECHARTS: Press Shift-F8 to view pre-charts BEST TIME TO CALL: ^Besttime1 (best time specify) SUNDAY INTERVIEW: (No Sunday Interview/Sunday interview okay)	Goto GENINTRO
		Language Spoken Last Quarter: (English/Spanish/(specify))	
		Use CNTRL-F7 to view case level notes	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Enter 1 to Continue	
FRONT	GENINTRO	◆ Do not read as worded below	1: IF INTNMBR = 1 AND (RT25.QTYPE = 1, 2 or 3) then goto RECVDEBT
		o Identify yourself - show I.D.	ELSE goto INTROB
		o (Ask to speak to: (name) / Ask for eligible respondent)	-
		If unavailable use Shift-F1 for HH roster.	2: Goto GIVE_LETTER
		o (Ask to speak to: (name) / Ask for eligible respondent)2	
		o Introduce survey (Ask to speak to: (name) / Ask for eligible respondent)3	Exit block and goto BCOVERAGE.NONTYP
		o The Household address is:	
		(House #) (House #)suf (Street name)	
		(Unit Designation)	
		o Read if necessary	
		I am (your name) from the U.S. Census Bureau. Here is my identification card.	
		We are conducting a Consumer Expenditure Survey for the Bureau of Labor Statistics.	
		I have some questions I would like to ask you.	
		Did you receive our letter?	
		Did you receive our local.	
		1. Yes	
		2. No	
		3. Non-interview	
FRONT	GIVE_LETTER	◆ Hand the respondent the letter.	IF INTNMBR = 1 AND (RT25.QTYPE = 1, 2 or 3) then goto RECVDEBT
		Allow time to read	•
			ELSE goto INTROB
		1. Finter 1 to Continue	
FRONT	RECVDEBT	1. Enter 1 to Continue	1 DE: Coto INTDOD
FRONT	RECADERI	^RECVDEBT_Fill (Did (READ NAMES) receive a debit card?/Did anyone living at this address receive the	1,RF: Goto INTROB
		debit card?)	2,DK: Goto NOTRCV40
		debit card?)	2,DR. GOIO NOTREV40
		(FNAME and LNAME of all persons on the roster)	
		1. Yes	
		2. No	
FRONT	NOTRCV40	I'm sorry that you did not receive the debit card. Upon completion of the interview, we will send you another card in the amount of \$40 as soon as possible. If you also receive the original card we sent, please destroy it since we will be deactivating it.	Goto RCRDNM40

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Enter 1 to Continue	
FRONT	RCRDNM40	Who would you like the replacement card addressed to?	GotoINTROB
FRONT	INTROB	♦ Is Respondent ready to complete the interview?	1: IF INTNMBR = 2-5 AND [(NEWCU ne 1) or (NEWCU = 1 AND ROSTERNAMEONINPUT = 'Yes')] AND not a replacement case then goto
		1. Continue	REPLACE_HH
		2. Reluctant Respondent	ELSE goto VERADD
		3. Non-interview4. Other Outcome	3: exit block and goto BCOVERAGE.NONTYP
		5. Wrong address6. Inconvenient time	2,4: Exit block and goto BBACK.VERIFY_INFO
			5: Exit block and goto BBACK.DONE
			6: Exit block and goto BBACK.APPTOTH
FRONT	REPLACE_HH	♦ Is this a Replacement Household?	1: Goto REPLACE_VER
		1. Yes 2. No	2: Goto VERADD
FRONT	REPLACE_VER	◆ A replacement household means that there are no members of the original household living at this	1: IF RT8500.TOTALCU = 1 then goto ONE_CU ELSE goto REPLACE_VER2
		address. Are you sure that this is a replacement household? (This case is part of a multi-CU household. Verify that ALL original members in all CU's no longer live there. /)	2: Goto CK_REPLACEVER
		LN Name Member Relationship CU Sex Age (Line #) (Name) (Yes/No) (Relationship) ^Cu (1/2) (Age)	
		1. Yes 2. No	
FRONT	REPLACE_VER2	Has a replacement case already been created/spawned for this address?	1 Exit block and goto BBACK.DONE
		If unsure, back up to the start screen and Quit out of the instrument so you can check case management.	2: Goto MULTI_CU
		1. Yes 2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
FRONT	ONE_CU	A replacement household Case will be spawned. You will need to exit this case and pull up the new Case in order to interview the replacement household. The case you are currently in will automatically become a type C.	Exit block and goto BBACK.DONE
		1. Enter 1 to Continue	
FRONT	MULTI_CU	 A Replacement Household Case will be spawned. You will need to exit this case and pull up the New Case in order to interview the replacement household. This case is part of a Multi-CU Address. The case you are currently in will automatically become a type C, But you MUST manually Type C all other Cases. (There are (Total number of CUs from last quarter) cases that must be Type C'd) If you do not have all these cases on your laptop, contact your so that the other cases can be located and Type C'd. 	Exit block and goto BBACK.DONE
		1. Enter 1 to Continue	
FRONT	VERADD	(* Confirm address information (Only ask if necessary)) I have your address listed as ◆ READ ADDRESS BELOW. Is that your exact address?	 Goto MAILAD Goto NADDST1
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description) Non-City: (Non-city address) Building: (Building Name)	3,RF: Goto DONE
		 Yes, address is EXACTLY CORRECT as listed. Address is MOSTLY CORRECT, needs minor changes. INCORRECT ADDRESS 	
FRONT	NADDST1	 Enter corrections for House Number or press ENTER for Same/No Change. (House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) 	Goto NADDST2

Section	CAPI Variable Name	Question Text	Skip Instructions
		Phy des: (Physical Description)	
		GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
		Building: (Building Name)	
FRONT	NADDST2	 Enter corrections for House # Suffix or Press ENTER for Same/No Change 	Goto NADDST3
		(House #) (House #)SUF (Street Name) (Unit Designation)	
		(City), (State) (Zipcode)	
		Phy des: (Physical Description)	
		GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
		Building: (Building Name)	
FRONT	NADDST3	Enter corrections for Street Name or Press ENTER for Same/No Change	Goto NADDST4
11(0)(1	14/12/2010	Enter corrections for Street Hame of Frees Entre Control Camerno Change	COLO 14 12 20 1 1
		(House #) (House #)SUF (Street Name) (Unit Designation)	
		(City), (State) (Zipcode)	
		Phy des: (Physical Description)	
		GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
		Building: (Building Name)	
FRONT	NADDST4	◆ Enter corrections for Unit Designation or Press ENTER for Same/No Change	IF FRAME = 3 or RT25.GQINAREA = 1 then goto
			NADDST5
		(House #) (House #)SUF (Street Name) (Unit Designation)	ELSE goto NADDST6
		(City), (State) (Zipcode)	
		Phy des: (Physical Description)	
		GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
		Building: (Building Name)	
FRONT	NADDST5	 Enter corrections for Group Quarters Unit Description or Press ENTER for Same/No 	Goto NADDST6
		Change	
		(House #) (House #)SUF (Street Name) (Unit Designation)	
		(City), (State) (Zipcode)	
		Phy des: (Physical Description)	
		GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
		Building: (Building Name)	
FRONT	NADDST6	Enter corrections for Non City Style Address or Press ENTER for Same/No Change	Goto NADDPHYS
INOINI	MADDOID	- Enter corrections for Non City Style Address of Fless ENTER for Same No Change	סטנט וואסטו ווויס

Section	CAPI Variable Name	Question Text	Skip Instructions
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description) Non-City: (Non-city address) Building: (Building Name)	
FRONT	NADDPHYS	◆ Enter corrections for Physical Description or Press ENTER for Same/No Change	Goto NADDCT
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description) Non-City: (Non-city address) Building: (Building Name)	
FRONT	NADDCT	Enter corrections for City or Press ENTER for Same/No Change	Goto NADDST
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description) Non-City: (Non-city address) Building: (Building Name)	
FRONT	NADDST	? [F1]	Goto NADDZP
		♦ Enter corrections for State or Press ENTER for Same/No Change	
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description) Non-City: (Non-city address) Building: (Building Name)	
FRONT	NADDZP	 Enter corrections for Zipcode or Press ENTER for Same/No Change 	ELSE goto NADDBUIL
		(House #) (House #)SUF (Street Name) (Unit Designation) (City), (State) (Zipcode) Phy des: (Physical Description) GQ unit: (GQ Unit Description)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Non-City: (Non-city address) Building: (Building Name)	
FRONT	NADDBUIL	◆ Enter corrections for Building Name or Press ENTER for Same/No Change	Goto CK_ADDRESS
		(House #) (House #)SUF (Street Name) (Unit Designation)	
		(City), (State) (Zipcode)	
		Phy des: (Physical Description) GQ unit: (GQ Unit Description)	
		Non-City: (Non-city address)	
FDONT	MAIL AD	Building: (Building Name)	1. Coto DUONENIUM
FRONT	MAILAD	(Is this also your mailing address?/I have your mailing address as *READ ADDRESS BELOW. Is that correct?)	1: Goto PHONENUM
		,	2: Goto NMAILST1
		(Mailing address entries / physical address entries)	
		1. Yes	
FRONT	NMAILST1	2. No ◆ Enter change to Mailing address - House # or Press ENTER for Same/No Change	Goto NMAILST2
TRONT	NWW WEST I	Enter change to Maning address "House in or Fress ENTER for Sumerivo Change	3010 WWW. 1123 12
		Address: Mailing Address: (Street News) (House #) (House #) (House #)	
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name) (Unit Designation) (Unit Designation)	
		(City), (State) (Zipcode) (City), (State) (Zipcode)	
		Phys des: (Physical Description) GQ unit: (GQ Unit Description) GQ unit: (GQ Unit Description)	
		Non-Cty: (Non-city address) Non-city: (Non City Address)	
FRONT	NMAILST2	Building: (Building Name) ◆ Enter change to Mailing address - House # suffix or Press ENTER for Same/No Change	Goto NMAILST3
	1100	Enter change to maining address. House in Carnet of Proceedings	03.0 1.1.10 1.20 1.0
		Address: Mailing Address:	
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name)	
		(Unit Designation) (Unit Designation) (City), (State) (Zipcode) (City), (State) (Zipcode)	
		(City), (State) (Zipcode) Phys des: (Physical Description) (City), (State) (Zipcode)	
		GQ unit: (GQ Unit Description) GQ unit: (GQ Unit Description)	
		Non-Cty: (Non-city address) Non-city: (Non City Address) Building: (Building Name)	
FRONT	NMAILST3	◆ Enter change to Mailing address - Street Name or Press ENTER for Same/No Change	Goto NMAILST4

Section	CAPI Variable Name	Question Text	Skip Instructions
		Address: Mailing Address:	
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name)	
		(Unit Designation) (Unit Designation)	
		(City), (State) (Zipcode) (City), (State) (Zipcode)	
		Phys des: (Physical Description)	
		GQ unit: (GQ Unit Description) GQ unit: (GQ Unit Description) Non Chr. (Non City Address)	
		Non-Cty: (Non-city address) Non-city: (Non City Address) Building: (Building Name)	
FRONT	NMAILST4	◆ Enter change to Mailing address - Unit Designation or Press ENTER for Same/No Change	IF FRAME = 3 OR RT25.GQINAREA = 1 then goto
11(0)(1	141417 (1201-1	Enter sharing to maining address Sint Dosignation of Press Entre Came/10 Stating	NMAILST5
		Address: Mailing Address:	ELSE goto NMAILST6
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name)	g
		(Unit Designation) (Unit Designation)	
		(City), (State) (Zipcode) (City), (State) (Zipcode)	
		Phys des: (Physical Description)	
		GQ unit: (GQ Unit Description) GQ unit: (GQ Unit Description)	
		Non-Cty: (Non-city address) Non-city: (Non City Address)	
		Building: (Building Name)	
FRONT	NMAILST5	 Enter change to Mailing address - GQ Unit Description or Press ENTER for Same/No 	Goto NMAILST6
		Change	
		Address: Mailing Address:	
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name)	
		(Unit Designation) (Unit Designation)	
		(City), (State) (Zipcode) (City), (State) (Zipcode)	
		Phys des: (Physical Description)	
		GQ unit: ^MGQUNITINFO GQ unit: (GQ Unit Description)	
		Non-Cty: (Non-city address) Non-city: (Non City Address)	
FDONT	NIMAMIL CTC	Building: (Building Name)	coto NIMAU CT
FRONT	NMAILST6	• Enter change to Mailing address - Non-City Style Address or Press ENTER for Same/No	goto NMAILCT
		Change	
		Address: Mailing Address:	
		(House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name)	
		(Unit Designation) (Unit Designation)	
		(City), (State) (Zipcode) (City), (State) (Zipcode)	
		Phys des: (Physical Description)	
		GQ unit: (GQ Unit Description) GQ unit: (GQ Unit Description)	
		Non-Cty: (Non-city address) Non-city: (Non City Address)	
		Building: (Building Name)	

Section	CAPI Variable Name	Question Text	Skip Instructions
FRONT	NMAILCT	◆ Enter change to Mailing address - City or Press ENTER for Same/No Change	Goto NMAILST
FDONT	NIMALI CT	Address: (House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name) (Unit Designation) (Unit Designation) (City), (State) (Zipcode) (City), (State) (Zipcode) Phys des: (Physical Description) GQ unit: (GQ Unit Description) Non-Cty: (Non-city address) Non-city: (Non City Address) Building: (Building Name)	Cote NIMAU 7D4
FRONT	NMAILST	? [F1]	Goto NMAILZP1
		◆ Enter change to Mailing address -State or Press ENTER for Same/No Change	
		Address: Mailing Address: (House #) (House #) SUF (Street Name) (House #) (House #) SUF (Street Name) (Unit Designation) (Unit Designation) (City), (State) (Zipcode) (City), (State) (Zipcode) Phys des: (Physical Description) GQ unit: (GQ Unit Description) Non-Cty: (Non-city address) Non-city: (Non City Address) Building: (Building Name)	
FRONT	NMAILZP1	◆ Enter change to Mailing address - Zipcode or Press ENTER for Same/No Change	goto CL_MAILADDRESS
		Address: (House #) (House #)SUF (Street Name) (House #) (House #)SUF (Street Name) (Unit Designation) (Unit Designation) (City), (State) (Zipcode) (City), (State) (Zipcode) Phys des: (Physical Description) GQ unit: (GQ Unit Description) Non-Cty: (Non-city address) Non-city: (Non City Address) Building: (Building Name)	
FRONT	PHONENUMBER	Ask or verify, if necessary.	goto PHONENUMBER2
		What is your telephone number? ◆ Enter phone number or 0 for None	
FRONT	PHONENUMBER2	• Ask or verify, if necessary.	goto EMAILADDRESS
		Do you have another phone number where I can reach you?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		◆ Enter phone number or 0 for None	
FRONT	EMAILADDRESS	Ask or verify, if necessary	Exit block and goto BCOVERAGE
		Can I have your e-mail address?	
		◆ Enter E-Mail or press ENTER for None/Same	
COVERA GE	NONTYP	♦ What type of non-interview do you have?	1: Goto TYPEA
OL		what type of hori-interview do you have:	2: Goto TYPEB
		Type A = No one home, Temporarily absent, or refusal	3: Goto TYPEC
		Type B = Vacant, under construction, occupied by persons with URE	3. Out 111 LC
		Type C = Demolished, house moved, merged, condemned, located on base, CU moved	
		1. TYPE A 2. TYPE B 3. TYPE C	
COVERA GE	TYPEA	◆ Enter TYPE A noninterview	1,2: IF RT2501.URRAL = R and (RT2501.FRAME ne 3 or RT2501.GQTYPE = 901 or 903) AND (REPLACE = 1 or ((INTNMBR = 1 or NEWCU = 1) AND NEWUNIT ne
		No one home Temporarily Absent	S) then goto FM_SALES ELSEIF ((INTNMBR = 1 or _NEWCU_ = 1) and
		3. Refused	NEWUNIT ne S) then goto GQ_UNIT
		4. Other Type A -specify	ELSE goto RACETYP
			3: Goto REF_RSN 4: goto TYPEASP
COVERA GE	TYPEASP	◆ Specify other TYPE A	IF RT2501.URRAL = R and (RT2501.FRAME ne 3 or RT2501.GQTYPE = 901 or 902) AND (REPLACE = 1 or ((INTNMBR = 1 or _NEWCU_ = 1) AND NEWUNIT ne S) then goto FM_SALES
			ELSEIF ((INTNMBR = 1 or _NEWCU_ = 1) and NEWUNIT ne S) then goto GQ_UNIT
			ELSE goto RACETYP
COVERA GE	REF_RSN	◆ Enter type of refusal	1-3: IF RT2501.URRAL = R and (RT2501.FRAME ne 3 or RT2501.GQTYPE = 901 or 902) AND (REPLACE = 1

Section	CAPI Variable Name	Question Text	Skip Instructions
		Hostile Respondent Time Related Excuses Language Problems Other Refusal - specify	or ((INTNMBR = 1 or _NEWCU_ = 1) AND NEWUNIT ne S) then goto FM_SALES
			4: Goto REASON_S
COVERA GE	REASON_S	◆ Specify type of refusal	IF RT2501.URRAL = R and (RT2501.FRAME ne 3 or RT2501.GQTYPE = 901 or 902) AND (REPLACE = 1 or ((INTNMBR = 1 or _NEWCU_ = 1) AND NEWUNIT ne S) then goto FM_SALES
			ELSEIF ((INTNMBR = 1 or _NEWCU_ = 1) and NEWUNIT ne S) then goto GQ_UNIT
			ELSE goto RACETYP
COVERA GE	TYPEB	◆ Enter TYPE B noninterview	1,2,4-7: IF ((INTNMBR = 1 or _NEWCU_ = 1) and NEWUNIT ne S) then goto GQ_UNIT ELSE goto BCONTACT.BYOBS
		1. Vacant (for rent)	
		Vacant (for sale) Vacant (other)	3: Goto VACANT_S
		4. Occupied by persons with URE 5. Under construction, not ready	8,9: Goto BCONTACT.BYOBS
		 6. All persons under 16 7. Unfit or to be demolished 8. Unoccupied tent or trailer site 9. Permit granted, construction not started 10. Other Type B -specify 	10: Goto TYPEB_SP
COVERA GE	TYPEB_SP	◆ Specify other TYPE B	IF ((INTNMBR = 1 or _NEWCU_ = 1) and NEWUNIT ne S) then goto GQ_UNIT
			ELSE goto BCONTACT.BYOBS
COVERA GE	VACANT_S	 Specify type of vacant 	IF ((INTNMBR = 1 or $_$ NEWCU $_$ = 1) and NEWUNIT ne S) then goto GQ $_$ UNIT
			ELSE goto BCONTACT.BYOBS
COVERA GE	TYPEC	◆ Enter TYPE C noninterview	1,2,4-6,8-9: Goto BContact.BYOBS
		Demolished House or Mobile Home moved	3,7,10,12: Goto END_COVERAGE

Section	CAPI Variable Name	Question Text	Skip Instructions
		Converted to permanent nonresidential use	11: goto END_COVERAGE
		4. Merged with units in the same structure	10. Octo TVDEO OD
		5. Condemned	13: Goto TYPEC_SP
		6. Located on military base (post) 7. Unused serial # on listing sheet	
		8. CU moved	
		9. CU merged with another CE CU within same address	
		10. Spawned in error	
		11. Unlocatable Sample Address	
		12. Unit does not exist or Unit is out of scope	
		13. Other type C - specify	
COVERA GE	TYPEC_SP	◆ Specify other TYPE C	Goto BContact.BYOBS
COVERA	FM_SALES	During the past 12 months did sales of crops, livestock, and other farm products from this	Goto GQ_UNIT
GE		place	
		amount to \$1,000 or more?	
		1. Yes	
		2. No	
COVERA GE	GQ_UNIT	• Indicate if the unit is:	1: Goto HUTYPE
		1. In a Group Quarters	2,DK: IF FRAME ne 3 then goto DIRACC
		2. NOT in a Group Quarters	ELSE goto HUTYPE
COVERA GE	DIRACC	Indicate if access to the household is:	1: Goto HUTYPE
		1. Direct	2,DK: Goto MERGUA
		2. Through another unit	
COVERA GE	MERGUA	? [F1]	1,DK: Goto HUTYPE
		Is this a merged unit?	2: Goto CK_MERGUA
		1. Merged	
		2. Not Merged	
COVERA GE	HUTYPE	• Enter type of Housing Unit.	1-6,8,9,DK: Goto UNISTRQ
- -		1. House, apartment, flat	7,10: IF TYPEB ne 8 then goto HUTYPESP
		2. HU in non-transient hotel, motel, etc	ELSE goto UNISTRQ
		3. HU permanent in transient hotel, motel, etc.	-
		4. HU in rooming house	

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. Mobile home or trailer with no permanent room added	
		6. Mobile home or trailer with one or more permanent rooms added	
		7. HU not specified above	
		8. Quarters not HU in rooming or boarding house	
		9. Students quarters in college dormitory	
		10. Group Quarters unit not specified above	
COVERA GE	HUTYPESP	◆ Enter other type of housing unit	Goto UNISTRQ
COVERA GE	UNISTRQ	 Ask if not apparent 	IF NONTYPE = 2 (type b) then goto BYOBS ELSEIF NONTYP = 1 then goto RACETYP
<u> </u>		How many housing units, both occupied and vacant, are there in this structure?	ELSE goto END_COVERAGE
		Only Group Quarters units	
		2. Mobile home or trailer	
		3. One, detached	
		4. One, attached	
		5. 2	
		6. 3 - 4	
		7. 5 - 9	
		8. 10 - 19	
		9. 20 - 49	
		10. 50 or more	
COVERA GE	BYOBS	◆ Did you classify this unit by observation only?	Exit block and goto END_COVERAGE
		PREVIOUS OBSERVATION: (YES/NO)	2: Goto CP1NAME
		1. Yes	
		2. No	
COVERA GE	CP1NAME	Enter contact person name	Goto CP1TITL
-		Press enter if no change is needed	
		PREVIOUS NAME: (Previous Contact Persons Name)	
COVERA GE	CP1TITL	Enter contact person title	Goto PHON
		Press enter if no change is needed	
		PREVIOUS TITLE: (Title)	
		 Enter contact person phone number and extension 	goto CP1ADD1

Section	CAPI Variable Name	Question Text	Skip Instructions
GE			
		Press enter if no change is needed	
		PREVIOUS PHONE NUMBER: (Previous phone)	
		PREVIOUS EXTENSION: (Previous extension)	
COVERA GE	CP1ADD1	Enter contact person street address	Goto CP1ADD2
0 -		Press enter if no change is needed	
		PREVIOUS ADDRESS: (Previous address) (previous address - 2nd line)	
		(Previous city) (previous state) (previous zipcode) - (previous	
COVERA	CP1ADD2	zipcode extension) ◆ Enter contact person second line of address, if necessary	Goto CP1PO
GE	CITADDE	Enter contact person second line of address, if necessary	
		Press enter if no change is needed	
		PREVIOUS ADDRESS: (Previous address)	
		(previous address - 2nd line)	
		(Previous city) (previous state) (previous zipcode) - (previous zipcode extension)	
COVERA GE	CP1PO	• Enter town or city	Goto CP1ST
OL		Press enter if no change is needed	
		PREVIOUS ADDRESS: (Previous address)	
		(previous address - 2nd line)	
		(Previous city) (previous state) (previous zipcode) - (previous zipcode extension)	
COVERA	CP1ST	? [F1]	goto CP1ZIP9
GE			
		◆ Enter state	
		Press enter if no change is needed	
		PREVIOUS ADDRESS: (Previous address)	
		(previous address - 2nd line)	
		(Previous city) (previous state) (previous zipcode) - (previous zipcode extension)	
COVERA	CP1ZIP9	• Enter zipcode	exit block and goto END_COVERAGE

Section	CAPI Variable Name	Question Text	Skip Instructions
GE			·
		Press enter if no change is needed	
		PREVIOUS ADDRESS: (Previous address) (previous address - 2nd line)	
		(Previous city) (previous state) (previous zipcode) - (previous	
		zipcode extension)	
COVERA GE	RACETYP	The items below are required information for all TYPE A cases.	Goto HH_MEMQ
GE		Race code	
		Nace code	
		1. White	
		2. Black or African American	
		3. American Indian or Alaska native	
		4. Asian	
		5. Native Hawaiian6. Guamanian or Chamorro	
		7. Samoan	
		8. Other Pacific Islander	
		9. Other	
COVERA GE	HH_MEMQ	The items below are required information for all TYPE A cases.	Goto TENURE
		Number of household members:	
COVERA	TENURE	The items below are required information for all TYPE A cases.	1,2: Goto HHQSRCE
GE			-
		Tenure code	DK,RF: Goto BUILD_A
		1. Owned	
		2. Rented	
COVERA GE	BUILD_A	Which best describes this building?	Goto HHQSRCE
GE			
		1. Single family detached	
		2. Townhouse - inner unit	
		3. End row or end townhouse	
		4. Duplex	
		5. 3-plex or 4-plex	
		6. Garden	
		7. High-rise	D 47 (

Section	CAPI Variable Name	Question Text	Skip Instructions
		8. Apartment or flat	
		9. Mobile home or trailer	
CO)/EDA	LILLOCDOE	10. College dormitory	1. O. JE TVDE A (automos is 201, 204) there gots
COVERA GE	HHQSRCE	What was the source of the information for the household characteristics?	1-3: IF TYPE A (outcome is 321-324) then goto REF_SEX
GE		Characteristics?	ELSE goto END COVERAGE
		Enter all that apply, separate with commas	2232 goto 2115_00 v 2111102
		and the state of t	4: Goto HHQ_SP
		1. Observation	
		2. Neighbor	
		3. Building Manager	
		4. Other (Specify)	
COVERA GE	HHQ_SPECIFY	◆ Specify other source of information	IF Type A (outcome is 321-324) then goto REF_SEX ELSE goto END_COVERAGE
COVERA GE	REF_SEX	Provide the characteristics of the individual who refused to participate.	Goto REF_RACE
		Sex of individual	
		4 Mala	
		1. Male 2. Female	
COVERA	REF_RACE	Provide the characteristics of the individual who	Goto REF_AGED
GE		refused to participate.	000 NZ 2 1025
		Race of individual	
		1. White	
		2. Black or African American	
		American Indian or Alaska native Asian	
		5. Native Hawaiian	
		6. Guamanian or Chamorro	
		7. Samoan	
		8. Other Pacific Islander	
	DEE 4055	9. Other	O L END COVERAGE
COVERA	REF_AGED	A Dravide the characteristics of the individual who	Goto END_COVERAGE
GE		Provide the characteristics of the individual who refused to participate.	
		refused to participate.	

ection	CAPI Variable Name	Question Text	Skip Instructions
		Approximate age of individual	
		1. Under 20	
		2. 21 - 50	
		3. 51 - 74	
		4. 75 or older	
EMOGR	STLLIV	I have listed READ NAMES	Goto TUNIT1 Block - PERSTAT
PHICS		^These_this (person/people) still living or staying here?	
		(This case is part of a Multi-CU address. There are (number) CU's for this address)	
		(Lis tof persons in the household)	
		1. Yes	
EMOGR	PERSTAT	2. No ◆ (Use up/down arrows to move to the correct row for membership change. When done,	
		▼ TUSE HD/00WD arrows to move to the correct row for membership change. When done	
PHICS	LIGIAI	REVIEW/Update demographics. Press END key./Use left/right arrows to	
	TEROTAL	REVIEW/Update demographics. Press END key./Use left/right arrows to	
	TEROTAL	REVIEW/Update demographics. Press END key./Use left/right arrows to 7. Delete person	
	TEROTAL	REVIEW/Update demographics. Press END key./Use left/right arrows to 7. Delete person 8. CU member deceased	
	TEROTAL	REVIEW/Update demographics. Press END key./Use left/right arrows to 7. Delete person	
	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person	16 characters: Goto LNAME
PHICS		7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?)	16 characters: Goto LNAME 999: exit block and goto CHECKS
PHICS EMOGR PHICS	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) • Enter 999 if no more persons.	999: exit block and goto CHECKS
PHICS		7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?)	
EMOGR PHICS EMOGR PHICS EMOGR	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) • Enter 999 if no more persons.	999: exit block and goto CHECKS
PHICS EMOGR PHICS EMOGR PHICS	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) • Enter 999 if no more persons. • Enter Last Name	999: exit block and goto CHECKS Goto CU_CODE
EMOGR PHICS EMOGR PHICS EMOGR	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) * Enter 999 if no more persons. * Enter Last Name * Ask if not apparent What is (your/NAME's) relationship to (you/the owner/renter/name of reference person)? * If this is the Reference Person, enter 1	999: exit block and goto CHECKS Goto CU_CODE
EMOGR PHICS EMOGR PHICS EMOGR	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) ◆ Enter 999 if no more persons. ◆ Enter Last Name ◆ Ask if not apparent What is (your/NAME's) relationship to (you/the owner/renter/name of reference person)?	999: exit block and goto CHECKS Goto CU_CODE
EMOGR PHICS EMOGR PHICS EMOGR	FNAME	7. Delete person 8. CU member deceased 9. Reinstate person 99. Error - Person should not have been listed (What is the name of the next person living or staying here?/What are the names of all persons living or staying here?) * Enter 999 if no more persons. * Enter Last Name * Ask if not apparent What is (your/NAME's) relationship to (you/the owner/renter/name of reference person)? * If this is the Reference Person, enter 1	999: exit block and goto CHECKS Goto CU_CODE

Section	CAPI Variable Name	Question Text	Skip Instructions
		3. Child or adopted child	
		4. Grandchild	
		5. In-Law	
		6. Brother or Sister	
		7. Mother or Father	
		8. Other related person (Aunt, Uncle, etc.)	
		9. Unrelated Person (Lodger, Lodger's spouse, foster child, etc.)	
		10. Unmarried Partner	
DEMOGR APHICS	SEX	◆ Ask if not apparent	1,DK,RF: Goto AWAY_COL
		Is ^NAME male or female?	2: goto AWAY_COL
		1. Male	
		2. Female	
DEMOGR APHICS	AWAY_COL	◆ Ask if not apparent	1: IF CU_CODE = 1 then goto CK_AWAYCOL ELSE goto HH MEM
		Is ^NAME living away at college?	
			2,DK,RF,EMPTY: Goto HH_MEM
		1. Yes 2. No	
DEMOGR APHICS	HH_MEM	Does ^NAME usually live here?	1,DK,RF,EMPTY: Goto next line of grid
711 711 00		 Probe if usual place of residence is elsewhere. 	2: goto next line of grid
		1. Yes	
		2. No	
DEMOGR APHICS	HHRESP	◆ Ask if necessary	IF ((INTNMBR = 1 or NEWCU = 1) and NEWUNIT ne 5) OR REPLACE = 1 AND NROSIZE less than 30 then
		With whom am I speaking?	goto MLIVE
		Enter line number	ELSEIF ((INTNMBR = 1 or NEWCU = 1) and NEWUNIT ne 5) OR REPLACE = 1 AND NROSIZE eq 30 then exit
		1 NAME[1]	block and goto BSUBFAMILY, BSFMAKEUP or TUNIT2
		1. NAME[1] 2. NAME[2]	as appropriate
		3. NAME[3]	ELSE goto NEWLIV
		4. NAME[4]	LLOL GOLO INLVVLIV
		5. NAME[5]	
		5. TV UVICE[5]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		6. NAME[6]	
		7. NAME[7]	
		8. NAME[8]	
		9. NAME[9]	
		10. NAME[10]	
		11. NAME[11]	
		12. NAME[12]	
		13. NAME[13]	
		14. NAME[14]	
		15. NAME[15]	
		16. NAME[16]	
		17. NAME[17]	
		18. NAME[18]	
		19. NAME[19]	
		20. NAME[20]	
		21. NAME[21]	
		22. NAME[22] 23. NAME[23]	
		24. NAME[24]	
		25. NAME[25]	
		26. NAME[26]	
		27. NAME[27]	
		28. NAME[28]	
		29. NAME[29]	
		30. NAME[30]	
		95. Proxy Respondent	
DEMOGR	MLIVE	So I have listed (Number of people in the household) (person/people) living or staying here	1: Go back to where FNAME = 999
APHICS		now.	
			2,DK,RF: Exit block and goto BSUBFAMILY,
		(Lis tof persons in the household)	BSFMAKEUP or TUNIT2 as appropriate
		Is there anyone else living or staying here now - any babies, small children, non-relatives or anyone else?	
		 Please verify that the information on this screen is correct. 	
		1. Yes	
		2. No	
DEMOGR APHICS	NEWLIV	Is anyone else living or staying here, including newborn babies?	1: Go back to where FNAME = 999
APHICS		(Lis tof persons in the household)	2: Exit block and goto BSUBFAMILY, BSFMAKEUP

ection	CAPI Variable Name	Question Text	Skip Instructions
			or TUNIT2 as appropriate
		1. Yes, add new person 2. No	
DEMOGR APHICS	SUBFAM1	Earlier you said that ^NAME was not related to (Name of reference person). Is ^NAME related to anyone else in this household?	1: Goto SUBFAM22: IF no more non-rels then goto SET_SUBFAMS
		•	ELSE goto SUBFAM1 for next unassigned non-rel
		1. Yes 2. No	
EMOGR PHICS	SUBFAM2	Who is ^NAME related to?	IF no more non-rels then goto SET_SUBFAMS
		◆ PROBE: Anyone else?	ELSE goto SUBFAM, for next unassigned non-rel
		Enter line number(s), separate with commas	
		1. ^NAME[1]	
		2. ^NAME[2] 3. ^NAME[3]	
		4. ^NAME[4]	
		5. ^NAME[5] 6. ^NAME[6]	
		7. ^NAME[7]	
		8. ^NAME[8] 9. ^NAME[9]	
		10. ^NAME[10]	
		11. ^NAME[11]	
		12. ^NAME[12] 13. ^NAME[13]	
		14. ^NAME[14]	
		15. ^NAME[15]	
		16. ^NAME[16] 17. ^NAME[17]	
		18. ^NAME[18]	
		19. ^NAME[19] 20. ^NAME[20]	
		21. ^NAME[21]	
		22. ^NAME[22]	
		23. ^NAME[23] 24. ^NAME[24]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		25. ^NAME[25]	
		26. ^NAME[26]	
		27. ^NAME[27]	
		28. ^NAME[28]	
		29. ^NAME[29] 30. ^NAME[30]	
DEMOGR	SHELTX	(Begin financial responsibility questions to determine CU's)	Goto FOODX
APHICS	SHELIX	(Degin infancial responsibility questions to determine CO's)	COIO I CODA
711 11100		(Do/Does) (READ NAMES) pay for all ^yourhishertheir housing	
		expenses with ^yourhishertheir own money?	
		(subfamily names)	
		1. Yes	
		2. No	
DEMOGR	FOODX	(Do/Does) (READ NAMES) pay for all (your/his/her/their) food	1: IF SHELTX = 1 and there are no more subfams then
APHICS		expenses with (your/his/her/their) own money?	goto UPDATE_SUBFAM
			ELSEIF SHELTX = 1 then goto SHELTX for next
		(subfamily names)	subfam
			ELSE goto OTHERX
		1. Yes	2,DK,RF: Goto OTHERX
		2. No	ZIBRITT. GOLG OTTLETON
DEMOGR	OTHERX	(Do/Does) (READ NAMES) pay for all (your/his/her/their) other	1: IF SHELTX = 1 OR FOODX = 1 AND there are no
APHICS		living expenses such as clothing, transportation,	more subfamiles then goto UPDATE_SUBFAM
		etc., with (your/his/her/their) own money?	ELSEIF SHELTX = 1 OR FOODX = 1 then goto
			SHELTX for next subfamily
		(subfamily names)	ELSE goto SUPSRC
			2,DK,RF: Goto SUPSRC
		1. Yes	2,013,111. 3010 301 3110
		2. No	
DEMOGR	SUPSRC	Does all or part of the money to pay for	1: Goto SUPRT1
APHICS		(READ NAMES) ^description come from someone	
		in this household?	2,DK,RF: IF no more subfamilies then goto
			UPDATE_SUBFAM
		(subfamily names)	ELSE goto SHELTX for next subfamily
		1. Yes	
		2. No	
			

Section	CAPI Variable Name	Question Text	Skip Instructions
DEMOGR	SUPRT1	Who is that person(s)?	IF no more subfamilies then goto UPDATE_SUBFAM
APHICS		◆ Enter line number(s), separate with commas	ELSE goto SHELTX for next subfamily
		1. ^NAME[1]	
		2. ^NAME[2]	
		3. ^NAME[3] 4. ^NAME[4]	
		5. ^NAME[5]	
		6. ^NAME[6]	
		7. ^NAME[7]	
		8. ^NAME[8] 9. ^NAME[9]	
		10. ^NAME[10]	
		11. ^NAME[11]	
		12. ^NAME[12]	
		13. ^NAME[13] 14. ^NAME[14]	
		15. ^NAME[15]	
		16. ^NAME[16]	
		17. ^NAME[17]	
		18. ^NAME[18]	
		19. ^NAME[19] 20. ^NAME[20]	
		21. ^NAME[21]	
		22. ^NAME[22]	
		23. ^NAME[23]	
		24. ^NAME[24] 25. ^NAME[25]	
		26. ^NAME[26]	
		27. ^NAME[27]	
		28. ^NAME[28]	
		29. ^NAME[29] 30. ^NAME[30]	
DEMOGR APHICS	CONSUMER_UNITS	◆ HOUSEHOLD MEMBERS BROKEN INTO APPROPRIATE CU'S	Goto CU_INTRO
		(List CU#, Line number, and name)	
		1. Enter 1 to Continue	
DEMOGR APHICS	CU_INTRO	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	Goto TUNIT2 block

Section	CAPI Variable Name	Question Text	Skip Instructions
		expenses.	
		◆ A "household" is considered one Consumer Unit	
		The (person/ persons) I'm including in your household (are/is) (READ NAME(S))	
		(Names of Cu members)	
		1. Enter 1 to Continue	
DEMOGR APHICS	AGE1	As of today, how old (are/is) (You/NAME)?	DK,RF: Goto AGE2
APHICS			0-109: IF AGE = 13,15,61 or 64 then goto AGESPEC ELSE goto HORIGIN
			110-200: Goto CK_AGE1
DEMOGR APHICS	AGESPEC	Some questions are only asked for household members of a certain age.	IF before current month and year then goto VERIFY_AGE
7.11.100		In what month and year will (You/NAME) be (14/16/62/65) years old?	_
			ELSE goto HORIGIN
		• Enter month and year when household member will turn (14/16/62/65)	
DEMOGR APHICS	AGE2	• Ask if necessary	Goto HORIGIN
AFFIICS		(Are/Is) (you/he/she) under 16?	
		1. Yes	
DEMOGR	HORIGIN	2. No 2	1: Goto HISPANIC
APHICS	HURIGIN		1. GOLO HISPANIC
		(Are/Is) (You/NAME) Hispanic, Latino, or Spanish?	2,DK,RF: Goto MULTRACE
		1. Yes	
		2. No	
DEMOGR APHICS	HISPANIC	□ 2	1-5,DK,RF: Goto MULTRACE
		(Are/Is) (You/NAME) -	6: Goto HISPOTH

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Examples of "other" include - Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran,	
		Spaniard	
		1. Mexican?	
		2. Mexican-American?	
		3. Chicano?	
		4. Puerto Rican?	
		5. Cuban?6. Other (Specify)	
DEMOGR	HISPOTH	◆ Specify:	Goto MULTRACE
APHICS	11101 0111	Specify.	COLO MOETTO CE
DEMOGR APHICS	MULTRACE	Q 2	1-3,5,8,10,RF: IF AGE ge 14 OR AGERNG = 8 or 9 then goto MARITAL
		What is (your/NAME's) race?	ELSE goto Next Person
		◆ Probe if necessary	4: Goto ASIAN
		• Enter all that apply, separate with commas	9: Goto RACESP
		Examples of "Other Pacific Islander" include - Fijian, Tongan	
		1. White	
		2. Black or African American	
		American Indian or Alaska native Asian	
		5. Native Hawaiian	
		6. Guamanian or Chamorro	
		7. Samoan	
		8. Other Pacific Islander	
		9. Other Specify	
DEMOSE	ACIANI	10. Don't Know	1.0 DV DE. JE ACE *** 14.0 D (ACEDNO
DEMOGR APHICS	ASIAN	□ 2	1-6,DK,RF: IF AGE ge 14 OR (AGERNG = 8 or 9) then goto MARITAL ELSE goto Next Person
		(Aralla) (VaulNAME)	ELSE YOLU NEXL PEISUII
		(Are/Is) (You/NAME) -	7: Goto ASIANOTH
		◆ Examples of "other" include - Hmong, Laotian, Thai, Pakistani, Cambodian	2

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Chinese?	
		2. Filipino?	
		3. Japanese?	
		4. Korean?	
		5. Vietnamese?	
		6. Asian Indian?	
		7. Other (Specify)	
DEMOGR	ASIANOTH	◆ Specify:	IF AGE ge 14 OR (AGERNG = 8 or 9) then goto
APHICS			MARITAL
	D.4.050D		ELSE goto Next Person
DEMOGR	RACESP	◆ Specify other race	IF AGE ge 14 OR (AGERNG = 8 or 9) then goto
APHICS			MARITAL
DEMOCE	MADITAL	A Ack if not apparent	ELSE goto Next Person
DEMOGR APHICS	MARITAL	• Ask if not apparent	IF AGE ge 14 or (AGERNG = 8 or 9) then goto EDUCA ELSE goto BIRTH_MO for next member
APHICS		(Are/Is) ^YOUNAME -	ELSE goto bik i h_wo for flext filefiliber
		(AIE/IS) AT CONAMIE -	
		1 Marriad2	
		1. Married?	
		2. Widowed? 3. Divorced?	
		4. Separated?	
		5. Never married?	
DEMOGR	EDUCA	3. Never marieu:	1-3,DK,RF: IF AGE = 16-65 or (AGERNG = 8 or 9) then
APHICS	LDUCA		goto ARM_FORC
Al Tiles		What is the highest level of school (you have) (Name) has a completed or the highest degree	ELSE goto next member
		What is the highest level of school (you have/ (Name) has) completed or the highest degree (you have/ (Name) has) received?	ELGE goto flext member
		(you have (Name) has) received?	4-8: Goto IN_COLL
			10. 000 114_0022
		1. No schooling completed, or less than 1 year	
		2. Nursery, kindergarten, and elementary (grades 1-8)	
		3. High school (grades 9-12, no degree)	
		4. High school graduate - high school diploma or the equivalent (GED)	
		5. Some college but no degree	
		6. Associate's degree in college	
		7. Bachelor's degree (BA, AB, BS, etc.)	
		8. Master's, professional, or doctorate degree (MA, MS, MBA, MD, JD, PhD, etc.)	
DEMOGR APHICS	IN_COLL	(Are/Is) (You/NAME) currently enrolled in a college or university either -	IF AGE = 16-65 or (AGERNG = 8 or 9) then goto ARM_FORC

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSE goto next member
		1. Full-time?	
		2. Part-time?	
		3. Not at all?	
DEMOGR APHICS	ARM_FORC	□ 3 ? [F1]	IF this is the last person then goto CHECKS2 ELSE goto the next person
		(Are/Is) (You/NAME) now in the Armed Forces?	
		1. Yes 2. No	
DEMOGR APHICS	DEBT40	After completing the last interview in (reference month), we gave you the PIN for a \$40 debit card. Did you have any problems using that card?	IF (DEBT40[1]=0, 1, 2 or 9) and (DEBT40[2] = 0-11 then goto CK_DEBT40
		• Enter all that apply, separate with commas	ELSEIF ANY DEBT40[2-8] = 0, 1, 2 or 9 then goto CK_DEBT40
		0. No problems	
		1. Have not received the card	ELSEIF 10 selected then goto DEBT40SP
		2. Have not used the card	
		3. ATM did not accept the debit card	ELSEIF 8500.PIN_FLAG = 1 then goto DEBT20
		4. Store did not accept the debit card	
		5. Forgot PIN	ELSE goto CEINTRO
		6. PIN did not work	
		7. Instructions were not clear	
		8. Instructions were lost	
		9. Lost or misplaced debit card	
		10. Other - specify	
		11. Don't know	
DEMOGR APHICS	DEBT40SP	◆ Specify	IF 8500.PIN_FLAG = 1 then goto DEBT20
			ELSE goto CEINTRO
DEMOGR	DEBT20	After the last interview in (reference month), we sent you a debit card for \$20. Did you have	IF (DEBT20[1]=0, 1, 2 or 9) and (DEBT20[2] = 0-11
APHICS		any problems using that card?	then goto CK_DEBT20
		• Enter all that apply, separate with commas	ELSEIF ANY DEBT20[2-8] = 0, 1, 2 or 9 then goto CK_DEBT20
		0. No problems	OK_525120
		Have not received the card	ELSEIF 10 selected then goto DEBT20SP
		2. Have not used the card	2202 10 00100100 thom gott DED 12001
		3. ATM did not accept the debit card	ELSEIF 1 or 9 is selected then goto NOTRCV20
		4. Store did not accept the debit card	222 2 0. 0 10 00100100 thorr goto 140 1100 V20
		To Otoro and not accept the acout cara	

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. Forgot PIN	ELSE goto CEINTRO
		6. PIN did not work	
		7. Instructions were not clear	
		8. Instructions were lost	
		9. Lost or misplaced debit card	
		10. Other - specify	
DEMOGR	DEBT20SP	11. Don't know ◆ Specify	Goto CEINTRO
APHICS	DEDIZUSP	▼ Specify	GOIO CEINTRO
DEMOGR	NOTRCV20	I'm sorry that (the original debit card we sent you was misplaced/you have not received the	Goto RCRDNM20
APHICS	1101110120	card). We will send you a replacement card in the amount of \$20 as soon as possible. If the	0010 NONDIAM20
7.1.1.00		original card (arrives/is found), please destroy it since we will be deactivating it.	
		1. Enter 1 to Continue	
DEMOGR	RCRDNM20	Who would you like the replacement card addressed to?	Goto CEINTRO
APHICS		, , , , , , , , , , , , , , , , , , ,	
DEMOGR	CE_INTRO	As we start, please understand that we ask the same topics of everybody we talk to. I	Goto BUSCREEN
APHICS		realize some of these questions may not apply to your household.	
		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	
		past three months, that is, from the 1st day of (reference month) to today.	
		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.	
		(Please do not include any purchases made with the debit (card/cards) we have sent you.)	
		1. Enter 1 to Continue	
DEMOGR	BUSCREEN	Since the first of (reference month), have (you/you or any members of your household) had	1,DK,RF: Goto BUSXPNSE
APHICS		any expenses that will be reimbursed or deducted as business expenses?	
			2: Exit block and goto BSECT01
		1. Yes	
		2. No	- 211 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
DEMOGR	BUSXPNSE	For certain topics, such as housing, utilities, or vehicles, I will ask you to estimate how	Exit block and goto BSECT01
APHICS		much of the expense was or will be deducted as a business expense.	
		1. Enter 1 to Continue	
01B	ST HOUS	◆ Ask if not apparent.	IF COVERAGE.UNISTRQ = 2 or 3 OR (8500.UNISTRQ
		• •	, ,

Section	CAPI Variable Name	Question Text	Skip Instructions
		Are these living quarters presently used as student housing by a college or university?	= 2 or 3) then goto ROOMSQ
			ELSE goto BUILDING
		1. Yes 2. No	
01B	BUILDING	🚇 4 ? [F1]	1-9,DK,RF: Goto ROOMSQ
		 Ask if not apparent by observation 	10: goto S1B_END
		Which best describes this building?	11: Goto BUILDOTH
		 Single family detached Row or townhouse - inner unit End row or end townhouse Duplex 3-plex or 4-plex Garden High-rise Apartment or flat Mobile home or trailer College dormitory Other - Specify 	
01B	BUILDOTH	• Specify:	Goto ROOMSQ
01B	ROOMSQ	How many ROOMS are there in this unit, including all finished living areas and excluding all bathrooms?	1-30,DK,RF: Goto BEDROOMQ 31-99: Goto ERR1_ROOMSQ
01B	BEDROOMQ	How many BEDROOMS are there in this unit?	Goto BATHRMQ
		 Count all rooms used mainly for sleeping, even if also used for other purposes. 	
01B	BATHRMQ	How many COMPLETE bathrooms are there in this unit?	Goto HLFBATHQ
		 A complete bathroom has a toilet, a bathtub or shower, and a sink, all with running water. 	
01B	HLFBATHQ	How many HALF bathrooms are there in this unit?	Goto S1B_END
		 A half bathroom has at least a toilet or bathtub or shower, but does not have all the facilities of a complete bathroom. 	

Section	CAPI Variable Name	Question Text	Skip Instructions
)2	STLRENT	Last time (you/your household) reported renting these living quarters. Do you still rent?	1,DK,RF: Goto RENTED
		Do you our rone.	2: Goto RTASPAY
		1. Yes	3: IF 8500.UNITFEAT = EMPTY then goto
		2. No	UNITFEAT
		3. No -Buying the sample unit	ELSEIF 8500.YRBUILT = EMPTY then goto YRBUILT
10	OWNED	De vers aver this have 0	ELSE exit block and goto Section 3
)2	OWNED	Do you own this home?	 IF 8500.UNITFEAT = EMPTY then goto UNITFEAT
		 Include households with mortgages as owners. 	ELSEIF 8500.YRBUILT = EMPTY then goto
		Include flousefloids with flortgages as owners.	YRBUILT
			ELSE exit block and goto Section 3
		1. Yes	ELOE CAR BIOOK and goto occitor o
		2. No	2,DK,RF: Goto PUBLHOUS
)2	UNITFEAT	□ 6 ? [F1]	IF 8500.YRBUILT = EMPTY then goto YRBUILT ELSE exit block and goto Section 3
		Does this unit have any of the following?	G
		• Enter all that apply, separate with commas	
		0. None	
		1. Swimming Pool	
		2. Off Street Parking	
		3. Porch, terrace, patio, or balcony	
		4. Apartment or guest house	
		5. Central air conditioning	
		6. Window air conditioning	
		77. Don't know	
)2	YRBUILT	About when was this building originally built?	Goto Section 3
		Do not consider later remodelings	
<u> </u>	DUDI LIQUIO	Probe for best estimate	4. IF OFCO INICI DRIVE. FMPTVIII.
)2	PUBLHOUS	◆ Ask if not apparent.	 IF 8500.INCLDRYR = EMPTY then goto INCLSTOV
		Is this house in a public housing project, that is, is it owned by	
		a local housing authority or other local public agency?	ELSE goto RENTED
			2,DK,RF: Goto GOVTCOST

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
02	GOVTCOST	Are your housing costs lower because the Federal, State, or local	IF 8500.INCLDRYR = EMPTY then goto INCLSTOV
		government is paying part of the cost?	•
			ELSE goto RENTED
		1. Yes	
02	INCLSTOV	2. No	Goto INCLFRIG
02	INCLSTOV	□ 5 ? [F1]	GOIO INCLERIG
		Were any of the following appliances included in the home when you moved in \dots	
		Cooking stove, range, or oven?	
		1. Yes	
		2. No	
02	INCLFRIG	□ 5 ? [F1]	Goto INCLBDSH
		Were any of the following appliances included in the home when you moved in	
		Refrigerator or home freezer?	
		1. Yes 2. No	
02	INCLBDSH	□ 5 ? [F1]	Goto INCLPDSH
		Were any of the following appliances included in the home when you moved in	
		Built-in dishwasher?	
		1. Yes	
		2. No	
02	INCLPDSH	□ 5 ? [F1]	Goto INCLWSHR
		Were any of the following appliances included in the home when you moved in	
		Portable dishwasher?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
02	INCLWSHR	□ 5 ? [F1]	Goto INCLDRYR
		Were any of the following appliances included in the home when you moved in	
		Clothes washer?	
		1. Yes 2. No	
02	INCLDRYR	□ 5 ? [F1]	Goto RENTED
		Were any of the following appliances included in the home when you moved in	
		Clothes dryer?	
		1. Yes 2. No	
02	RENTED	Do (you/you or any members of your household) (still/) pay rent for these living quarters?	1,DK,RF: Goto RENTX1
			2: Goto RTASPAY
		1. Yes 2. No	
02	MORERENT	Since the first of (reference month) have (you/you or any members of your household) rented any houses, apartments, or temporary living quarters NOT used entirely for	1: Goto RENTX1
		business or vacation?	2,DK,RF: Goto S2_END
		Do NOT include college or university regulated housing.	
		1. Yes 2. No	
02	RENTX1	What was your total rental payment for (reference month) for this unit? Include any extra charges for garage or parking facilities, but do not include direct payments by local, state or federal agencies.	Goto RENTX2
02	RENTX2	What was the total rental payment for (month) for this unit?	Goto RENTX3
		· · · · · · · · · · · · · · · · · · ·	

Section	CAPI Variable Name	Question Text	Skip Instructions
02	RENTX3	What was your total rental payment for (last month) for this unit?	Goto RTELECT
02	RTELECT	₽ 5	Goto RTGAS
		Does the rental payment include the cost of -	
		Electricity?	
		1. Yes	
		2. No	
02	RTGAS	₽ 5	Goto RTWATER
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Gas?	
		1. Yes	
02	RTWATER	2. No S	Goto RTHEAT
UZ	KIWAIEK		GUIO RITIEAT
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Piped in water?	
		1. Yes	
02	RTHEAT	2. No S	Goto RTTRASH
02	1(111 L) (1		
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Heating?	
			
		1 Voc	
		1. Yes 2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
02	RTTRASH	₽ 5	Goto RTPARK
		A Deposit if recognity	
		 Repeat if necessary Does the rental payment include the cost of - 	
		Does the rental payment include the cost of -	
		Trash/garbage collection?	
		1. Yes	
		2. No	
02	RTPARK	Q 5	Goto RTTELEPH
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Garage and parking facilities?	
		1. Yes	
		2. No	
02	RTTELEPH	Q 5	Goto RTTVCABL
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Telephone services?	
		1. Yes	
		2. No	
02	RTTVCABL	₽ 5	Goto RTINTRNT
		A =	
		Repeat if necessary	
		Does the rental payment include the cost of -	
		Television services?	
		1. Yes	
		2. No	
02	RTINTRNT	₽ 5	Goto RTFUNSH

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Internet services?	
		1. Yes	
		2. No	
02	RTFUNSH	□ 5	Goto RTASPAY
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Furniture?	
		1. Yes	
		2. No	
02	RTASPAY	Did (you/you or any members of your household) receive any reduced or free rent for this unit as a form of pay since the first of (reference month)?	1: Goto RTCOMPX
		(1111)	2,DK,RF: IF BCeintro.BUSCREEN = 2 AND
			(PSU=06001, 06013, 06037, 06041, 06059, 06065,
		1. Yes	06071, 06081, 06073, 06075, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017, 34023, 34027,
		2. No	34031, 34037, 36005, 36047, 36059, 36061, 36081,
			36085, 36087, 36103, 36119) go to RENTCONT
			ELSEIF BCeintro.BUSCREEN = 2 goto
			MORERNT
			ELGE water DEDONG
02	RTCOMPX	What is the current monthly rental charge to another tenant for a similar unit?	ELSE goto RTBSNS Goto REGRNTX
02	REGRNTX	What is your regular rental payment?	0-999999: IF BCeintro.BUSCREEN = 2 AND
02	TLOTHITY.	Time to your rogular roman paymont.	(PSU=06001, 06013, 06037, 06041, 06059, 06065,
			06071, 06081, 06073, 06075, 06087, 06097, 11001,
			24021, 24043, 34003, 34013, 34017, 34023, 34027,
			34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103, 36119) go to RENTCONT
			ELSEIF BCeintro.BUSCREEN = 2 goto
			MORERENT
			ELSE goto RTBSNS

Section	CAPI Variable Name	Question Text	Skip Instructions
			DK,RF: IF BCeintro.BUSCREEN = 2 AND (PSU=06001, 06013, 06037, 06041, 06059, 06065, 06071, 06081, 06073, 06075, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017, 34023, 34027, 34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103, 36119) go to RENTCONT ELSEIF BCeintro.BUSCREEN = 2 goto MORERENT ELSE goto RTBSNS
02	RTBSNS	Is any portion of this unit used for your own business?	1: Goto RTBSNSZ
		1. Yes 2. No	2: IF (PSU = 06001, 06013, 06037, 06041, 06059, 06065, 06071, 06073, 06075, 06081, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017,34023, 34027, 34031, 34037, 36005, 36047,36059, 36061, 36081, 36085, 36087, 36103, 36119) goto RENTCONT ELSE goto MORERNT
			DK,RF: IF (PSU = 06001, 06013, 06037, 06041, 06059, 06065, 06071, 06073, 06075, 06081, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017,34023, 34027, 34031, 34037, 36005, 36047,36059, 36061, 36081, 36085, 36087, 36103, 36119) goto RENTCONT ELSE goto MORERNT
02	RTBSNSZ	What percent of the rental payment is counted as a business expense? • Enter to the nearest whole percent.	IF (PSU = 06001, 06013, 06037, 06041, 06059, 06065, 06071, 06073, 06075, 06081, 06087, 06097, 11001, 24021, 24043, 34003, 34013, 34017, 34023, 34027, 34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103,36119), goto RENTCONT ELSE goto MORERNT
02	RENTCONT	Is this unit under rent control?	Goto MORERNT
		1. Yes 2. No	
02	MORERNT	Since the first of (reference month), have (you/you or any members of your household) rented any other houses, apartments, or temporary living quarters NOT used entirely for business or vacation?	1: Goto RENTX1 2,DK,RF: Goto S2_END

Section	CAPI Variable Name	Question Text	Skip Instructions
		Do NOT include college or university regulated housing.	
		1. Yes	
0040	CO INITRO	2. No	IE INTAINADD OF AND NEWOLL & 4 there were
03A2	S3_INTRO	(Now I am going to update the information you provided in the last interview for owned living quarters and other owned real estate./Now I am going to	IF INTNMBR = 2-5 AND NEWCU <> 1 then goto BSect3A1
		Done WD and defend IT was IV Morelly LOUIS LIVE OUT	EL 0E 1111 BO 11040
		Prop # Description Type # Mort # LSHEL # LCHEL	ELSE goto BSect3A2
		1. Enter 1 to Continue	
03A1	STILOWN	(Do/Does) (you/your household) still own your (property description)?	1,DK,RF: IF 8500.OWNYB = 600 then exit block and goto BSECT3I.VAC_RNTQ
		Prop # Description Type # Mort # LSHEL # LCHEL	ELSEIF BCeintro.BUSCREEN = 2 AND (there
			are previously reported loans with 8500.LOANTYPE =
		1. Yes	1, 2 AND 8500.OPF_STAT = 1) then exit block and goto
		2. No	BMCHANGE.Mchange ELSEIF BCeintro.BUSCREEN = 2 AND
			8500.HWMNYLOC >= 1 then exit block and goto
			THomeEquity.PDLOAN2
			ELSEIF BCeintro.BUSCREEN = 2 exit block and
			goto TAddMort.ADDMORT
			ELSE goto BSNSEXPA
			2: IF 8500.OWNYB = 600 then exit block and goto
			PURPROP
			ELSEIF BCeintro.BUSCREEN = 2 AND (there are previously reported loans with 8500.LOANTYPE =
			1, 2 AND 8500.OPF STAT = 1) then exit block and goto
			BMCHANGE.Mchange
			ELSEIF BCeintro.BUSCREEN = 2 AND
			8500.HWMNYLOC >= then exit block and goto
			THomeEquity.PDLOAN2 ELSEIF BCeintro.BUSCREEN = 2 exit block and
			goto TAddMort.ADDMORT
			ELSE goto BSNSEXPA
03A1	BSNSEXPA	(Are/Were) any of the expenses for this property deducted	1: Goto OBSNSZBA
		as a farm, rental, or business expense?	2,DK,RF: IF there are previously reported loans with
		Prop # Description Type # Mort # LSHEL # LCHEL	8500.LOANTYPE = 1, 2 AND 8500.OPF STAT = 1 then
			exit block and goto BMCHANGE.Mchange

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeEquity.PDLOAN2 ELSE exit block and goto TAddMort.ADDMORT
03A1	OBSNSZBA	What percent of the expenses for this property (is/was) deducted? Include the portion used for business, farming, or rented to someone outside the household. Prop # Description Type # Mort # LSHEL # LCHEL	1-99,DK,RF: IF there are previously reported loans with 8500.LOANTYP = 1, 2 AND 8500.OPF_STAT = 1 then exit block and goto BMCHANGE.Mchange ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeEquity.PDLOAN2 ELSE exit block and goto TAddMort.ADDMORT
			100: Goto ERR2_OBSNSZBA
03A1	MCHANGE	^MCHANGE_FILL	1: Goto MORTCHNG
		1. Yes 2. No	2,DK,RF: IF 8500.Fixedrte = 2, DK or RF then goto PYMTJX1 ELSEIF 8500.FIXEDRTE = 1 and there are more loans for this property with 8500.OPF_STAT = 1 then goto MCHANGE for the next loan ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeequity.PDLOAN2 ELSE exit block and goto TAddmort.ADDMORT
03A1	MORTCHNG	What was the reason for the change in your (mortgage/lump sum home equity loan) for your (property description)?	1,4: Goto PYRINIJ 2: Goto NEWMRRTJ 3: Goto MORTCHMO
		 Change in escrow payment (include changes in property taxes, insurance) Change in interest rate Paid off Change in amount of the graduated payment for a graduated payment ^MORTGAGE_LUMPSUM ^MORTGAGE_LUMPSUM_C renegotiated (rollover or renegotiable ^MORTGAGE_LUMPSUM) Refinanced ^MORTGAGE_LUMPSUM (this includes changing the term of the ^MORTGAGE_LUMPSUM) Paid less than the required amount Other reasons More than one of the above 	5,6,8,9,DK,RF: Goto ORWHAT 7: Goto PYMTJX1
03A1	ORWHAT	Is this a 30-year (mortgage/lump sum home equity loan), a 15-year (mortgage/lump sum home equity loan), or something else?	1,2,DK,RF: Goto FIXEDRTJ
		1. 30-year	3: Goto MRTTERMJ

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. 15-year	
0241	MRTTERMJ	3. Something else	Goto FIXEDRTJ
03A1		• Enter number of years.	
03A1	FIXEDRTJ	Is this a fixed rate (mortgage/lump sum home equity loan)?	1: Goto ORGMRTJX
		1. Yes 2. No	2,DK,RF: Goto PAYTYPJ
03A1	PAYTYPJ	? [F1]	IF 3 selected then goto PAYTOTHJ
		There are many different kinds of (mortgages/lump sum home equity loans). Which one of these comes closest to (yours/ your household's)?	ELSE goto ORGMRTJX
		 Read each item on list. Mark all that apply, separate with commas. 	
		 Variable or adjustable rate of interest (ARM) Interest only Other - Specify 	
03A1	PAYTOTHJ	◆ Specify:	Goto ORGMRTJX
03A1	ORGMRTJX	What was the amount of the (mortgage/lump sum home equity loan) when (you/your household) first obtained it, not including any interest?	Goto NEWMRRTJ
03A1	NEWMRRTJ	?[F1]	Goto PYRINIJ
		What is the current interest rate for this (mortgage/lump sum home equity loan)?	
		• Enter percent including decimal	
03A1	PYRINIJ	7 ? [F1] On (your/your household's) last regular payment, which of these things	1-5,77: IF 8500.FIXEDRTE = 2,DK or RF or FIXEDRTJ = 2,DK or RF then goto MORTCHMO ELSE goto MRTPMTJX
		were included?	C. Cata DVIOTH
		A = 1 Hall 1 Hall 2 Hal	6: Goto PYJOTH
		Enter all that apply, separate with commas1. Principal2. Interest	RF: IF 8500.FIXEDRTE = 2,DK or RF or FIXEDRTJ = 2,DK or RF then goto MORTCHMO
		3. Property taxes4. Property insurance5. Mortgage guarantee insurance (PMI)6. Any other payments - specify	ELSE goto MRTPMTJX
		77. Don't know	

Section	CAPI Variable Name	Question Text	Skip Instructions
03A1	PYJOTH	• Specify:	IF (8500.FIXEDRTE = 2, DK or RF) or (FIXEDRTJ = 2, DK or RF) then goto MORTCHMO
			ELSE goto MRTPMTJX
03A1	MRTPMTJX	How much is (your/your household's) (mortgage/lump sum home equity loan) payment per month?	IIF any codes 3 - 6 are selected in PYRINIJ then goto PRININJX
			ELSE goto MORTCHMO
03A1	PRININJX	How much of that amount is for (principal / interest/principal and interest)?	Goto MORTCHMO
03A1	MORTCHMO	In what month did (you pay off your (mortgage/lump sum home equity loan)/your (mortgage/lump sum home equity loan) change)?	IF (FIXEDRTJ = 2, DK or RF) or (FIXEDRTJ ne 1 AND 8500.FIXEDRTE = 2, DK or RF) then goto PYMTJX1
		 January February March April 	ELSE goto MCHANGE for next loan for this property with 8500.LOANTYPE = 1, 2 and 8500.OPF_STAT = 1
		5. May 6. June 7. July	IF no more loans with (8500.LOANTYPE = 1, 2 and 8500.OPF_STAT = 1) for this property AND 8500.HWMNYLOC >= 1 then exit block and goto
		8. August 9. September 10. October 11. November	PDLOAN2 in Thomequity block ELSE exit block and goto ADDMORT in TAddmort block
0041	DV/MT 1V/1	12. December	1.00000000 DI/ DE: IE (any and an 2.0 and arted in
03A1	PYMTJX1	How much was (your/your household's) payment on this ^mortgage_lumpsum in (reference month)?	1-99999999,DK,RF: IF (any codes 3-6 selected in PYRINIJ) or 8500.PAYPROTX = 3 or 8500.PAYPROIN = 4 or 8500.PAYMORIN = 5 or 8500.PAYOTHER = 6 then goto PRNINJX1 ELSE goto PYMTJX2
			0: Goto PYMTJX2
03A1	PRNINJX1	How much of that amount is for ^prinint fill?	0-9999999: Goto PYMTJX2
03A1	PYMTJX2	How much was (your/your household's) payment on this ^mortgage_lumpsum in (month)?	1-9999999,DK,RF: IF any codes 3 to 6 selected in PYRINIJ or 8500.PAYPROTX = 3 or 8500.PAYPROIN = 4 or 8500.PAYMORIN = 5 or 8500.PAYOTHER = 6 then goto PRNINJX2 ELSE goto PYMTJX3
			0: Goto PYMTJX3
03A1	PRNINJX2	How much of that amount is for (principal / interest/principal and interest)?	0-99999999: Goto PYMTJX3

Section	CAPI Variable Name	Question Text	Skip Instructions
03A1	PYMTJX3	How much was (your/your household's) payment on this (mortgage/lump sum home equity loan) in (last month)?	IF (any codes 3 to 6 selected in PYRINIJ) or 8500.PAYPROTX = 3 or 8500.PAYPROIN = 4 or 8500.PAYMORIN = 5 or 8500.PAYOTHER = 6) then goto PRNINJX3
			ELSEIF there are more loans on this property with 8500.OPF_STAT = 1 then goto MCHANGE for the next loan
			ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeequity.PDLOAN2
			ELSE exit block and goto TAddmort.ADDMORT
03A1	PRNINJX3	How much of that amount is for (principal / interest/principal and interest)?	0-99999999: IF there are more loans on this property with 8500.OPF_STAT = 1 then goto MCHANGE for the next loan
			ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeequity.PDLOAN2
			ELSE exit block and goto TAddmort.ADDMORT
			DK,RF: IF there are more loans on this property with 8500.OPF_STAT = 1 then goto MCHANGE for the next loan
			ELSEIF 8500.HWMNYLOC >= 1 then exit block and goto THomeequity.PDLOAN2
			ELSE exit block and goto TAddmort.ADDMORT
03A1	PDLOAN2	Since the first of (reference month), (have/has) (you/your household) made any payments for your home equity line of credit?	1: Goto PD2AMTX1
		made any paymonto for your name equity mile of ordate.	2,DK,RF: Goto TOTOWED2
		1. Yes	
03A1	PD2AMTX1	2. No What was the total amount paid in (reference month)?	Goto PD2AMTX2
03A1	PD2AMTX2	What was the total amount paid in (month)?	Goto PD2AMTX3
			00-00
03A1	PD2AMTX3	What was the total amount paid in (last month)?	Goto TOTOWED2
03A1	TOTOWED2	^TOTOWED2_FILL	Goto PDLOAN2 for next loan for this property with

Section	CAPI Variable Name	Question Text	Skip Instructions
			8500.OPH_STAT = 1
			if no more loans for this property with8500.OPH_STAT = 1 then exit block and goto TAddmort.Baddmort.ADDMORT
03A1	ADDMORT	Since the first of (reference month), (have/has) (you/your household) obtained any (additional/) mortgages, including second mortgages or home equity loans, for your (property description)?	1: Goto HEQUITY 2,DK,RF: Exit block and goto S3A1_CHK1
		(Do not include reverse mortgages./)	
		1. Yes 2. No	
03A1	HEQUITY	Was this a mortgage or home equity loan?	1,DK,RF: Goto OTHLOAN
		Mortgage Home equity loan	2: Goto HELTYPE
)3A1	HELTYPE	There are two basic types of home equity loans:	Goto OTHLOAN
		A loan where (you/your household) received the entire lump-sum borrowed when (you/your household) took out the loan; or	
		A line of credit loan where (you/your household) can increase the amount borrowed by simply writing a check or using a special credit card.	
		Which type more closely describes this new home equity loan?	
		Lump sum home equity loan Line of credit home equity loan	
)3A1	OTHLOAN	Did you have any other new mortgages or home equity loans for (property description)?	1: Goto HEQUITY for the next row
		1. Yes 2. No	2,DK,RF: Exit block and goto S3A1_CHK1
)3A1	PURPROP	Q 6	1: Goto PCODE
		(Other than the Sample Unit which you recently acquired/) ^SinceFill the first of (reference month), (have/has) (you/your household) purchased or otherwise acquired any property or real estate?	2,DK,RF: Goto 3A1_END

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
03A1	PCODE	₽ 6	if 1 selected then goto NPROP2 if 2 selected then goto CK PCODE
		What kind of property(ies) is this new property or real estate?	if 3 selected then goto NPROP6
		what kind of property (les) is this new property of real estate:	if 4 selected then goto NPROP4
		• Enter all that apply, separate with commas	
		1. Other homes, vacation homes, recreational properties including timeshares	
		2. Commercial real estate or farm land	
		3. Homes rented out or owned only for investment purposes4. Land with no buildings on it	
03A1	NPROP2	₽ 6	IF 3 selected in PCODE then goto NPROP6
		How many other homes, vacation homes or recreational properties, including timeshares?	ELSEIF 4 selected in PCODE then goto NPROP4
		 Exclude right-to-use timeshares, vacation clubs, or destination clubs. 	ELSE goto S3A1_END
03A1	NPROP6	□ 6	5 =
		How many homes rented out or owned only for investment purposes?	
03A1	NPROP4	Q 6	Goto S3A1_END
		How many were land with no buildings on it?	
03A2	OTHERHOM	Q 6	1: Goto NOPROP
		Since the first of (reference month), (have/has) (you/your household)	2,DK,RF: Goto BUSPROP3
		lived in any other home that (you/you or any members of your household) still (own/owns)?	
		1. Yes	
03A2	NOPROP	2. No 6	Goto BUSPROP3
00/12	11011101		30.0 200. Not 0
		How many?	
03A2	BUSPROP3	₽ 6	Goto RESBUSPR

(Do/Does) (you/your household) own any commercial real estate or farm land?

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
03A2	RESBUSPR	₽ 6	1: Goto RES_NUM
		(In the following questions, please do not include any of the commercial properties (you/your household) ^own_owns only for business or investment purposes.)	2,DK,RF: Goto SECHOME
		(Do/Does) (you/your household) own any homes rented out or owned only for investment purposes?	
		1. Yes	
		2. No	
03A2	RES_NUM	₽ 6	Goto SECHOME
		How many?	
03A2	SECHOME	₽ 6	1: Goto SEC_NUM
		(In the following questions, please do not include any of the properties ^You_YRCU (own/owns) only for business or investment purposes) (Other than the property you have already mentioned./) (Do/Does/do/does) (you/your household) own any other homes, vacation homes, or recreational properties, including timeshares?	2,DK,RF: Goto NOBUILD
		 Exclude right-to-use timeshares, vacation clubs, or destination clubs. 	
		1. Yes 2. No	
03A2	SEC_NUM	₽ 6	Goto NOBUILD
		How many?	
		Exclude right-to-use timeshares, vacation clubs, or destination clubs.	
03A2	NOBUILD	₽ 6	1: Goto BUILDNUM
		Other than property you have already mentioned, (do/does) (you/your household) own any land without buildings on it?	2,DK,RF: Goto NOLONGER

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
0242	BUILDNUM	2. No	Cata NOLONGED
03A2	BUILDNUM	64 0	Goto NOLONGER
		How many?	
03A2	NOLONGER	₩ 6	1: Goto NUMPRPTY
		Are there any properties that (you/your household) owned at the beginning of (reference month) that (you/your household) no longer (own/owns)?	2,DK,RF: Goto S3A2_END
		1. Yes 2. No	
03A2	NUMPRPTY	₽ 6	1-20: Goto P_TYPE
		How many different properties?	DK,RF: Goto S3A2_END
03A2	P_TYPE	₩ 6 ? [F1]	1-5: IF NUMPRTY = DK or RF then goto S3A2_END If 1 selected in P_TYPE and NUMPRPTY is greater
		What type of (property was it/properties were they)?	than 1 then goto HWMANY1 If only 1 selected in P_TYPE and NUMPRPTY = 1
		 Enter all that apply, separate with commas. 	then goto S3A2_END
		1. A home in which ^YOU_YRCU used to live	If 2 selected in P_TYPE and NUMPRPTY is greater than 1 then goto HWMANY2
		2. Other homes, vacation homes, recreational properties including timeshares3. Commercial real estate or farm land	If only 2 selected in P_TYPE and NUMPRPTY = 1 then goto S3A2_END
		4. Homes rented out or owned only for investment purposes5. Land with no buildings on it	If 3 selected in P_TYPE and NUMPRPTY is greater than 1 then goto HWMANY3 If only 3 selected in P_TYPE and NUMPRPTY = 1 then goto S3A2_END
			If 4 selected in P_TYPE and NUMPRPTY is greater than 1 then goto HWMANY4 If only 4 selected in P_TYPE and NUMPRPTY = 1 then goto S3A2_END
			If 5 selected in P_TYPE and NUMPRPTY is greater than 1 then goto HWMANY5

Section	CAPI Variable Name	Question Text	Skip Instructions
			If only 5 selected in P_TYPE and NUMPRPTY = 1 then goto S3A2_END
			RF: Goto S3A2_END
03A2	HWMANY1	₽ 6	IF 2 selected in P_TYPE then goto HWMANY2 ELSEIF 3 selected in P_TYPE then goto HWMANY3
		How many homes in which (you/your household) used to live did (you/your household) dispose	ELSEIF 4 selected in P_TYPE then goto HWMANY4 ELSEIF 5 selected in P_TYPE then goto HWMANY5
		of since (reference month)?	ELSE goto S3A2 CHK
03A2	HWMANY2	₽ 6	IF 3 selected in P_TYPE then goto HWMANY3 ELSEIF 4 selected in P_TYPE then goto HWMANY4
		How many other homes, vacation homes, recreational properties, or timeshares did (you/your household) dispose of since (reference month)?	ELSEIF 5 selected in P_TYPE then goto HWMANY5 ELSE goto S3A2_CHK
03A2	HWMANY3	Q 6	IF 4 selected in P_TYPE then goto HWMANY4 ELSEIF 5 selected in P_TYPE then goto HWMANY5
		How many commercial real estate or farm land properties did (you/your household) dispose of since (reference month)?	ELSE goto S3A2_CHK
03A2	HWMANY4	□ 6	IF 5 selected in P_TYPE then goto HWMANY5 ELSE goto S3A2_CHK
		How many homes rented out or owned only for investment purposes did (you/your household) dispose of since (reference month)?	
03A2	HWMANY5	6	Goto S3A2_CHK
		How many land properties with no buildings on them did (you/your household) dispose of since (reference month)?	
03B	WHICH_PROP	(Now I am going to ask about your (owned properties/next property))	1: Goto CK_WHICHPROP
		• Enter type of property	2-5: Goto PROPDESC
		1. Sample unit	
		2. ^Form_home	
		3. ^Oth_home 4. ^Rent home	
		5. ^No_build	
03B	PROPDESC	(Now I'm going to ask some questions about your Sample Unit.)	30 characters: IF OWNYB = 300 then goto TIMESHAR ELSEIF OWNYB = 600 then goto COUNTRY
		("* Briefly describe the (property type).)	ELSE goto SHARED2

Section	CAPI Variable Name	Question Text	Skip Instructions
		(* Press Enter to continue./* Enter 888 to delete this property.)	888: Goto next property
03B	TIMESHAR	? [F1]	1: Goto DEEDED
		Is this a time-sharing arrangement where (you/your household) (have/has) use of the property only for a specified length of time each year?	2,DK,RF: Goto SHARED2
		1. Yes 2. No	
03B	DEEDED	Is this a deeded or right-to-use timeshare?	1,DK,RF: Goto SHARWKS
		1. Deeded 2. Right-to-use	2: Goto CH_DEEDED
03B	SHARWKS	How many weeks are (you/your household) entitled to use your timeshare each year?	1-16, DK, RF: Goto SHARED1 17-52: Goto ERR1_SHARWKS
03B	SHARED1	(Do/Does) (you/your household) own the timeshare with anyone else outside your household?	1: Goto SHARPER1
			2,DK,RF: Goto COUNTRY
		1. Yes 2. No	
03B	SHARPER1	What percent of the timeshare (do/does) (you/your household) own?	Goto COUNTRY
03B	SHARED2	(Do/Does) (you/your household) share ownership of the property with anyone else?	1: Goto SHARPER2
		1. Yes 2. No	2,DK,RF: IF OWNYB = 300 then goto COUNTRY ELSEIF INTNMBR = 2-5 and NEWCU ne 1 AND OWNYB ne 100 then goto STILOWNB ELSEIF BCeintro.BUSCREEN = 2 AND OWNYB
			= 100 then goto BSNEXP2 ELSEIF BCeintro.BUSCREEN = 2 then goto ACQUIRYR
03B	SHARPER2	What percentage of the property (do/does) (you/your household) own?	ELSE goto BSNSEXP IF OWNYB = 300 then goto COUNTRY
000	SHAM LIVE	what percentage of the property (abrades) (youryour nousehold) own:	ELSEIF INTNMBR = 2-5 AND NEWCU ne 1 AND OWNYB ne 100 then goto STILOWNB
			ELSEIF BCeintro.BUSCREEN = 2 AND OWNYB = 100 then goto BSNEXP2
			ELSEIF BCeintro.BUSCREEN = 2 then goto

Section	CAPI Variable Name	Question Text	Skip Instructions
			ACQUIRYR
			ELSE goto BSNSEXP
03B	COUNTRY	◆ Ask if not apparent	1: Goto STATE
		• If this is a timeshare with multiple locations, select the most often used location.	
			2,DK,RF: IF INTNMBR = 2-5 AND NEWCU ne 1 and
		Where is the property located?	OWNYB ne 100 then goto STILOWNB
			ELSEIF BCeintro.BUSCREEN = 2 AND OWNYB
			ne 600 then goto ACQUIRYR
		1. United States	ELSEIF OWNYB ne 600 then goto BSNSEXP
		2. Foreign Country	ELSE goto S3B_END
03B	STATE	? [F1]	IF DK or RF: IF INTNMBR = 2-5 AND NEWCU ne 1
			AND OWNYB ne 100 then goto STILOWNB
		 Enter the two character State abbreviation 	ELSEIF BCeintro.BUSCREEN = 2 AND
			OWNYB ne 600 then goto ACQUIRYR
			ELSEIF OWNYB ne 600 then goto BSNSEXP
			ELSE goto S3B_END
			ELSE: Goto CNTYCODE
03B	CNTYCODE	What county is the property located in?	30 characters, DK, RF: IF INTNMBR = 2-5 AND NEWCU
			ne 1 AND OWNYB ne 100 then goto STILOWNB
		If the county name is not found, key X.	ELSEIF BCeintro.BUSCREEN = 2 AND
			OWNYB ne 600 then goto ACQUIRYR
			ELSEIF OWNYB ne 600 then goto
			BSNSEXP
			ELSE goto S3B_END
			X: Goto OTHCNTY
03B	OTHCNTY	 Specify other county 	IF INTNMBR = 2-5 AND NEWCU ne 1 AND OWNYB ne
			100 then goto STILOWNB
			ELSEIF BCeintro.BUSCREEN = 2 AND OWNYB ne 600
			then goto ACQUIRYR
			ELSEIF OWNYB ne 600 then goto BSNSEXP
			ELSE goto S3B END
03B	STILOWNB	◆ Ask if not apparent	IF OWNYB = 600 then goto S3B END
			ELSEIF BCeintro.BUSCREEN = 2 AND OWNYB ne 600
		Do you still own this property?	then goto ACQUIRYR
			ELSE goto BSNSEXP

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
03B	BSNSEXP	(Are/Were) any of the expenses for this property deducted as a farm, rental, or business expense?	1: Goto OBSNSZB
			2,DK,RF: IF OWNYB = 100 then goto BSNEXP2 ELSE goto ACQUIRYR
		1. Yes 2. No	
03B	OBSNSZB	What percent of the expenses for this property (is/was) deducted? Include the portion used for business, farming, or rented to someone outside the household.	1-99,DK,RF: Goto ACQUIRYR
			100: Goto ERR2_OBSNSZB
03B	BSNEXP2	Is any part of this property you own rented to someone outside your household or used for business?	Goto ACQUIRYR
		1. Yes 2. No	
03B	ACQUIRYR	In what year did (you/your household) close or settle on this property?	1900-9999: If entry = current or previous year, goto ACQUIRMO Else goto ANPROPTX
			DK, RF: goto ANPROPTX
03B	ACQUIRMO	In what month did (you/your household) close or settle on this property?	1-12: IF ACQUIRMO/ACQUIRYR are within the reference period then goto GIFTPROP
		1. January 2. February	ELSE goto ANPROPTX
		3. March	DK,RF: Goto ANPROPTX
		4. April	DIGITAL COLOTINATION IX
		5. May	
		6. June	
		7. July	
		8. August 9. September	
		10. October	
		11. November	
		12. December	
03B	GIFTPROP	Was this property received as a gift or inheritance?	1,DK,RF: Goto ANPROPTX
			2: Goto OWN_PURX
		1. Yes 2. No	
03B	OWN_PURX	2. NO	Goto CLOSECST
		see - 1 (+)	0000 01001001

CAPI Variable Name	Question Text	Skip Instructions
	What was the total price paid for (this/the) property, not including closing costs?	
CLOSECST	□ 6 ? [F1]	Goto OWNDPMTX
OWNDDMTV		Goto ANPROPTX
ANPROPIX	what (are/were) the annual property taxes for (this/the) property?	IF OWNYB = 400 then goto S3B_END
		ELSEIF OWNYB ne 400 AND NOT (OWNYB = 100 AND SECT01.BUILDING (from Section 1C) = 1 , 9 , 10) then goto PROPTYPE
		ELSE goto S3B_END
PROPTYPE	 Ask if not apparent. If respondent doesn't know or refuses select pre-code 3. 	Goto S3B_END
	(Was/Is) this property a -	
	Condominium Cooperative Something else	
DISPMTHD	You said (you/your household) no longer (own/owns) your (property description).	1,2,DK,RF: Goto DISPYR
	something else with it?	3: Goto DISPOTH
	 Sold the property or traded the property in Gave it to someone outside household Something else, other – specify 	
DISPOTH	◆ Specify:	Goto DISPYR
DISPYR	In what year did (you/your household) (sell(trade) this property/give this property to someone outside your CU/dispose of this property)?	Goto DISPMO
DISPMO	In what month did (you/your household) (sell(trade) this property/give this property to	IF DISPMO = DK or RF then goto S3D_END
		ELSEIF DISPYR = DK or RF then goto S3D_END
	1. January	
		ELSEIF DISPMTHD = 1 AND (DISPMO and DISPYR
	3. March 4. April	are within the reference period then goto DISPX
	CLOSECST OWNDPMTX ANPROPTX PROPTYPE DISPMTHD DISPOTH DISPYR	What was the total price paid for (this/the) property, not including closing costs? CLOSECST About how much were the closing costs? OWNDPMTX What was the amount of the down payment? What (are/were) the annual property taxes for (this/the) property? PROPTYPE * Ask if not apparent. * If respondent doesn't know or refuses select pre-code 3. (Was/Is) this property a - 1. Condominium 2. Cooperative 3. Something else Vou said (you/your household) no longer (own/owns) your (property description). Did (you/your household) sell it, give it to someone outside your household, or do something else with it? 1. Sold the property or traded the property in 2. Gave it to someone outside household 3. Something else, other – specify * Specify: DISPOTH DISPYR In what year did (you/your household) (sell(trade) this property/give this property to someone outside your CU/dispose of this property)? In what month did (you/your household) (sell(trade) this property/give this property to someone outside your CU/dispose of this property)? 1. January 2. February 3. March

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December	ELSEIF Cur_monthnum = 1 THEN {Current Month is January} IF DISPMO = 1 AND DISPYR = (Currentyear) THEN {Disposed of January of this year} goto S3D_END - do NOT display the error ENDIF IF (DISPMO = 10-12) AND DISPYR = (Currentyear - 1) THEN {Disposed of Oct, Nov, Dec of last year} goto S3D_END - do NOT display the error ENDIF
			ELSEIF Cur_monthnum = 2 THEN {Current Month is February} IF (DISPMO = 1 or 2) AND DISPYR = (Currentyear) THEN {Disposed of in Jan or Feb of this year} goto S3D_END - do NOT display the error ENDIF IF (DISPMO = 11 or 12) AND DISPYR = (Currentyear - 1) THEN {Disposed of in Nov or Dec of last year} goto S3D_END - do NOT display the error ENDIF
			ELSEIF Cur_monthnum = 3 THEN {Current Month is March} IF (DISPMO = 1-3) AND DISPYR = (Currentyear) THEN {Disposed of in Jan or Feb of this year} goto S3D_END - do NOT display the error ENDIF IF DISPMO = 12 and DISPYR = (Currentyear - 1) THEN {Disposed of in Dec of last year} goto S3D_END - do NOT display the error ENDIF
			ELSEIF {Disposed of betweent the ref_month and current month of this year} (((DISPMO >= ref_monthnum) AND (DISPMO <= cur_monthnum)) AND (DISPYR = Currentyear)) OR {Disposed of this month and this year} ((DISPMO = Interviewdate.MONTH) AND (DISPYR = Currentyear)) THEN goto S3D_END - do NOT display the error

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSE goto ERR3_DISPMO - Display DISPDATE_ERR
03D	DISPX	What was the selling price (trade-in value)?	Goto DISPEXPX
03D	DISPEXPX	□ 7 ? [F1]	Goto S3D_END
		Here is a list of some of the costs people may have when selling (trading) property. Looking at the list may help you remember what (your/your household's) expenses were. What were (your/your household's) total expenses in selling (trading) this property?	
03E	PRESMORT	Now I am going to ask about mortgages for your (property description).	1: Goto NUMMORT1
		Excluding home equity loans, (and reverse mortgages/), (do/does) (you/your household) presently have a mortgage on your (property description)?	2,DK,RF: Goto HADMORT
		1. Yes 2. No	
03E	NUMMORT1	How many mortgages ^havehas (you/your household) had on this property since the first of (reference month)?	Goto HOMEQ_YN
03E	HADMORT	(Have/Has) (you/your household) had a mortgage on this property since the first of (reference month)?	1: Goto NUMMORT2
		· · · · · · · · · · · · · · · · · · ·	2,DK,RF: Goto HOMEQ_YN
		1. Yes 2. No	
03E	NUMMORT2	How many mortgages (have/has) (you/your household) had on this property since the first of (reference month)?	Goto HOMEQ_YN
03E	MRTCPSHA	Since the first of (reference month), in addition to (your/your household's) share of the	1: Goto NUMMORT3
		cooperative's total costs, did (you/your household) make payments on a mortgage that was obtained from an outside lender for (your/your household's) shares in the cooperative?	2,DK,RF: Goto HOMEQ_YN
		1. Yes 2. No	
03E	NUMMORT3	How many mortgages (have/has) (you/your household) had on this property since the first of (reference month)?	Goto HOMEQ_YN
03E	HOMEQ_YN	(Do/Does) (you/your household) have a home equity loan or any other loan which gives the lender claim on this property in case	1: Goto LSHEL_YN
		the loan is not repaid?	2,DK,RF: Goto S3E_END

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
03E	LSHEL_YN	2. No ^LSHEL_YN_FILL_ONCE	1: Goto NUMLSHEL
03E	LOUET IN	PLSHEL_TN_FILL_ONCE	1. GOLO NOMESHEL
		(Have/Has) (you/your household) had a lump sum home equity loan on this property since the first of (reference month)?	2,DK,RF: Goto LCHEL_YN
		1. Yes 2. No	
03E	NUMLSHEL	How many?	Goto LCHEL_YN
03E	LCHEL_YN	^C_HaveHas (you/your household) had a line of credit home equity loan on this property since the first of	1: Goto NUMLCHEL
		(reference month)?	2,DK,RF: Goto S3E_END
		1. Yes 2. No	
03E	NUMLCHEL	How many?	Goto S3E_END
03F	ORG_INTR	Now I will ask some questions about your (1st/2nd/3rd/etc.) (mortgage/lump sum home equity loan).	1: Goto ORGMRTX
		These questions refer to the (mortgage/lump sum home equity loan) you are currently making payments on.	2: Goto S3FG_END
		Continue Delete the loan	
03F	ORGMRTX	What was the amount of the (mortgage/lump sum home equity loan) when (you/your household) first obtained it, not including any interest?	Goto FRSTPYYR
03F	FRSTPYYR	In what year did (you/your household) make the first payment on this (mortgage/lump sum home equity loan)?	Goto FRSTPYMO
03F	FRSTPYMO	In what month did (you/your household) make the first payment on this (mortgage/lump sum home equity loan)?	Goto MTERM
		1. January	
		2. February	
		3. March 4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	

Section	CAPI Variable Name	Question Text	Skip Instructions
		10. October	
		11. November	
		12. December	
03F	MTERM	Is this a 30 year (mortgage/lump sum home equity loan), a 15 year	1: goto NEWMRRT
		(mortgage/lump sum home equity loan), or something else?	2: goto NEWMDDT
		1. 30-year	2: goto NEWMRRT
		2. 15-year	3: Goto MORTTERM
		3. Something else	3. Ooto MORT LINN
			DK,RF: Goto NEWMRRT
03F	MORTTERM	• Enter number of years	Goto NEWMRRT
03F	NEWMRRT	What is the current interest rate on this (mortgage/lump sum home equity loan)?	Goto FIXEDRTE
		,	
		Enter percent including decimal	
03F	FIXEDRTE	Is this a fixed rate (mortgage/lump sum home equity loan)?	1: Goto PAYINCL
		1. Yes	2,DK,RF: Goto PAYTYPE
03F	PAYTYPE	2. No	IF 2 is colouted than gots DAVTOTUE
03F	PATITE	? [F1]	IF 3 is selected then goto PAYTOTHF
		There are many different kinds of (mortgages/lump sum home equity loans).	ELSE goto PAYINCL
		Which of these comes closest to (yours/ your household's)?	· ·
		Read each item on list	
		 Mark all that apply, separate with commas 	
		1. Variable or adjustable rate of interest (ARM)	
		2. Interest only	
		3. Other - Specify	
03F	PAYTOTHF	• Specify:	Goto PAYINCL
03F	PAYINCL	🚇 7 [F1]	IF 6 selected then goto PAYOTHF
			ELCELE EIVEDDTE 1 thou wate MDTDMTV
		On (your/your household's) last payment, which of these things were included?	ELSEIF FIXEDRTE = 1 then goto MRTPMTX
		• Read each item on list	ELSE goto PAYMTX1
		• Enter all that apply, separate with commas	
		1. Principal	
		2. Interest	

Section	CAPI Variable Name	Question Text	Skip Instructions
		3. Property taxes 4. Property insurance 5. Montages guarantee insurance (DMI)	
		5. Mortgage guarantee insurance (PMI)6. Any other payments - specify77. Don't know	
03F	PAYOTHF	◆ Specify:	IF FIXEDRTE = 1 then goto MRTPMX
			ELSE goto PAYMTX1
03F	MRTPMTX	How much is (your/your household's) (mortgage/lump sum home equity loan) payment per month?	1-99999999: IF any codes 3-6 are selected in PAYINCL then goto PRININTX ELSE goto S3FG_END
			DK,RF: IF any codes 3-6 are selected in PAYINCL then goto PRININTX
03F	PRININTX	How much of that amount was for ^prinint fill?	ELSE goto S3FG_END Goto S3FG_END
03F	PAYMTX1	How much was (your/your household's) payment on this (mortgage/lump sum home equity loan) in (reference month)?	0: Goto PAYMTX2
			1-99999999,DK,RF: IF any codes 3-6 selected in PAYINCL then goto PRNINTX1 ELSE goto PAYMTX2
03F	PRNINTX1	How much of that amount was for ^prinint_fill?	Goto PAYMTX2
03F	PAYMTX2	How much was (your/your household's) payment on this (mortgage/lump sum home equity loan) in (month)?	0: Goto PAYMTX3
			1-99999999,DK,RF: IF any codes 3-6 selected in PAYINCL then goto PRNINTX2 ELSE goto PAYMTX3
03F	PRNINTX2	How much of that amount was for ^prinint_fill?	Goto PAYMTX3
03F	PAYMTX3	How much was (your/your household's) payment on this (mortgage/lump sum home equity loan) in (last month)?	0,DK,RF: Goto S3FG_END
			1-99999999: IF any codes 3-6 selected in PAYINCL then goto PRNINTX3 ELSE goto S3FG_END
03F	PRNINTX3	How much of that amount is for ^prinint_fill?	Goto S3FG END
03H	PAIDLOAN	(I'd like to ask some questions about (your/your CUs) line of credit home equity (loan/laons).)	1: Goto PDAMTX1
			2,DK,RF: Goto TOTOWED
		Since the first of (reference month), (have/has) (you/your household) made any payments for (your/your household's) (this loan/1st/2nd/3rd/etc.)?	888: Goto next loan

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No 888. Delete this loan	
03H	PDAMTX1	What was the total amount paid in (reference month)?	Goto PDAMTX2
03H	PDAMTX2	What was the total amount paid in (month)?	Goto PDAMTX3
03H	PDAMTX3	What was the total amount paid in (last month)?	Goto TOTOWED
03H	TOTOWED	^TOTOWED_FILL	Goto S3H_END
031	MORTSPEC	Now I'm going to ask about other ownership costs for your (property description).	1: Goto SPECIALX
		ior your (property accompanie).	2,DK,RF: Goto GRNDRENT
		Since the first of (reference month), have (you/you or any members of your household) paid more than the amount required on any mortgage or lump sum home equity loan for this property?	
		1. Yes 2. No	
031	SPECIALX	How much EXTRA did (you/your household) pay?	1-99999999: Goto SPECLXCM
			DK,RF: Goto GRNDRENT
031	SPECLXCM	How much of that amount was paid this month?	Goto GRNDRENT
031	GRNDRENT	(Now I'm going to ask about ownership costs for your (property description)/)	1: Goto GRNDRNTX
		Since the first of (reference month), (have/has) (you/your household) made any payments for ground or land rent for (property description)?	2,DK,RF: If PROPTYPE = 1 then goto PAYCONDO If PROPTYPE = 2 then goto COOPRG3 If PROPTYPE = 3 then goto PAYHOASS
		1. Yes 2. No	
031	GRNDRNTX	What was the total amount paid?	1-99999999: Goto GRNDRTCX
			DK,RF: IF PROPTYPE = 1 then goto PAYCONDO If PROPTYPE = 2 then goto COOPRG3 If PROPTYPE = 3 then goto PAYHOASS
031	GRNDRTCX	How much of that amount was paid this month?	IF PROPTYPE = 1 then goto PAYCONDO IF PROPTYPE = 2 then goto COOPRG3 IF PROPTYPE = 3 then goto PAYHOASS
031	PAYHOASS	(Do/Does) (you/your household) make regular payments to a homeowner's association?	1: Goto HORCORG
			2,DK,RF: Goto SPCLPAY2

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
031	PAYCONDO	(Are/ls) (you/your household) required to make regular payments	1: Goto HORCORG
		of condominium fees for general maintenance or management services?	2,DK,RF: Goto SPCLPAY2
		1. Yes 2. No	
031	COOPRG3	🚇 7 ?[F1]	12,RF: Goto SPCLPAY1
		Now I'd like to ask you about payments (you/your household) (make/makes) directly to the cooperative for (your/your household's) share of its costs. Since the first of (reference month), have (you/you or any members of your household) made any payments for any of the following things -	1-11,77: IF 11 selected then goto CORGOTH ELSE goto MGOTHERX
		 Read each item on the list Enter all that apply, separate with commas Enter 12 for no payments made 	
		 Repayment of loans owed by cooperative Property taxes Property Insurance Management 	
		5. Repairs or maintenance, including lawn care or snow removal6. Improvements	
		7. Recreational including swimming, golf or tennis facilities8. Security including guards or alarm systems9. Utilities such as gas, electricity, water, heat	
		10. Trash collection 11. Other	
		12. No payments made 77. Don't know	
031	CORGOTH	◆ Specify:	Goto MGOTHERX
031	HORCORG	Which of the following services and privileges were included in	1-11,77: IF 11 selected then goto HORGOTH ELSEIF there is at least one loan of LOANTYPE = 1 on this property then goto MGOTHER
		those payments?	ELSE goto MGOTHERX
		• Read each item on the list.	RF: Goto SPCLPAY2

Section	CAPI Variable Name	•	Skip Instructions
		Enter all that applyseparate with commas.	
		1. Management	
		Repairs or maintenance, including lawn care or snow removal	
		3. Improvements	
		4. Utilities such as gas, electricity, water, heat	
		5. Parking	
		6. Recreational including swimming, golf, or tennis facilities	
		7. Security including guards or alarm systems	
		8. Maid Services	
		9. Medical Services	
		10. Trash collection 11. Other	
		77. Don't Know	
031	HORGOTH	◆ Specify:	IF at least one loan of LOANTYPE = 1 for this property
			then goto MGOTHER
			-
			ELSE goto MGOTHERX
031	MGOTHER	Since the first of (reference month), have you made ANY regular payments for	1,DK,RF: Goto MGOTHERX
		these services?	On TE DDODTV/DE Code a state ODOL DAVA
			2: IF PROPTYPE = 2 then goto SPCLPAY1 ELSE goto SPCLPAY2
		1. Yes	ELSE YOU SPCLPATZ
		2. No	
03I	MGOTHERX	Since the first of (reference month), how much (have/has) (you/your household) paid for	1-99999999: Goto MGOTHRCX
		these services?	
			0,DK,RF: IF PROPTYPE = 2 then goto SPCLPAY1
			ELSE goto SPCLPAY2
031	MGOTHRCX	How much of that amount was paid this month?	IF PROPTYPE = 2 then goto SPCLPAY1
031	CDCL DAV1	CO 7 0 [C1]	ELSE goto SPCLPAY2 1: Goto COOPSP3
031	SPCLPAY1	🚇 7 ? [F1]	1. G010 COOPSP3
		(Have/Has) (you/your household) made any SPECIAL payments to	2,DK,RF: Goto ASSESSMT
		a management service?	2,510,10 · Ooto / 100200111
		a management service.	
		1. Yes	
031	SPCLPAY2	2. No 8 ? [F1]	1: Goto HOCOSP3
USI	SPULPATZ	INST O : [LT]	I. GUIU NUCUSPS
		(Have/Has) (you/your household) made any SPECIAL payments to a management service?	2,DK,RF: Goto ASSESSMT
		(Havenhas) (youryour nousehold) made any SPECIAL payments to a management service?	_,,

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
031	COOPSP3	🚇 7 ?[F1]	IF 11 is selected then goto COSPOTH
		Since the first of (reference month), what services were provided?	ELSE goto SPECLX
		• Enter all that apply, separate with commas	
		1. Repayment of loans owed by the cooperative	
		2. Property taxes	
		3. Property insurance	
		 Management Repairs or mantainence, including lawn care or snow removal 	
		6. Improvements	
		7. Recreational including swimming, golf, or tennis facilitieds	
		8. Security including guards or alarm systems	
		9. Utilities such as gas, electricity, water, heat	
		10. Trash collection	
		11. Other 77. Don't Know	
031	COSPOTH	◆ Specify:	Goto SPECLX
031	HOCOSP3	■8 ? [F1]	IF 11 is selected then goto HOSPOTH
			FLOE water ODEOLY
		Since the first of (reference month), what services were provided?	ELSE goto SPECLX
		• Enter all that apply, separate with commas	
		1. Management	
		2. Repairs or maintenance, including lawn care or snow removal	
		3. Improvements	
		4. Utilities such as gas, electricity, water, heat	
		5. Parking6. Recreational including swimming, golf, or tennis facilities	
		7. Security including guards or alarm systems	
		8. Maid Services	
		9. Medical Services	
		10. Trash collection	
		11. Other	
		77. Don't Know	

Section	CAPI Variable Name	Question Text	Skip Instructions
031	HOSPOTH	Specify:	Goto SPECLX
031	SPECLX	Since the first of (reference month), how much were these special payments?	1-99999999: goto SPECLCX
			DK,RF: Goto ASSESSMT
031	SPECLCX	How much of that amount was paid this month?	Goto ASSESSMT
031	ASSESSMT	Since the first of (reference month) (have/has) (you/your household) paid any special assessments to a local government for construction or repair of roads, sidewalks, or other	1: Goto ASSESSX
		things like that? 1. Yes	2,DK,RF: IF OWNYB = 100 then goto RNTEQVX ELSEIFIF OWNYB = 300 then goto VAC_OCCQ ELSE goto S3I END
		2. No	LESE goto SSI_EIND
031	ASSESSX	What was the total amount paid?	1-99999999: goto ASSESSCX
			DK,RF: IF OWNYB = 100 then goto RNTEQVX ELSEIF OWNYB = 300 then goto VAC_OCCQ ELSE goto S3I_END
031	ASSESSCX	How much of that amount was paid this month?	0-99999999: IF OWNYB = 100 then goto RNTEQVX ELSEIF OWNYB = 300 then goto VAC_OCCQ ELSE goto S3I_END
			DK,RF: IF OWNYB = 100 then goto RNTEQVX ELSEIF OWNYB = 300 then goto VAC_OCCQ ELSE goto S3I_END
031	VAC_OCCQ	Since the first of (reference month), how much time did you occupy this (timeshare/property)?	0,DK,RF: IF TIMESHAR (from 3B) = 2, DK or RF then goto VAC_SEC
		• Enter quantity and select period on next screen.	ELSEIF TIMESHAR (from 3B) = 1 then goto TIME_RNT ELSE goto S3I_END
			1-150: Goto VAC_OCCY
031	VAC_OCCY	◆ Enter time period.	1-4,DK,RF: IF TIMESHAR (from 3B) = 2, DK or RF then
			goto VAC_SEC
			ELSEIF TIMESHAR (from 3B) = 1 then goto
		1. Days	TIME_RNT
		2. Weeks	ELSE goto S3I_END
		3. Months	E: Cata VAC OTH
		4. Percent	5: Goto VAC_OTH
031	VAC OTH	5. Other, specify	IF TIMECHAD (from 2D) = 2 DV or DE thon sets
031	VAC_OTH	◆ Specify:	IF TIMESHAR (from 3B) = 2, DK or RF then goto VAC_SEC

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSEIF TIMESHAR (from 3B) = 1 then goto TIME_RNT
			ELSE goto S3I_END
031	VAC_SEC	Since the first of (reference month), was this property either rented by someone outside your household or available to be rented?	1: Goto VAC_RNTQ
			2,DK,RF: Goto RNTEQVX
		1. Yes 2. No	
031	VAC_RNTQ	Since the first of (reference month), how much time was this property rented by someone outside your household?	0,DK,RF: Goto VAC_AVAQ
		outside your neadenoid.	1-150: Goto VAC_RNTY
		 Enter quantity and select period on next screen. 	
031	VAC_RNTY	◆ Enter time period.	1-4,DK,RF: Goto VAC_AVAQ
			5: Goto VAC_ROTH
		1. Days	
		2. Weeks	
		3. Months	
		4. Percent	
03I	VAC_ROTH	5. Other, specify ◆ Specify:	Goto VAC_AVAQ
031	VAC_AVAQ	Since the first of (reference month), how much time was this property available to be	0,DK,RF: IF OWNYB = 300 then goto RNTEQV2X
001	v, to <u>−</u> , tv, tǫ	rented, but not rented out?	ELSE goto S3I_END
		 Enter quantity and select period on next screen. 	1-150: Goto VAC AVAY
031	VAC_AVAY	◆ Specify	1-4: IF OWNYB = 300 then goto RNTEQV2X ELSE goto S3I_END
		1. Days	
		2. Weeks	DK,RF: IF OWNYB = 300 then goto RNTEQV2X
		3. Months	ELSE goto S3I_END
		4. Percent	5: Goto VAC_AOTH
		5. Other, specify	3. G010 VAC_AOTTI
031	VACAOTH	◆ Specify	IF OWNYB = 300 then goto RNTEQV2X
			ELSE goto S3I_END
031	RNTEQV2X	If someone were to rent this home today, how much do you think it would rent for?	Goto RENTPERD
031	RENTPERD	• Ask if not already stated.	1-3,DK,RF: Goto RENTUTIL

Section	CAPI Variable Name	Question Text	Skip Instructions
		What period of time does this rental amount cover?	4: Goto RNPEROTH
		 Week Month Quarter Other specify 	
031	RNPEROTH	◆ Specify:	Goto RENTUTIL
031	RENTUTIL	Does this amount include utilities?	Goto PROPVALX
		1. Yes 2. No	
031	RNTEQVX	If someone were to rent this (including part of the property currently being used for business, farming, or rented/home today) how much do you think it would rent for monthly, unfurnished and without utilities?	1-999999: IF OWNYB = 100 OR (OWNYB = 300 AND TIMESHAR (from 3B) = 2, D or R then goto PROPVALX ELSE goto S3I_END
			DK,RF: IF OWNYB = 100 OR (OWNYB = 300 AND TIMESHAR (from 3B) = 2, DK or RF then goto PROPVALX ELSE goto S3I_END
03I	PROPVALX	About how much do you think this property would sell for on today's market?	Goto S3I_END
03I	TIME_RNT	Since the first of (reference month), did you rent this timeshare to someone outside your household?	Goto RNTEQV3X
		1. Yes 2. No	
031	RNTEQV3X	If you were to rent this timeshare today to someone else, instead of using it yourself, how much would it rent for weekly?	Goto PRPVAL2X
031	PRPVAL2X	If you were able to sell this timeshare, about how much do you think it would sell for on today's market?	0-99999999: Goto S3I_END
03	ANYRENT	Since the first of (reference month) have (you/you or any members of your household) rented any houses, apartments, or	1: Goto RENTX1
		temporary living quarters NOT used entirely for business or vacation?	2,DK,RF: Goto Section 4
		◆ Do NOT include college or university regulated housing.	
		1. Yes	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. No	
02B	RENTX1	What was your total rental payment for (reference month) for this unit?	Goto RENTX2
		Include any extra charges for garage or parking facilities, but do not	
02B	RENTX2	include direct payments by local, state or federal agencies. What was the total rental payment for (month) for this unit?	Goto RENTX3
02B	RENTX3	What was your total rental payment for (last month) for this unit?	Goto RTELECT
02B	RTELECT	₽ 6	Goto RTGAS
		Does the rental payment include the cost of -	
		Electricity?	
		1. Yes	
		2. No	
02B	RTGAS	□ 6	Goto RTWATER
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Gas?	
		1. Yes	
		2. No	
02B	RTWATER	₽ 6	Goto RTHEAT
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Piped in water?	
		1. Yes 2. No	
02B	RTHEAT	₽ 6	Goto RTTRASH

Repeat if necessary

Section	CAPI Variable Name	Question Text	Skip Instructions
		Does the rental payment include the cost of -	
		Heating?	
		neating:	
		1. Yes 2. No	
02B	RTTRASH	2. NO	Goto RTPARK
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Trash/garbage collection?	
		1. Yes	
	DTD 4 DI/	2. No	O + PT10P1V
02B	RTPARK	₽ 6	Goto RTASPAY
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Garage and parking facilities?	
		1. Yes	
		2. No	
02B	RTTELEPH	₽ 6	Goto RTTVCABL
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Talanhana aansiaaa2	
		Telephone services?	
		1 Voc	
		1. Yes 2. No	
02B	RTTVCABL	₽ 6	Goto RTINTRNT

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Repeat if necessary	
		Does the rental payment include the cost of -	
		Television services?	
		1. Yes 2. No	
02B	RTINTRNT	₽ 6	Goto RTFUNSH
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Internet services?	
		1. Yes	
02B	RTFUNSH	2. No	Goto RTASPAY
		◆ Repeat if necessary	
		Does the rental payment include the cost of -	
		Furniture?	
		1. Yes 2. No	
02B	RTASPAY	Did (you/you or any members of your household) receive any reduced or free rent for this unit as a form of pay since the first of (reference month)?	1: Goto RTCOMPX
		and and at a term of pay ember the most of (reference menaly).	2,DK,RF: IF BCeintro.BUSCREEN = 2 AND
			(PSU=06001, 06013, 06037, 06041, 06059, 06065,
		1. Yes	06071, 06081, 06073, 06075, 06087, 06097, 11001,
		2. No	24021, 24043, 34003, 34013, 34017, 34023, 34027,
			34031, 34037, 36005, 36047, 36059, 36061, 36081,
			36085, 36087, 36103, 36119) go to RENTCONT
			ELSEIF BCeintro.BUSCREEN = 2 goto
			MORERENT
			ELSE goto RTBSNS
02B	RTCOMPX	What is the current monthly rental charge to another tenant for a similar unit?	Goto REGRNTX
02B	REGRNTX	What is your regular rental payment?	IF BCeintro.BUSCREEN = 2 AND (PSU=06001, 06013,

Section	CAPI Variable Name	Question Text	Skip Instructions
			06037, 06041, 06059, 06065, 06071, 06081, 06073, 06075, 06087, 06097, 11001, 24021, 24043, 34003,
			34013, 34017, 34023, 34027, 34031, 34037, 36005,
			36047, 36059, 36061, 36081, 36085, 36087, 36103,
			36119) go to RENTCONT
			ELSEIF BCeintro.BUSCREEN = 2 goto MORERENT
			ELSE goto RTBSNS
02B	RTBSNS	Is any portion of this unit used for your own business?	1: Goto RTBSNSZ
			2,DK,RF: IF PSU = 06001, 06013, 06037, 06041,
		1. Yes	06059, 06065, 06071, 06073, 06075, 06081 06087,
		2. No	06097, 11001, 24021, 24043, 34003, 34013, 34017,
			34023, 34027, 34031, 34037, 36005, 36047, 36059, 36061, 36081, 36085, 36087, 36103, 36119, then goto
			RENTCONT
			ELSE goto MORERNT
02B	RTBSNSZ	What percent of the rental payment is counted as a business expense?	1-99,DK,RF: IF PSU = 06001, 06013, 06037, 06041,
			06059, 06065, 06071, 06073, 06075, 06081, 06087,
		Enter to the nearest whole percent.	06097, 11001, 24021, 24043, 34003, 34013, 34017,
			34023, 34027, 34031, 34037, 36005, 36047, 36059,
			36061, 36081, 36085, 36087, 36103, 36119 then goto
			RENTCONT ELSE goto MORERNT
			LESE YOU MOREKINI
			100: Goto ERR2_RTBSNSZ
02B	RENTCONT	Is this unit under rent control?	Goto MORERNT
		4 Mar	
		1. Yes 2. No	
02B	MORERNT	Since the first of (reference month), have (you/you or any members of your household)	1: Goto RENTX1
025	MORERUT	rented any other houses, apartments, or temporary living	I. 3000 NEWIA
		quarters NOT used entirely for business or vacation?	2,DK,RF: Goto S2_END
		Do NOT include college or university regulated housing.	
		1. Yes	
		2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
04A	S4A_INTRO	Q 9	Goto TELEBILL
		Now I am going to ask about utilities including telephone 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 bill you have received, even if the bill has not been paid. First, I'll ask you about telephone bills.	
		Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		1. Enter 1 to Continue	
04A	TELEBILL	□ 9 ? [F1]	1: IF any 8500.TELCOMP = 1-20 then goto PREVCOMP
		Since the first of (reference month), have (you/you or any members of your household) received any bills for telephone services, including cellular and Voice Over IP? Do not include bills for telephones used entirely for business purposes.	ELSE goto TELCOMP
			2,DK,RF: Goto S4A_END
		1. Yes 2. No	
04A	PREVCOMP	What is the name of the company which provides the service?	1-20: IF BCeintro.BUSCREEN = 2 goto TELCHGX1 ELSE goto TELBSNS
		Description Amount1 Amount2 Amount3	55: Goto TELCOMP
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	888: Goto TELOTH
		1. ^Temprevcomp[1] 2. ^Temprevcomp[2]	
		3. ^Temprevcomp[3]	
		4. ^Temprevcomp[4] 5. ^Temprevcomp[5]	
		6. ^Temprevcomp[6]	
		7. ^Temprevcomp[7] 8. ^Temprevcomp[8]	
		9. ^Temprevcomp[9] 10. ^Temprevcomp[10]	
		TO. TEMPIEVCOMP[TO]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		11. ^Temprevcomp[11]	
		12. ^Temprevcomp[12]	
		13. ^Temprevcomp[13]	
		14. ^Temprevcomp[14] 15. ^Temprevcomp[15]	
		16. ^Temprevcomp[16]	
		17. ^Temprevcomp[17]	
		18. ^Temprevcomp[18]	
		19. ^Temprevcomp[19]	
		20. ^Temprevcomp[20]	
		55. Company name not listed	
	TELOGUE	888. Delete the line	000 0 4 751 0711
04A	TELCOMP	(What is the name of the company which provides the service?/"* Enter company name)	888: Goto TELOTH
		Description Amount1 Amount2 Amount3	All others: IF BCeintro.BUSCREEN = 2 goto
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	TELCHGX1
			ELSE goto TELBSNS
		◆ Enter 888 to delete the line	
04A	TELBSNS	Will any of the charges be deducted as a business expense?	1: Goto TELBSNZ
			2,DK,RF: Goto TELCHGX1
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		1. Yes	
		2. No	
04A	TELBSNZ	What percentage will be deducted?	1-99,DK,RF: Goto TELCHGX1
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	100: Goto CK_TELBSNZ
04A	TELCHGX1	How much were you billed for in (reference month)?	Goto TELCHGX2
	-	Do not include any unpaid charges from a previous billing period.	
		Description Amount1 Amount2 Amount3	
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
04A	TELCHGX2	How much were you billed for in (month)?	Goto TELCHGX3
		Do not include any unpaid charges from a previous billing period.	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
04A	TELCHGX3	How much were you billed for in (last month)? Do not include any unpaid charges from a previous billing period.	1-999999: IF TELCHGX1 = 0 OR TELCHGX2 = 0 then goto BILPERD ELSE goto TYPETEL
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	0: Goto BILPERD
			DK,RF: IF TELCHGX1 = 0 OR TELCHGX2 = 0 then goto BILPERD ELSE goto TYPETEL
04A	BILPERD	What is your usual billing period for this service?	Goto TYPETEL
		Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		 Month 2 months Quarter Annual 	
04A	TYPETEL	5. Other ■ 9 ? [F1]	Goto TELTEMP
		What types of telephone services did the bill include -	
		 Read each item on list. Enter all that apply, separate with commas. 	
		Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		Residential Service including Voice over IP? Mobile or Cellular Service including prepaid?	
04A	TELTEMP	□ 9 ? [F1]	0,77: IF 0 only or 77 only then goto TELOTH ELSEIF 0 is selected with another option then goto

Section	CAPI Variable Name	Question Text	Skip Instructions
		Which of the following telephone service items were included in the bill(s) -	CK_TELTEMP
		(* Do not include data plans for mobile phones in 1. Internet access. /) ◆ Read each item on list.	1-3: Goto TELBLPRS
		• Enter all that apply, separate with commas.	DK,RF: Goto TELOTH
		Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		 None Internet service (including broadband, DSL and dial-up)? Cable or satellite television service? Applications, games, or ringtones? Misc Combined (Unable to specify/ DK) 	
04A	TELBLPRS	 Is respondent referring to a detailed bill, including online or digital? Do not include checkbooks 	IF 1 selected in TELTEMP then goto TINTNTX1 ELSEIF 2 selected in TELTEMP then goto TCABLEX1 FLOR goto TABBONX1
		1. Yes 2. No	ELSE goto TAPPGMX1
			2: Goto TELOTH
04A	TINTNTX1	How much of the (reference month) charges were for internet access?	Goto TINTNTX2
		(* Do not include data plans for mobile phones./) Description Amount1 Amount2 Amount3 (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
04A	TINTNTX2	How much of the (month) charges were for internet access?	Goto TINTNTX3
		(* Do not include data plans for mobile phones./)	
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
04A	TINTNTX3	How much of the (last month) charges were for internet access?	IF 2 selected in TELTEMP then goto TCABLEX1
		(* Do not include data plans for mobile phones./)	ELSEIF 3 selected in TELTEMP then goto TAPPGMX1
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	ELSE goto TELOTH

Section	CAPI Variable Name	Question Text	Skip Instructions
)4A	TCABLEX1	How much of the (reference month) charges were for cable or satellite television service?	Goto TCABLEX2
		Description Amounts Amounts Amounts	
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
)4A	TCABLEX2	How much of the (month) charges were for cable or satellite television service?	Goto TCABLEX3
	-		
		Description Amount1 Amount2 Amount3	
244	TCADLEV2	(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	IF 2 coloated in TELTEND than gots TADDCNAV1
)4A	TCABLEX3	How much of the (last month) charges were for cable or satellite television service?	IF 3 selected in TELTEMP then goto TAPPGMX1
		Description Amount1 Amount2 Amount3	ELSE goto TELOTH
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	J
)4A	TAPPGMX1	How much of the (reference month) charges were for applications, games, or ringtones?	Goto TAPPGMX2
		Description Assessed Assessed	
		<u>Description Amount1 Amount2 Amount3</u> (TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
)4A	TAPPGMX2	How much of the (month) charges were for applications, games, or ringtones?	Goto TAPPGMX3
		Description Amount1 Amount2 Amount3	
)4A	TAPPGMX3	(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3) How much of the (last month) charges were for applications, games, or ringtones?	Goto TELOTH
J4A	TAPPGIVIAS	now much of the (last month) charges were for applications, games, or migtones?	GOID TELOTH
		Description Amount1 Amount2 Amount3	
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
)4A	TELOTH	Did (you/you or any members of your household) receive any other bills for telephones not	1: IF any 8500.TELCOMP = 1-20 then goto
		used entirely for business purposes?	PREVCOMP, next row of the table ELSE goto TELCOMP, next row of the table
			ELSE goto TELECTION I THE LADIE
		Description Amount1 Amount2 Amount3	2: Goto S4A_END
		(TELCOMP) (TELCHGX1) (TELCHGX2) (TELCHGX3)	
		1. Yes	
		2. No	
)4B	FONCARD	Q 9	1: Goto FONCARDX
		Since the first of (reference month), have (you/you or any members of your	2,DK,RF: Goto S4B_END
		household) purchased any pre-paid long distance telephone cards/minutes, not already	_
		reported?	
		◆ Do not include prepaid cellular minutes	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
04B	FONCARDX	What was the total amount paid?	Goto FONCRDCX
04B	FONCRDCX	How much of the total was paid this month?	Goto S4B_END
04C	S4C_INTRO	9	Goto UTI_ITEM
		Now I am going to ask about cable and satellite TV service, satellite radio service, and internet service expenditures.	
		Expense Amount Month (INTSERV) (INTCHGX) (INTMO)	
		1. Enter 1 to Continue	
04C	UTI_ITEM	♀ 9 ?[F1]	1-4: goto INTDESC
		Since the first of (reference month) have (you/you or any members of your household) had any expenses for	99: Goto S4C_END
		any expenses for	888: IF no more grid lines then goto S4C_END
		• Read each item on list.	ELSE goto UTI_ITEM - next line of table
		Cable or satellite TV services, not already reported?	
		2. Satellite radio services?	
		3. Internet connection or an internet service provider, not already reported?	
		4. Internet services away from home such as web cafes or internet kiosks? 99. None/ no more entries	
		888. Delete the line	
04C	INTDESC	What was the expense for?	IF INTNMBR = 4 AND UTI_ITEM = 3 AND (INTPER = 201607, 201608,
		Expense Amount Month (INTSERV) (INTCHGX) (INTMO)	201609 or training or systems test or ver test) then goto INTCOMP
			ELSE goto INTMO
04C	INTCOMP	◆ Ask if not apparent	Goto INTMO
		What is the name of the company providing the internet service?	
04C	INTMO	In what month was the expense?	Goto INTCHGX

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Enter 13 for same amount each month of the reference period	
		Expense Amount Month	
		(INTSERV) (INTCHGX) (INTMO)	
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
		13. Same amount each month.	
04C	INTCHGX	(What was your monthly expense?/How much was this expense?)	Goto INTCMB_S
		Expense Amount Month	
		(INTSERV) (INTCHGX) (INTMO)	
04C	INTCMB_S	Enter 'C' for combined expenses.	C: Goto INTCMB
			5. 530 mm 52
			EMPTY: Goto INTMORE
04C	INTCMB	♀ 9 ?[F1]	Goto INTMORE
		What was (Description) combined with?	
		• Enter all that apply, separate with commas.	
		Expense Amount Month (INTSERV) (INTCHGX) (INTMO)	
		(HATOLINA) (HATMO)	
		1. Cable or satellite TV services	
		2. Satellite radio services	
		3. Internet connection or an internet service provider	
		4. Internet services away from home such as web cafes or internet kiosks	
04C	INTMORE	Did you have any other expenses for (Description)?	 goto UTI_ITEM, next row of table

Section	CAPI Variable Name	Question Text	Skip Instructions
		Expense Amount Month (INTSERV) (INTCHGX) (INTMO)	2,DK,RF: Goto UTI_ITEM, next row of table
		1. Yes	
		2. No	
04D	S4D_INTRO	1 0	Goto UTC_ITEM
		Now I am going to ask about utility bills.	
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTLLY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	
		1. Enter 1 to Continue	
04D	UTC_ITEM	□ 10 ?[F1]	1-9: goto WHATPROP
		Since the first of (reference month), have (you/you or any members of your household) received any bills for any of the following utilities, fuels, or services? Do not include bills for properties used entirely for business.	99: Goto S4D_END
			888: Goto next row of table
		• Read each item on list:	
		 Electricity Natural or utility gas Fuel oil Bottled or tank gas Other fuels including wood Piped-in water and sewerage maintenance Garbage and recycling collection Water softening service Septic tank cleaning None/No more entries Delete the line 	
04D	WHATPROP	Which property was the bill for?	1-20,40: IF UTC_ITEM = 1-3, 6-7 and no data in any 8500.COMPNAME [1]-[40] then goto COMPNAME ELSEIF UTC_ITEM = 1-3, 6-7 and any data in
		1. ^Prop_display[1] 2. ^Prop_display[2]	8500.COMPNAME [1]-[40] then goto LASTCOMP ELSEIF BCeintro.BUSCREEN = 2 goto

Section	CAPI Variable Name	Question Text	Skip Instructions
		3. ^Prop_display[3]	UTLCHGX1
		4. ^Prop_display[4]	ELSE goto UTILBUSN
		5. ^Prop_display[5]	
		6. ^Prop_display[6]	41,42,43,DK,RF: Goto UTLPDESC
		7. ^Prop_display[7]	
		8. ^Prop_display[8] 9. ^Prop_display[9]	
		10. ^Prop_display[10]	
		11. ^Prop_display[11]	
		12. ^Prop_display[12]	
		13. ^Prop_display[13]	
		14. ^Prop_display[14]	
		15. ^Prop_display[15]	
		16. ^Prop_display[16]	
		17. ^Prop_display[17]	
		18. ^Prop_display[18]	
		19. ^Prop_display[19]	
		20. ^Prop_display[20] 40. ^Prop_display[40]	
		41. ^Prop_display[41]	
		42. Rented vacation Property	
		43. Property not owned or rented by household	
04D	UTLPDESC	Briefly describe the property.	IF UTC_ITEM = 1-3, 6-7 AND no data in any 8500.COMPNAME [1]-[40] then goto COMPNAME
			ELSEIF UTC ITEM = 1-3, 6-7 and any data in
			8500.COMPNAME [1]-[40] then goto LASTCOMP
			ELSEIF BCeintro.BUSCREEN = 2 goto UTLCHGX1
			ELSE goto UTILBUSN
04D	LASTCOMP	What is the name of the company or government agency which provides (Utility description)?	1-20: IF BCeintro.BUSCREEN = 2 goto UTLCHGX1 ELSE goto UTILBUSN
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP)(UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	55: Goto COMPNAME
		1. ^Comp_display[1] 2. ^Comp_display[2]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		3. ^Comp_display[3]	
		4. ^Comp_display[4]	
		5. ^Comp_display[5]	
		6. ^Comp_display[6] 7. ^Comp_display[7]	
		8. ^Comp_display[8]	
		9. ^Comp_display[9]	
		10. ^Comp_display[10]	
		11. ^Comp display[11]	
		12. ^Comp_display[12]	
		13. ^Comp_display[13]	
		14. ^Comp_display[14]	
		15. ^Comp_display[15]	
		16. ^Comp_display[16]	
		17. ^Comp_display[17]	
		18. ^Comp_display[18] 19. ^Comp_display[19]	
		20. ^Comp_display[20]	
		55. Company name not listed	
04D	COMPNAME	What is the name of the company or government agency which provides (Utility	IF BCeintro.BUSCREEN = 2 goto UTLCHGX1
		description)?	ELSE goto UTILBUSN
		Drop # Dropouts Deceription Company Name Hillits Amounts Amounts	
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTLY) (UTLCHGX1)(UTLCHGX2)	
		(UTLCHGX3)	
		(0120110710)	
04D	UTILBUSN	Will any part of the (Utility Description) charges be deducted as a business expense?	Goto UTLCHGX1
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3	
		(WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	
		(OTLONGAS)	
		1. Yes	
		2. No	
04D	UTLCHGX1	How much were you billed for in (reference month)?	Goto UTILCHGX2
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3	
		(WHATPROP) (UTLPDESC) (COMPNAME) (UTLY) (UTLCHGX1)(UTLCHGX2)	
		(UTLCHGX3)	
04D	UTLCHGX2	How much were you billed for in (month)?	Goto UTILCHGX3

Section	CAPI Variable Name	Question Text	Skip Instructions
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	
04D	UTLCHGX3	How much were you billed for in (last month)? Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2)	1-999999: IF UTLCHGX1 = 0 OR UTLCHGX2 = 0 then goto BLPERIOD ELSE goto UTILCMB_S
		(UTLCHGX3)	0: Goto BLPERIOD DK,RF: Goto UTILCMB S
04D	BLPERIOD	What is your usual billing period for the service?	1-4,DK,RF: Goto UTILCMB_S
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	5: Goto BLPEROTH
		 Month 2 months Quarter Annual Other 	
04D	BLPEROTH	• Specify:	Goto UTILCMB_S
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	
04D	UTILCMB_S	◆ Enter 'C' for a combined expense	C: Goto UTILCMB
			EMPTY: Goto MOREBILL
04D	UTILCMB	□ 10 ? [F1]	Goto MOREBILL
		What other utilities, fuels, or services was (Utility Description) combined with?	
		• Enter all that apply, separate with commas.	
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3 (WHATPROP)(UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2) (UTLCHGX3)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Electricity	
		Electricity Natural or utility gas	
		3. Fuel oil	
		4. Bottled or tank gas	
		5. Other fuels including wood	
		6. Piped-in water and sewerage maintenance	
		7. Garbage and recycling collection	
		8. Water softening service	
		9. Septic tank cleaning	
		77. Misc. combined (unable to specify/DK)	
04D	MOREBILL	Did you receive any other (Utility Description) bills?	1: goto UTC_ITEM, next row in the table
		Prop # Property Description Company Name Utility Amount1 Amount2 Amount3	2,DK,RF: IF ROW number = 40 then goto S4D_END
		(WHATPROP) (UTLPDESC) (COMPNAME) (UTILY) (UTLCHGX1)(UTLCHGX2)	ELSE goto UTC_ITEM, next row in the table
		(UTLCHGX3)	-
		1. Yes	
		2. No	
05	S5_INTRO	₽ 11-13	Goto CRB_ITEM
		Now I am going to ask about expenses for construction, repairs, alterations	
		and maintenance of property.	
		Prop. Description Work Desc.	
		(PRP5DESC) (WRKDESC)	
		1. Enter 1 to Continue	
05	CRB_ITEM	SCREEN 1	1-19: goto CRMPROPI
		🚇 11 ? [F1]	
			95: Goto next row
		First, let's talk about the construction or alteration of property you (owned/rent/own or	
		rent). (You should not include jobs that have been or will be totally reimbursed by	99: Goto ADVMATER
		someone outside your household such as a landlord./)	
			888: IF no more grid lines then goto ADVMATER
		Since the first of (reference month), have (you/you or any members of your household) had expenses for -	ELSE goto CRB_ITEM - next line of grid

CAPI Variable Name Question Text Section **Skip Instructions □** 12 ? [F1] Now, let's talk about maintenance and repairs for property you (owned/rent/own or rent). (You should not include jobs that have been or will be totally reimbursed by someone outside your household such as a landlord./)2 Read each item on list. 11-12 ? [F1] Have there been any expenses for any other property, such as property that you do not (owned/rent/own or rent), paid for by (you/you or any members of your household)? If Yes -Which type of job were those expenses for? 1. ^S5a_Fill1 2. ^S5a Fill2 3. ^S5a Fill3 4. ^S5a Fill4 5. ^S5a_Fill5 6. ^S5a Fill6 7. ^S5a_Fill7 8. ^S5a Fill8 9. ^S5a Fill9 10. ^S5a Fill10 11. ^S5a Fill11 12. ^S5a Fill12 13. ^S5a_Fill13 14. ^S5a Fill14 15. ^S5a Fill15 16. ^S5a_Fill16 17. ^S5a_Fill17 18. ^S5a Fill18

Section	CAPI Variable Name	Question Text	Skip Instructions
		19. ^S5a_Fill19	
		95. Continue List	
		99. None/No more entries	
		888. Delete the line	
05	CRMPROPI	On which property was the work done?	1-20: goto WRKDESC
			97: Goto WRKDESC
		Prop Description Work Desc	
		(WRKDESC) (PRP5DESC)	98,99,DK,RF: Goto PRP5DESC
		1. ^tempprop[1]	
		2. ^tempprop[2]	
		3. ^tempprop[3]	
		4. ^tempprop[4]	
		5. ^tempprop[5]	
		6. ^tempprop[6]	
		7. ^tempprop[7]	
		8. ^tempprop[8]	
		9. ^tempprop[9]	
		10. ^tempprop[10]	
		11. ^tempprop[11]	
		12. ^tempprop[12]	
		13. ^tempprop[13]	
		14. ^tempprop[14]	
		15. ^tempprop[15]	
		16. ^tempprop[16]	
		17. ^tempprop[17]	
		18. ^Property[18]	
		19. ^Property[19] 20. ^tempprop[20]	
		97. ^tempprop[21]	
		98. ^tempprop[22]	
		99. Property not owned or rented by household	
05	PRP5DESC	Briefly describe the property.	Goto WRKDESC
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
05	WRKDESC	What work was done?	IF CRB_ITEM = 1, 3 or 5 then goto S5BCMB_S
		The description should be adequate to classify "alteration", "repair", etc., and to identify in	ELSEIF CRB_ITEM = 2, 4, 6 or 8 then goto
		next	TEMPCODE

Section	CAPI Variable Name	Question Text	Skip Instructions
		interview.	ELSE goto CRMTYPE
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	3
05	CRMTYPE	? [F1]	2: IF CRB_ITEM = 9, 12, 14, or 16 then goto S5BCMB_S
		♦ Enter the appropriate job classification code.	ELSE goto TEMPCODE
		Prop Description Work Desc	3: IF CRB_ITEM = 9, 11-12, 16, 18, or 19 then goto
		(WRKDESC) (PRP5DESC)	S5BCMB_S ELSE goto TEMPCODE
		Alteration Replacement	4: IF CRB_ITEM = 10-11, 16, or 18 then goto
		4. Maintenance and repair	S5BCMB_S ELSE goto TEMPCODE
			DK,RF: Goto S5BCMB_S
05	TEMPCODE	Enter the appropriate detailed job code.	Goto S5BCMB_S
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
		1. ^S5a_Tempcode1	
		2. ^S5a_Tempcode2 3. ^S5a_Tempcode3	
		4. ^S5a_Tempcode4	
		5. ^S5a_Tempcode5	
		6. ^S5a_Tempcode6	
		7. ^S5a_Tempcode7	
		8. ^S5a_Tempcode8	
		9. ^S5a_Tempcode9 10. ^S5a_Tempcode10	
05	S5BCMB_S	◆ Enter 'C' for a combined expense	C: Goto S5B_COMB
			EMPTY: Goto CONTRACT
05	S5B_COMB	🕮 11-12 ? [F1]	Goto CONTRACT

What other work was included in this job?

• Enter all that apply, separate with commas.

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Homes under construction 2. Building an addition 3. Finishing a basement 4. Remodeling 5. Landscaping 6. Building outdoor patios 7. Repair outdoor patios 8. Painting/wallpapering 9. Plastering or paneling 10. Plumbing 11. Electrical work 12. Heat or air conditioning 13. Flooring installation/repair/replacement 14. Insulation 15. Roofing, gutters or downspouts 16. Siding 17. Install/Repair/Replace windows, etc 18. Masonry, brick or stucco 19. Other improvements or repairs	
05	CONTRACT	77. Misc. combined (unable to specify/DK) Did you do this job yourself or did you pay someone else to do all or part of the work?	1,DK,RF: Goto CRMMATER
		Prop Description Work Desc (WRKDESC) (PRP5DESC) 1. Self Only 2. Paid or contracted with someone else 3. Both	2,3: Goto CNTRCTX3
05	CNTRCTX3	What did you pay in (reference month) to someone else for this job? Prop Description Work Desc (WRKDESC) (PRP5DESC)	Goto CNTRCTX2
05	CNTRCTX2	What did you pay in (month) to someone else for this job? Prop Description Work Desc (WRKDESC) (PRP5DESC)	Goto CNTRCTX1
05	CNTRCTX1	What did you pay in (last month) to someone else for this job? Prop Description Work Desc (WRKDESC) (PRP5DESC)	Goto CNTRCTX0

Section	CAPI Variable Name	Question Text	Skip Instructions
05	CNTRCTX0	How much was paid this month? Prop Description Work Desc (WRKDESC) (PRP5DESC)	IF (CNTRCTX3 = DK or CNTRCTX2 = DK or CNTRCTX1 = DK or CNTRCTX0 = DK then goto CONTRCTX
		(ELSEIF ITEM = 1-4, 10-12 or 19 then goto MAJ_APPL
			ELSE goto CRMMATER
05	CONTRCTX	Since the first of (reference month), what is the total amount you paid to someone else for this job?	IF ITEM = 1-4, 10-12 or 19 then goto MAJ_APPL
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	Else goto CRMMATER
05	MAJ_APPL	□ 13 ? [F1]	1: Goto APP_SCR
		Did any of the cost since (reference month) include the cost of any appliances or equipment?	2,DK,RF: Goto CRMMATER
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
		1. Yes 2. No	
05	APP_SCR	□ 13 ? [F1]	1-13; Goto APPL_X1
		Which of the following appliances or equipment were included?	DK: Goto CRMMATER
		• Enter up to six, separate with commas.	
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
		 Cooking stove, range, or oven Microwave oven 	
		Refrigerator or home freezer Built-in dishwasher	
		5. Portable dishwasher	
		6. Garbage disposal7. Clothes washer or dryer	
		8. Range hood	
		9. Smoke alarms and detectors 10. Window air conditioner	
			D 04 (

Section	CAPI Variable Name	Question Text	Skip Instructions
		11. Portable cooling and heating equipment	
		12. Lamps, lighting fixtures, or ceiling fans	
		13. Other major home appliances and equipment	
05	APPL_X1	What was the total cost for (description)?	1-999999: IF there is a second selection in APP_SCR
			then goto APPL_X2
		Prop Description Work Desc	ELSE goto CRMMATER
		(WRKDESC) (PRP5DESC)	
			DK,RF: IF there is a second selection in APP_SCR
			then goto APPL_X2
0.5	4 D D L . V O		ELSE goto CRMMATER
05	APPL_X2	What was the total cost for (description)?	1-999999: IF there is a third selection in APP_SCRthen
		Pres Description Mark Desc	goto APPL_X3
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	ELSE goto CRMMATER
		(WRRDESC) (PRPSDESC)	DK,RF: IF there is a third selection in APP_SCR then
			goto APPL_X3
			ELSE goto CRMMATER
05	APPL_X3	What was the total cost for (description)?	1-999999: IF there is a fourth selection in APP_SCR
	, u . 2_, to	That has the total operior (accomplish)?	then goto APPL_X4
		Prop Description Work Desc	ELSE goto CRMMATER
		(WRKDESC) (PRP5DESC)	•
			DK,RF: IF there is a fourth selection in APP_SCR then
			goto APPL_X4
			ELSE goto CRMMATER
05	APPL_X4	What was the total cost for (description)?	1-999999: IF there is a fifth selection in APP_SCR then
			goto APPL_X5
		Prop Description Work Desc	ELSE goto CRMMATER
		(WRKDESC) (PRP5DESC)	
			DK,RF: IF there is a fifth selection in APP_SCR then
			goto APPL_X5
0.5	4 D D L V C		ELSE goto CRMMATER
05	APPL_X5	What was the total cost for (description)?	1-999999: IF there is a sixth selection in APP_SCR
		Dran Deceriation West, Dece	then goto APPL_X6
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	ELSE goto CRMMATER
		(WINDLOC) (FREDUCOC)	DK,RF: IF there is a sixth selection in APP_SCR then
			goto APPL_X6
			ELSE goto CRMMATER
05	APPL X6	What was the total cost for (description)?	Goto CRMMATER
	/	inat has the total cost for (accomption):	OOLO OTTIVIIVII TI LIT

CAPI Variable Name	Question Text	Skip Instructions
	(WRKDESC) (PRP5DESC)	
CRMMATER	Since the first of (reference month), have (you/you or any members of your household)	1: Goto SUPPLYX3
		2,DK,RF: Goto TOOLRENT
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	
	1. Yes 2. No	
SUPPLYX3	What was the total cost for all items (you/your household) purchased for this job in (reference month)?	Goto SUPPLYX2
	Prop Description Work Desc	
SUPPLYX2	What was the total cost for all items (you/your household) purchased for this job in (month)?	Goto SUPPLYX1
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	
SUPPLYX1	What was the total cost for all items (you/your household) purchased for this job in (last month)?	Goto SUPPLYX0
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	
SUPPLYX0	What was the total cost for all items (you/your household) purchased for this job in (current month)?	IF SUPPLYX3 = D or SUPPLYX2 = D or SUPPLYX1 = D or SUPPLYX0 = D then goto SUPPLYX
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	ELSE goto TOOLRENT
SUPPLYX	Since the first of (reference month), what was the total cost of all items (you/your household) purchased for this job?	Goto TOOLRENT
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	
TOOLRENT		1: Goto TOOLRTX3
	The results of equipment for doing this job:	2,DK,RF: Goto REIMBRS
	Prop Description Work Desc (WRKDESC) (PRP5DESC)	
	CRMMATER SUPPLYX3 SUPPLYX2 SUPPLYX1	CRMMATER Since the first of (reference month), have (you/you or any members of your household) PURCHASED any materials, supplies, tools or equipment for doing this job? Prop Description Work Desc (WRKDESC) (PRPSDESC) 1. Yes 2. No SUPPLYX3 What was the total cost for all items (you/your household) purchased for this job in (reference month)? Prop Description Work Desc (WRKDESC) (PRPSDESC) SUPPLYX2 What was the total cost for all items (you/your household) purchased for this job in (month)? Prop Description Work Desc (WRKDESC) (PRPSDESC) SUPPLYX1 What was the total cost for all items (you/your household) purchased for this job in (last month)? Prop Description Work Desc (WRKDESC) (PRPSDESC) SUPPLYX0 What was the total cost for all items (you/your household) purchased for this job in (current month)? Prop Description Work Desc (WRKDESC) (PRPSDESC) SUPPLYX0 Since the first of (reference month), what was the total cost of all items (you/your household) purchased for this job? Prop Description Work Desc (WRKDESC) (PRPSDESC) SUPPLYX Since the first of (reference month), what was the total cost of all items (you/your household) purchased for this job? Prop Description Work Desc (WRKDESC) (PRPSDESC) Since the first of (reference month), have (you/you or any members of your household) RENTED any tools or equipment for doing this job? Prop Description Work Desc

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
05	TOOLRTX3	What was the total cost for all items (you/your household) rented for this job in (reference month)?	Goto TOOLRTX2
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
05	TOOLRTX2	What was the total cost for all items (you/your household) rented for this job in (month)?	Goto TOOLRTX1
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
05	TOOLRTX1	What was the total cost for all items (you/your household) rented for this job in (last month)?	Goto TOOLRTX0
		·	
		<u>Prop Description Work Desc</u> (WRKDESC) (PRP5DESC)	
05	TOOLRTX0	What was the total cost for all items (you/your household) rented for this job in (current month)?	IF (TOOLRTX3 = D or TOOLRTX2 = D or TOOLRTX1 = D or TOOLRTX0 = D) then goto TOOLRTX
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	ELSE goto REIMBRS
05	TOOLRTX	Since the first of (reference month), what was the total cost for all items (you/your household) rented for this job?	Goto REIMBRS
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
05	REIMBRS	Was or will any of the total cost of this job be reimbursed or paid by someone outside of your household?	1: Goto REIMBRSZ
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	2,DK,RF: IF BUSCREEN = 2 then goto ANY5MORE ELSE goto CRMBSNSD
		(WRRDESC) (FRESDESC)	
		1. Yes 2. No	
05	REIMBRSZ	What percent of the total cost was or will be reimbursed or paid by someone outside of your household?	1-99,DK,RF: IF.BUSCREEN = 2 then goto ANY5MORE ELSE goto CRMBSNSD
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	100: Goto ERR2_REIMBRSZ
05	CRMBSNSD	Were or will any of these expenses for this job be deducted as a business expense?	1: Goto CRMBSNSZ

Section	CAPI Variable Name	Question Text	Skip Instructions
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	2,DK,RF: Goto ANY5MORE
		1. Yes 2. No	
05	CRMBSNSZ	What percent was or will be deducted?	1-99,DK,RF: Exit block and goto ANY5MORE
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	100: Goto ERR2_CRMBSNSZ
05	ANY5MORE	Did you have any other expenses for ^S5_desc?	Goto CRB_ITEM, next row
		Prop Description Work Desc (WRKDESC) (PRP5DESC)	
		1. Yes 2. No	
05	ADVMATER	11-12	1: Goto ADVDESC 2,DK,RF: Goto MATNSPEC
		Since the first of (reference month), excluding this month, have (you/you or any members of your household) purchased any materials or supplies for JOBS NOT YET STARTED?	
		1. Yes 2. No	
05	ADVDESC	What kind of job will the materials be used for?	Goto JOBCODE
		• Enter a brief description.	
05	JOBCODE	🔐 11-12 ? [F1]	Goto ADVMATX
		 Select a job type below. 	
		 Homes under construction Building an addition Finishing a basement Remodeling 	
		5. Landscaping 6. Build outdoor patios	
		7. Repair outdoor patios	5 00 (

Section	CAPI Variable Name	Question Text	Skip Instructions
		8. Painting/wallpapering	·
		9. Plastering or paneling	
		10. Plumbing	
		11. Electrical work	
		12. Heat or air conditioning	
		13. Flooring installation/repair/replacement	
		14. Insulation	
		15. Roofing, gutters or downspouts	
		16. Siding	
		17. Install/Repair/Replace windows, etc	
		18. Masonry, brick or stucco	
<u> </u>	4 D) (1 4 4 T) (19. Other improvements or repairs	0.1.054040.0
)5	ADVMATX	What was the total cost of these materials and supplies?	Goto S5ACMB_S
)5	S5ACMB_S	◆ Enter 'C' for a combined expense	C: Goto S5A_COMB
			Empty: Goto MATNSPEC
5	S5A_COMB	□ 11-12 ? [F1]	Goto MATNSPEC
		What other work will be included in this job?	
		Enter all that apply, separate with commas.	
		Homes under construction	
		2. Building an addition	
		3. Finishing a basement	
		4. Remodeling	
		5. Landscaping	
		6. Building outdoor patios	
		7. Repair outdoor patios	
		8. Painting/wallpapering	
		9. Plastering or paneling	
		10. Plumbing	
		11. Electrical work	
		12. Heat or air conditioning	
		13. Flooring installation/repair/replacement	
		14. Insulation	
		15. Roofing, gutters or downspouts	
		16. Siding	
		17. Install/Repair/Replace windows, etc	
		18. Masonry, brick or stucco	

Section	CAPI Variable Name	Question Text	Skip Instructions
		19. Other improvements or repairs	
OF	MATNICDEC	77. Misc. combined (unable to specify/DK)	1. Coto MATNEROV
05	MATNSPEC	Since the first of (reference month), excluding this month, have (you/you or any members	1: Goto MATNSPCX
		of your household) purchased any materials or supplies NOT FOR ANY SPECIFIC JOB?	2,DK,RF: Goto S5_END
		any materials of supplies NOT FOR ANT SI ESH TO JOB!	2,DK,KI . 00t0 00_END
		1. Yes	
		2. No	
05	MATNSPCX	What was the total cost?	Goto S5_END
06A	S6A_INTRO	1 4	Goto APA_ITEM
		Now I am going to ask about the purchase or rental of major household appliances.	
		Please include any shipping and handling charges with the cost of any item that was	
		shipped.	
		Description Type Month Amount	
		(MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/	
		Rented) MAJRENTX)	
		1. Enter 1 to Continue	
06A	APA_ITEM	1. Enter 1 to Continue 14 ? [F1]	1-8: goto MAJTYPE
OUA	AI A_II EW	BOW IT : [i I]	10. goto MASTITE
		Since the first of (reference month), have (you/you or any members of your household)	99: Goto S6A_END
		purchased or rented any of the following items for your household	_
		or for someone outside of your household?	888: IF no more grid lines then goto S6A_END
			ELSE goto APA_ITEM - next line of grid
		Read each item on list.	
		1. Microwave oven	
		2. Cooking stove, range or oven	
		3. Range hood	
		4. Refrigerator or home freezer	
		5. Built-in dishwasher	
		6. Portable dishwasher	
		7. Garbage disposal 8. Clothes washer or dryer	
		99. None/No more entries	
		888. Delete the line	

Section	CAPI Variable Name	Question Text	Skip Instructions
06A	MAJTYPE	What did you purchase(or rent/)?	Goto GFTC_MAJ
		◆ Enter brief description of the item	
		Enter biler description of the term	
		Description Type Month Amount	
		(MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/ Rented) MAJRENTX	
06A	GFTC_MAJ	Was this item -	1,3,DK,RF: Goto MAJ_MO
			-
		Description Type Month Amount (MA ITYPE) (Purchased (MA I MO) (MA IPHP)	2: Goto MAJ_AMOUNT
		(MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/ Rented) MAJRENTX	
		Tollied) Whiteleff	
		1. Purchased for someone inside the household?	
		^S6ARENT Purchased for someone outside your household?	
06A	MAJ MO	When did you purchase it?	Goto MAJ AMOUNT
	_		_
		<u>Description Type </u>	
		Rented) MAJRENTX	
		 January February 	
		3. March	
		4. April	
		5. May	
		6. June 7. July	
		8. August	
		9. September	
		10. October 11. November	
		12. December	
06A	MAJ_AMOUNT	(What was the total rental expense since the first of (reference month) not including	1-999999: Goto MAJTAX
		(current month	DK,RF: Goto INSTALL
		Description Type Month Amount	DIN, R.F. GUIU INGTALL
		(MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/	
	NAA 3TAN/	Rented) MAJRENTX	O-t- INIOTALI
06A	MAJTAX	Did this include sales tax?	Goto INSTALL

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Type Month Amount (MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/Rented) MAJRENTX	
		1. Yes 2. No	
06A	INSTALL	Were there any extra charges for installation or delivery?	1: Goto MAJINSTX
		◆ Include charges for disposal of old appliances.	2,DK,RF: Goto MAJCMB_S
		Description Type Month Amount (MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/Rented) MAJRENTX	
		1. Yes 2. No	
06A	MAJINSTX	How much?	Goto MAJCMB_S
		<u>Description Type Month Amount</u> (MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/ Rented) MAJRENTX	
06A	MAJCMB_S	◆ Enter 'C' for a combined expense.	C: Goto MAJCMB
			empty: Goto MAJOTHER
06A	MAJCMB	🚇 14 ? [F1]	Goto MAJOTHER
U6A	МАЈСМВ	What other appliances is the (Appliance description) combined with?	GOTO MAJOTHER
		 Enter all that apply, separate with commas 	

- Enter all that apply, separate with commas
- 1. Microwave oven
- 2. Cooking stove, range or oven
- 3. Range hood
- 4. Refrigerator or home freezer
- 5. Built-in dishwasher
- 6. Portable dishwasher
- 7. Garbage disposal8. Clothes washer or dryer
- 77. Misc. combined (unable to specify/DK)

Section		Question Text	Skip Instructions
06A	MAJOTHER	Did you purchase(or rent/) any other (Appliance Description)?	1: Goto APA_ITEM, next row of grid
		Description Type Month Amount (MAJTYPE) (Purchased/ (MAJ_MO) (MAJPURX/Rented) MAJRENTX	2,DK,RF: IF Row number = 7 then goto S6A_END ELSE goto APA_ITEM, next row of grid
		1. Yes 2. No	
6B	S6B_INTRO	15 - 20	Goto APB_ITEM
		Now I am going to ask about expenses for the purchase or rental of household appliances and other selected items. Please include any shipping and handling charges with the cost of any item that was shipped.	
		Description Type Month Amount MINTYPE) (Purchased/ (MIN_MO) (MINPURX/ Rented) MINRENTX)	
		1. Enter 1 to Continue	
6B	APB_ITEM	SCREEN 1	1-37: Goto MINTYPE
		15 ? [F1]	95: Goto APB_ITEM - next line of grid
		Since the first of (reference month), have (you/you or any members of your household) purchased or rented any of the following items?	99: Goto S6B_END
		nousehold) parenased of reflect any of the following fields:	888: IF no more grid lines then goto S6B_END ELSE goto APB_ITEM - next line of grid
		Read each item on list	
		SCREEN 2	
		□ 16 ? [F1]	
		Have (you/you or any members of your household) purchased or rented any	
		• Read each item on list	
		SCREEN 3	

Section	CAPI Variable Name	Question Text	Skip Instructions
		₩ 17 ? [F1]	
		Have (you/you or any members of your household) purchased or rented a	any
		◆ Read each item on list	
		Toda dadi itali on ist	
		SCREEN 4	
		Have (you/you or any members of your household) purchased or rented a	nv
		Read each item on list	···y
		· Redu edeli item on iist	
		Screen 5	
		□ 19 ? [F1]	
		Have (you/you or any members of your household) purchased or rented a	ny
		Read each item on list	
		Screen 6	
		□ 20 ? [F1]	
		Have (you/you or any members of your household) purchased any	
		• Read each item on list.	
		Small electrical kitchen appliances	
		Electrical personal care appliances Electrical floor cleaning equipment	
		4. Other household appliances	
		5. Sewing machines	
		6. GPS devices, calculators, and fax machines	
		7. Digital book readers or tablets	

	Question Text	Skip Instructions
	8. Computer software including computer games^FOR_NON_BUS	
	10. Computer accessories	
	11. Portable memory, such as flash drives, memory cards, and recordable discs and tapes	
	12. Video game hardware or accessories	
	13. Telephones or accessories	
	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 including those installed in vehicles	
	22. DVD players, VCRs, DVRs, or video cameras	
	23. Satellite dishes, receivers or accessories	
	24. Handheld personal music players	
	25. Stereos, radios, speakers, and sound components, including those installed in vehicles	
	26. Other sound or video equipment, including accessories	
	27. General sports equipment (exclude athletic shoes for sports related use, such as football,	
	baseball, soccer or bowling)	
	28. Health and exercise equipment	
	29. Camping equipment	
	30. Hunting and fishing equipment, including all guns	
	31. Winter sports equipment	
	32. Water sports equipment	
	33. Outboard motors	
	34. Bicycles or bicycle equipment	
	35. Tricycles or battery powered riders	
	36. Playground equipment	
	37. Other sports or recreation equipment	
	95. Continue list	
	99. None/No more entries	
MINTYPE	888. Delete the line What did you purchase(or rent/)?	Goto GFTCMIN

• Enter a brief description of item.

(* Report items such as flash drives, memory cards, recordable discs, and tapes as code 13, Portable memory cards, recordable discs, and tapes as cod

Description Type Month Amount

Section	CAPI Variable Name	Question Text	Skip Instructions
		(MINTYPE) (Purchased/ (MIN_MO) (MINPURX/	
		Rented) MINRENTX)	
06B	GFTCMIN	Was this item	1,3,DK,RF: Goto MIN_MO
			2: Coto MINI AMOUINIT
		1. Purchased for someone inside the household?	2: Goto MIN_AMOUNT
		2. ^S6BRENT	
		3. Purchased for someone outside your household?	
06B	MIN_MO	When did you purchase it?	Goto MIN_AMOUNT
002		Times and you purchase it.	
		Description Type Month Amount	
		(MINTYPE) (Purchased/ (MIN_MO) (MINPURX/	
		Rented) MINRENTX)	
		1. January	
		2. February 3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
000	NAINI ANAOLINIT	12. December	1 000000. Cata MINITAV
06B	MIN_AMOUNT	(What was the total rental expense since the first of (reference month) not including (current month)?/What did it cost?)	1-999999: Goto MINTAX
		(current month)?/what did it cost?)	DK,RF: Goto MINCMB_S
		Description Type Month Amount	DIC, ICI. COLO MINICIMID_S
		MINTYPE) (Purchased/ (MIN_MO) (MINPURX/	
		Rented) MINRENTX	
06B	MINTAX	Did this include sales tax?	Goto MINCMB_S
		Description Torres Manufic Assessed	
		Description Type Month Amount (MINITYPE) (Purchased (MINITYPE))	
		(MINTYPE) (Purchased/ (MIN_MO) (MINPURX/ Rented) MINRENTX)	
		Reflect) WHINEINTA)	

1. Yes 2. No

Section	CAPI Variable Name	Question Text	Skip Instructions
06B	MINCMB_S	◆ Enter 'C' for a combined expense.	C: Goto MINCMB
			empty: IF APB_ITEM = 8, 21, 23, 25, or 26 then goto
			INSTLSCR
			ELSE goto S6BOTHER
06B	MINCMB	₽ 15-20 ?[F1]	IF ITEM = 8, 21, 23, 25, 26 then goto INSTLSCR
			ELSE goto S6BOTHER

What other item is the (Item description) combined with?

- Enter all that apply, separate with commas.
- 1. Small electric kitchen appliances
- 2. Electric personal care appliances
- 3. Electric floor cleaning equipment
- 4. Other household appliances
- 5. Sewing machines
- 6. GPS devices, calculators, and fax machines
- 7. Digital book readers or tablets
- 8. Computers, computer systems, or related hardware
- 9. Computer software including computer games^FOR_NON_BUS
- 10. Computer accessories
- 11. Portable memory such as flash drives, memory cards, and recordable discs and tapes
- 12. Video game hardware or accessories
- 13. Telephones or accessories
- 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 including those installed in vehicles
- 22. DVD Players, VCRs, DVRs, or video cameras
- 23. Satellite dishes, receivers or accessories
- 24. Handheld personal music players
- 25. Stereos, radios, speakers, and sound components, including those installed in vehicles
- 26. Other sound or video equipment including accessories
- 27. General sports equipment (exclude athletic shoes for sports related use, such as football, baseball, soccer or bowling)
- 28. Health and exercise equipment

Section	CAPI Variable Name	Question Text	Skip Instructions
		29. Camping equipment	
		30. Hunting and fishing equipment, including all guns	
		31. Winter sports equipment	
		32. Water sports equipment	
		33. Outboard motors	
		34. Bicycles or bicycle equipment	
		35. Tricycles or battery powered riders	
		36. Playground equipment	
		37. Other sports or recreation equipment	
06B	INSTLSCR	77. Misc. combined (unable to specify/DK) Were there any additional charges for installation or set-up?	1: Goto INSTLLEX
ООВ	INSTESON	were there any additional enarges for installation of set-up:	I. GOID INSTELLA
		Description Type Month Amount	2,DK,RF: IF INTNMBR = 4 AND ITEM = 21 AND
		(MINTYPE) (Purchased/ (MIN_MO) (MINPURX/	(INTPER = 201607, 201608, 201609, 201406, 201407
		Rented) MINRENTX)	or 201409) then goto TVSTORE
			ELSE goto MORE
		1. Yes	
		2. No	
06B	INSTLLEX	How much?	1-99999: IF INSTLLEX It 40 or gt 1000 then goto
			ERR1_INSTLLEX
		Description Type Month Amount	ELSEIF INTNMBR = 4 AND ITEM = 21 AND
		(MINTYPE) (Purchased/ (MIN_MO) (MINPURX/	(INTPER = 201607, 201608, 201609, 201406, 201407
		Rented) MINRENTX)	or 201409) then goto TVSTORE
			ELSE goto MORE
			DK,RF: IF INTNMBR = 4 AND ITEM = 21 AND
			(INTPER = 201607, 201608, 201609, 201406, 201407
			or 201409)) then goto TVSTORE
			ELSÉ goto MORE
06B	TVSTORE	Where did you purchase this television?	IF ENTRY contains ".com", ".Com", ".cOm", ".coM",
			".COm", ".CoM", ".cOM", or ".COM", then goto MORE
		 Enter store, website, or company name 	
		If purchased from a private individual, enter "private individual."	ELSEIF ENTRY = DK or RF then goto MORE
			ELSE goto TVPURCH
06B	TVPURCH	◆ Ask if not apparent	1,DK,RF: Goto MORE
		Was this purchased online or in-person?	2: Goto TVPURLOC
		·	
		1. Online	
		2. In person	

Section	CAPI Variable Name	Question Text	Skip Instructions
06B	TVPURLOC	Where is ^TVSTORE_fill located?	Goto MORE
		◆ Enter city and state	
06B	S6BOTHER	Did you purchase(or rent/) any other (description)?	1: Goto APB ITEM, next line on the grid
		Description Type Month Amount (MINTYPE) (Purchased/ (MIN_MO) (MINPURX/Rented) MINRENTX)	2,DK,RF: IF row number = 34 then goto S6B_END ELSE goto APB_ITEM, next line on the grid
		1. Yes 2. No	
07	S7_INTRO	Q 21	Goto EQB_ITEM
		Now I will ask about expenditures for household item maintenance or repairs and service contracts.	
		Description Month Amount (RPRDESC) (SRVCMOB) (REPAIRX)	
		1. Enter 1 to Continue	
07	EQB_ITEM	□ 21 ? [F1]	1-11: Goto RPRDESC
		Since the first of (reference month), did (you/you or any members of your household) have any expenses for service contracts, maintenance, or repairs for any of the following items?	95: Goto next row 99: Goto S7_END
		◆ Read each item on list	33. Gotto 37_END
			888: IF ROW number = 13 then goto S7_END ELSE goto APB_ITEM - next line of grid
		 Garbage disposal, range hood, or built-in dishwasher Other household appliances, such as washer, refrigerator, or range/oven Television, radio, video, or sound equipment, including those installed in autos or other vehicles Computers, computer systems, or related equipment for non-business use Lawn or garden equipment Musical instruments or accessories Hand or power tools Photographic equipment Sport or recreational equipment Termite or pest control Heating or air conditioning service contracts None/No more entries 	

Section	CAPI Variable Name	Question Text	Skip Instructions
		888. Delete the line	
07	RPRDESC	What did the service contract(or repair/) cover?	Goto SRVCMOB
		Description Month Amount_	
		(RPRDESC) (SRVCMOB) (REPAIRX)	
07	SRVCMOB	In what month was the expense?	Goto REPAIRX
		Description Month Amount (RPRDESC) (SRVCMOB) (REPAIRX)	
		1. January	
		2. February	
		3. March4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
27	DEDAIDY	12. December	1 000000 Onto DEDAIDTY
07	REPAIRX	What was the total cost?	1-999999: Goto REPAIRTX
		Description Month Amount	DK,RF: Goto RPRCB_S
		(RPRDESC) (SRVCMOB) (REPAIRX)	
07	REPAIRTX	Did this include sales tax?	Goto RPRCB_S
		Description Month Amount (RPRDESC) (SRVCMOB) (REPAIRX)	
		1. Yes	
		2. No	
07	RPRCB_S	• Enter 'C' for a combined expense.	C: Goto REPAIRCM
			Empty: Goto RPRMORE
07	REPAIRCM	🔐 21 ? [F1]	Goto RPRMORE

What other service contracts, maintenance, or repairs was ^RPRMORE_FILL combined with?

Section	CAPI Variable Name	Question Text	Skip Instructions
		◆ Enter all that apply, separate with commas	_
		Description Month Amount	
		Description Month Amount (RPRDESC) (SRVCMOB) (REPAIRX)	
		(RPRDESC) (SRVCMOB) (REPAIRX)	
		1. Garbage disposal, range hood, or built-in dishwasher	
		2. Other household appliances, such as washer, refrigerator, or range/oven	
		3. Television, radio, video, or sound equipment, including those installed in autos or other vehicles	
		4. Computers, computer systems, or related equipment for non-business use	
		5. Lawn or garden equipment	
		6. Musical instruments or accessories	
		7. Hand or power tools	
		8. Photographic equipment	
		9. Sport or recreational equipment	
		10. Termite or pest control	
		11. Heating or air conditioning service contracts	
07	DDDMODE	77. Misc. Combined (unable to specify/DK)	1. Cata FOR ITEM part line on said
07	RPRMORE	Did you pay for any other (service contracts, maintenance, or repairs/service contracts) for (Description)?	1: Goto EQB_ITEM, next line on gna
		(Description):	2,DK,RF: IF ROW number = 13 then goto S7 END
			ELSE goto EQB_ITEM, next line on grid
		Description Month Amount	ELSE goto EQB_ITEM, Hext line of grid
		(RPRDESC) (SRVCMOB) (REPAIRX)	
		1. Yes	
		2. No	
08A	S8A_INTRO	□ 22-25	Goto FRA_ITEM
		New Law reign to call about asymptotic few house from indicate and valeted become led items	
		Now I am going to ask about expenses for home furnishings and related household items. Please include any shipping and handling charges with the cost of any item that was	
		shipped.	
		Silipped.	
		<u>Item Month Amount</u>	
		(FURNDESC) (FURNMO) (FURNPURX)	
		1. Enter 1 to Continue	
A80	FRA_ITEM	SCREEN 1	1-28: Goto FURNDESC
		□ 22 ? [F1]	95: Goto next row
		see ee · f + 1	JO. JOIO HOAL TOW

Section CAPI Vari	iable Name	Question Text	Skip Instructions
		Since the first of (reference month), have (you/you or any members of your household) purchased for (you/your household) or for someone outside of your household any Read each item on list	99: Goto S8A_END888: IF ROW number = 34 then goto S8A_END ELSE goto FRA_ITEM - next line of grid
		SCREEN 2	
		₩ 23 ? [F1]	
		Have (you/you or any members of your household) purchased any	
		• Read each item on list	
		SCREEN 3	
		₽ 24 ?[F1]	
		Have (you/you or any members of your household) purchased any	
		• Read each item on list	
		SCREEN 4	
		□ 25 ? [F1]	
		Have (you/you or any members of your household) purchased any	
		• Read each item on list	
		 Sofas? Living room chairs? Living room tables? Ping-pong, pool tables or other similar recreation room items? Other living room, family, or recreation room furniture including desks, wall units, and shelving? 	

Section	CAPI Variable Name	Question Text	Skip Instructions
		6. Living room furniture combinations?	
		7. Dining room or kitchen furniture?	
		8. Mattresses or box springs?	
		9. Bedroom furniture other than mattresses or box springs?	
		10. Infants furniture?	
		11. Infants equipment?	
		12. Patio, portch, or outdoor furniture?	
		13. Barbeque grills or outdoor decorative items?	
		14. Office furniture for home use?	
		15. Lamps, lighting fixtures, or ceiling fans?	
		16. Other household decorative items?	
		17. Closet and storage items?	
		18. Travel items including luggage?	
		19. Stainless, silver, or other flatware?	
		20. Non-electric cookware?	
		21. Dishes, glasses, or serving pieces?	
		22. Bedroom linens?	
		23. Bathroom linens?	
		24. Kitchen, dining room, or other linens?	
		25. Slipcovers, decorative pillows, or cushions?	
		26. Rugs or other non-permanent floor coverings, including carpet squares?	
		27. Curtains or drapes?	
		28. Blinds, shades, or other window coverings?	
		95. Continue	
		99. None/No more entries	
		888. Delete the line	
A80	FURNDESC	What did you purchase?	Goto FURNMO
		<u>Item Month Amount</u>	
		(FURNDESC)(FURNMO) (FURNPURX)	
08A	FURNMO	In what month did you purchase it?	Goto FURNGFTC
		<u>Item Month Amount</u>	
		(FURNDESC)(FURNMO) (FURNPURX)	
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	

Section	CAPI Variable Name	Question Text	Skip Instructions
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
A80	FURNGFTC	Was this purchased for your household or for someone outside of your household?	Goto FURNPURX
		Item Month Amount	
		(FURNDESC) (FURNMO) (FURNPURX)	
		1. For use by household	
		2. For someone outside the household	
08A	FURNPURX	What was the purchase price?	1-999999: Goto FRNPURTX
		<u>Item Month Amount</u>	DK,RF: Goto S8ACMB_S
		(FURNDESC)(FURNMO) (FURNPURX)	
A80	FRNPURTX	Did this include sales tax?	Goto S8ACMB_S
		Item Month Amount	
		(FURNDESC)(FURNMO) (FURNPURX)	
		1. Yes	
		2. No	
08A	S8ACMB_S	Enter 'C' for a combined expense.	C: Goto S8A_CMB
	_		_
			Empty: Goto ANYOTH8
08A	S8A CMB	🚇 22-25 ?[F1]	Goto ANYOTH8

What was combined with fill for COMBCODE?

• Enter all that apply, separate with commas.

<u>Item Month Amount</u> (FURNDESC)(FURNMO) (FURNPURX)

- 1. Sofas
- 2. Living room chairs
- 3. Living room tables
- 4. Ping-pong, pool tables or other similar recreation room items
 5. Other living room, family, or recreation room furniture including desks, wall units, and shelving

Section	CAPI Variable Name	Question Text	Skip Instructions
		6. Living room furniture combinations	
		7. Dinning room or kitchen furniture	
		8. Mattresses or box springs	
		9. Bedroom furniture other than mattresses or box springs	
		10. Infants furniture	
		11. Infants equipment	
		12. Patio, porch, or outdoor furniture	
		13. Barbeque grills or outdoor decorative items	
		14. Office furniture for home use	
		15. Lamps, lighting fixtures, or ceiling fans	
		16. Other household decorative items	
		17. Closet and storage items	
		18. Travel items including luggage	
		19. Stainless, silver or other flatware	
		20. Non-electric cookware	
		21. Dishes, glasses, or serving pieces	
		22. Bedroom linens	
		23. Bathroom linens	
		24. Kitchen, dining room, or other linens	
		25. Slipcovers, decorative pillows or cushions	
		26. Rugs or other non-permanent floor coverings, including carpet squares	
		27. Curtains or drapes	
		28. Blinds, shades or other window coverings	
004	ANIXOTUO	77. Misc. Combined (unable to specify/DK)	1. Cata FDA ITEM payt line of axid
08A	ANYOTH8	Did you purchase any other (description)?	1: Goto FRA_ITEM, next line of grid
		<u>Item Month Amount</u>	2,DK,RF: IF ROW number = 34 then goto S8 END
		(FURNDESC)(FURNMO) (FURNPURX)	ELSE goto FRA ITEM, next line of grid
		(· · · · · · = - · ·) (· · · · · · · · ·)	good
		1. Yes	
		2. No	
08B	FURNRNTL	Since the first of (reference month), have (you/you or any members of your household)	1: Goto FURNRNTX
		rented or leased any furniture?	
		·	2,DK,RF: Goto REPFURN
		1. Yes	
		2. No	
08B	FURNRNTX	What was the total expense?	Goto FRNRNTCX
08B	FRNRNTCX	How much of the total amount was spent this month?	Goto REPFURN
08B	REPFURN	Since the first of (reference month), have (you/you or any members of your household) had	1: Goto REPFURNX
		any expenses for repairing, refinishing or reupholstering furniture, including the cost for	
		fabric?	2,DK,RF: Goto S8B END

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
08B	REPFURNX	What was the total expense?	Goto REPFRNCX
08B	REPFRNCX	How much of the total amount was spent this month?	Goto S8B END
09A	S9A_INTRO	<u>.</u> 26-27	Goto CLA_ITEM
		Now I am going to ask about clothing, footwear, and accessories, for infants, children, and adults. You may find it helpful to refer to receipts, credit card statements or other records to answer the questions. Please include any shipping and handling charges with the cost of any item that was shipped.	
		Description Name Month Amount (CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	
		1. Enter 1 to Continue	
09A	CLA_ITEM	SCREEN 1	1-20: Goto CLODESCA
			95: Goto next row
		Since the first of (reference month), have (you/you or any members of your household) purchased any of the following items either for members of your household or for someone outside your household?	99: Goto S9A_END
		Read each item on list.	888: IF no more rows then goto S9A_END ELSE goto CLA_ITEM - next row of the table
		SCREEN 2	
		Have (you/you or any members of your household) purchased any	
		◆ Read each item on list.	
		 Coats, jackets or furs Sport coats, tailored jackets, or blazers Suits Vests Shirts, sweaters, blouses, or tops Pants, jeans or shorts Dresses 	

Section	CAPI Variable Name	Question Text	Skip Instructions
		8. Skirts	
		9. Undergarments	
		10. Hosiery	
		11. Nightwear or loungewear	
		12. Accessories	
		13. Swimsuits or warm-up or ski suits	
		14. Uniforms, for which the cost is not reimbursed	
		15. Costumes	
		16. Footwear, including athletic footwear	
		17. Diapers	
		18. Layettes	
		19. Watchers	
		20. Jewelry	
		95. Continue List	
		99. None/No more entries	
		888. Delete the line	
09A	CLODESCA	What did you buy?	Goto CLOINOUT
		◆ Describe briefly the item purchased. <u>Description Name Month Amount</u> (CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	
09A	CLOINOUT	Was this (were these) purchased for someone inside or outside of your household?	1: IF CLA_ITEM = 1-18 then goto FORWHOM ELSE goto CLOTHMOA
		1. Inside your household	2,3: IF CLA_ITEM = 1-18 then goto FOROUTCU
		Outside your household	ELSE goto CLOTHMOA
		3. Both inside and outside your household	ELSE goto CLOTTIMOA
		3. Doin inside and outside your nousehold	DK,RF: Goto CLOTHMOA
09A	FORWHOM	For whom was it purchased?	IF more than 1 person is selected then goto CLONAME
03/4	1 GIXVVI IOIVI	For whom was it parchased:	II Thore than I person is selected then goto CEONAME
		• Enter all that apply, separate with commas.	ELSE goto CLOTHMOA
		1. ActiveCU[1]	
		2. ActiveCU[2]	
		3. ActiveCU[3]	
		4. ActiveCU[4]	
		5. ActiveCU[5]	
		6. ActiveCU[6]	
		7. ActiveCU[7]	
		8. ActiveCU[8]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		9. ActiveCU[9]	
		10. ActiveCU[10]	
		11. ActiveCU[11]	
		12. ActiveCU[12]	
		13. ActiveCU[13]	
		14. ActiveCU[14]	
		15. ActiveCU[15]	
		16. ActiveCU[16]	
		17. ActiveCU[17]	
		18. ActiveCU[18]	
		19. ActiveCU[19]	
		20. ActiveCU[20]	
		21. ActiveCU[21]	
		22. ActiveCU[22]	
		23. ActiveCU[23]	
		24. ActiveCU[24]	
		25. ActiveCU[25]	
		26. ActiveCU[26]	
		27. ActiveCU[27]	
		28. ActiveCU[28]	
		29. ActiveCU[29]	
		30. ActiveCU[30]	
		77. Don't Know	
09A	FOROUTCU	For whom was this purchased?	40-44,77: Goto CLONAME
		Enter all age/sex categories that apply to the purchase, separate with commas.	RF: Goto CLOTHMOA
		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	
09A	CLONAME	• Enter name of person(s).	Goto CLOTHMOA
09A	CLOTHMOA	When did you purchase it?	Goto CLOTHXA
		(* Enter 13 for same amount each month/)	
		Description Name Month Amount	
		(CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	
		(OLODESCA) (OLONANIE) (OLOTTINIOA) (OLOTTIAA)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
004	CLOTHVA	13. ^S09_13Option	1 000000. Cata OLOTHTVA
09A	CLOTHXA	(What is your monthly expense?/How much did it cost?)	1-999999: Goto CLOTHTXA
		Description Name Month Amount	DK,RF: Goto CLOCMBA_S
		(CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	BRATT. GOLO GEOGINBAT_G
		(616116) (6161111) (616111116) (616111111)	
09A	CLOTHTXA	Did this include sales tax?	Goto CLOCMBA_S
		Description Name Month Amount (CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	
		1. Yes	
		2. No	
09A	CLOCMBA_S	• Enter 'C' for a combined expense.	C: Goto COMBCODE
			EMPTY: IF INTNMBR = 4 AND (ITEM = 2 or 3) AND
			(INTPER = 201607, 201608, 201609, 201406, 201407
			or 201409) then goto CLASTORE
			ELSÉ goto MORE
			IF anything other than a 'C' or the enter key is entered,
			goto CK_C
09A	CLOCMBA	□ 26-27 ? [F1]	IF INTNMBR = 4 AND (ITEM = 2 or 3) AND (INTPER =
			201607, 201608, 201609, 201406, 201407 or 201409)
		What other clothing is (Clothing purchase description) combined with?	then goto CLASTORE
			ELSE goto MORE

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Name Month Amount	
		(CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	
		1. Coats, jackets or furs	
		2. Sport coats, tailored jackets, or blazers	
		3. Suits	
		4. Vests	
		5. Shirts, sweaters, blouses, or tops	
		6. Pants, jeans, or shorts	
		7. Dresses	
		8. Skirts	
		9. Undergarments	
		10. Hosiery	
		11. Nightware or loungewear	
		12. Accessories	
		13. Swimsuits or warm-up or ski suits	
		14. Uniforms, for which the cost is not reimbursed 15. Costumes	
		16. Footwear, including athletic footwear	
		17. Diapers	
		18. Layettes	
		19. Watches	
		20. Jewelry	
		77. Misc. combined (unable to specify/DK)	
09A	CLASTORE	Where did you purchase this (Entry in CLODESCA)?	IF ENTRY contains ".com", ".Com", ".cOm", ".coM",
		, , , , , , , , , , , , , , , , , , , ,	".COm", ".CoM", ".cOM", or ".COM", then goto MORE
		 Enter store, website, or company name 	3
		If purchased from a private individual, enter "private individual."	ELSEIF ENTRY = DK or RF then goto MORE
			ELSE goto CLAPURCH
09A	CLAPURCH	◆ Ask if not apparent	1,DK,RF: Goto MORE
		Was this purchased online or in-person?	2: Goto CLPURLOC
		1. Online	
		2. In person	
09A	CLPURLOC	Where is ^CLASTORE_fill located?	Goto MORE

Section	CAPI Variable Name	Question Text	Skip Instructions
09A	CLOMOREA	Did you purchase any other (description)?	1: Goto CLA_ITEM, next row in the table
		Description Name Month Amount (CLODESCA) (CLONAME) (CLOTHMOA) (CLOTHXA)	2,DK,RF: IF row number = 84 then goto S9A_END ELSE goto CLA_ITEM, next row in the table
		1. Yes 2. No	
09B	S9D_INTRO	Q 28	Goto CLD_ITEM
		Now I am going to ask about expenditures for clothing services.	
		<u>Description Month Amount</u> (CLODESCD) (CLOTHMOD) (CLOTHXD)	
		1. Enter 1 to Continue	
09B	CLD_ITEM	🚇 28 ? [F1]	1-5: Goto CLODESCD
		Have (you/you or any members of your household) had expenses for any of the following, either for members of your household	99: Goto S9D_END
		or for someone outside your household?	888: IF no more row then goto S9D_END ELSE goto CLD_ITEM - next row in the table
		• Read each item on list.	_
		Repair, alteration or tailoring for clothing and accessories Shoe repair or other shoe services	
		Watch or jewelry repair Clothing or accessory rental	
		5. Clothing storage outside the home	
		99. None/No more entries 888. Delete the line	
)9B	CLODESCD	What kind of service was this?	Goto CLSVGFTC
		 Describe briefly the service. 	
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	
		Your household Someone outside your household	
09B	CLOTHMOD	When did you purchase this service?	Goto CLSRVCX
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	
		 January February March April May June July August September October November December 	
09B	CLSRVCX	How much did it cost?	1-999999: Goto CLSRVCTX
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	DK,RF: Goto CLOCMBD_S
09B	CLSRVCTX	Did this include sales tax? Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	Goto CLOCMBD_S
		1. Yes 2. No	
09B	CLOCMBD_S	♦ Enter 'C' for a combined expense.	C: Goto CLOCMBD
			Empty: Goto CLOMORED

Section	CAPI Variable Name	Question Text	Skip Instructions
09B	CLOCMBD	🔐 28 ? [F1]	Goto CLOMORED
		What other clothing services is	
		(Clothing Service Description) combined with?	
		• Enter all that apply, separate with commas.	
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	
		Repair, alteration or tailoring for clothing and accessories	
		2. Shoe repair or other shoe services	
		3. Watch or jewelry repair	
		Clothing or accessory rental	
		5. Clothing storage outside the home	
		77. Misc. combined (unable to specify/ DK)	
09B	CLOMORED	Did you have any other expenses for (Clothing Service Description)?	1: Goto CLD_ITEM next row in the table
		Description Month Amount (CLODESCD) (CLOTHMOD) (CLSRVCX)	2,DK,RF: IF ROW number = 10 then goto S9D_END ELSE goto CLD_ITEM next row in the table
		1. Yes 2. No	
10	S10_INTRO	₽ 29	Goto RLV_ITEM in BSect10L1 Block
		Now I am going to ask about expenses for vehicle rentals and leases.	
		<u>Vehicle number Vehicle year Vehicle make/model Business</u> (LSDNUM) (MODELYR) (MKMD_SCR) (ANYBUSIN)	
		1. Enter 1 to Continue	
10	RLV_ITEM	SCREEN 1	1-10: Goto ANYVACAT
		29 ? [F1]	95: Goto RLV_ITEM - next row
		Cines the first of (veferance month) have (verybor on one months of every bassed all)	33. GOIO NEV_ITEM - HEXITOW
		Since the first of (reference month), have (you/you or any members of your household) rented any automobiles, trucks, vans, minivans, or SUVs, which were not used entirely for	99: IF no vehicles on inventory chart or all vehicles
		business? Do not include leased vehicles.	have $8500.LSD_STAT = 3$ then exit block and
			goto LSD_ITEM
			ELSE exit block and goto the TblInventory block

Section	CAPI Variable Name	Question Text	Skip Instructions
		SCREEN 2	888: IF no more table rows THEN if no vehicles on inventory chart or all vehicles have 8500.LSD_STAT = 3 then exit block and goto LSD_ITEM else exit block and goto the TBLINVENTORY block ELSE goto RLV_ITEM - next row of table
		◆ IF YES -	
		Did you rent any -	
		 Automobiles, trucks, vans, minivans, or SUVs Motor homes Trailer-type campers Other attachable-type campers Motorcycles, motor scooters, or mopeds (motorized bicycles) Boats, with motor Boats, without a motor Trailers other than a camper type, such as for a boat or cycle Private aircraft Other vehicles Continue list None/No More Entries Delete the Line 	
10	ANYVACAT	Was the (description) rented solely for use on a vacation, overnight trip, or a trip of 75 miles or more one way? 1. Yes 2. No	Goto RENTEXPX
10	RENTEXPX	Since the first of (reference month), not including (current month), what has been your expense for renting this vehicle?	IF BUSCREEN = 2 then goto RENT_MORE
10	ANYBSNRM	Were or will any of the rental expenses be deducted as business expenses, reimbursed, or paid by someone outside of the household?	ELSE goto ANYBSNRM 1: Goto BSNSPCTZ
			2,DK,RF: Goto RENT_MORE
		1. Yes 2. No	
10	BSNSPCTZ	What percent of the total expense will this cover?	1-99,DK,RF: Goto RENT_MORE

Section	CAPI Variable Name	Question Text	Skip Instructions
			100: Goto ERR2 BSNSPCTZ
10	RENT_MORE	Did you rent any other (description)?	1: Goto RLV_ITEM
		1. Yes 2. No	2,DK,RF: IF row number = 10 then IF no vehicles on inventory chart or all vehicles have 8500.LSD_STAT = 3 then exit block and goto LSD_ITEM ELSE exit block and goto TblInventory block ELSE goto RLV_ITEM
10	LVIHAVE	Now I am going to ask about leased vehicles you mentioned previously.	1,DK,RF: Goto S10INV_END
		Are you still leasing the (model year) (vehicle make and model)?	2: Goto LVIENDMO
		• If the vehicle was purchased at the end of the lease, collect the new vehicle in Section 11.	
		Vehicle Number Vehicle Year Vehicle Make/Model Business (LSDNUM) (MODELYR) (MKMD_SCR) (ANYBUSIN) 1. Yes	
		2. No	
10	LVIENDMO	What month was the lease terminated?	Goto TERMFEE
		<u>Vehicle Number Vehicle Year Vehicle Make/Model Business</u> (LSDNUM) (MODELYR) (MKMD_SCR) (ANYBUSIN)	
		January February	
		3. March 4. April	
		5. May	
		6. June 7. July	
		8. August	
		9. September 10. October	
		11. November	
10	TERMFEE	12. December ? [F1]	1: Goto TERMFEEX
	· · · · ·		

Section	CAPI Variable Name	Question Text	Skip Instructions
		Were any fees incurred at the termination of the lease?	2,DK,RF: Goto S10INV_END
		<u>Vehicle Number Vehicle Year Vehicle Make/Model Business</u> (LSDNUM) (MODELYR) (MKMD_SCR) (ANYBUSIN)	
		1. Yes 2. No	
10	TERMFEEX	How much?	Goto S10INV_END
		<u>Vehicle Number Vehicle Year Vehicle Make/Model Business</u> (LSDNUM) (MODELYR) (MKMD_SCR) (ANYBUSIN)	
10	LSD_ITEM	Since the first of (reference month), have (you/you or any members of your household) (made any lease payments or/) begun leasing any automobiles, trucks, vans, minivans, or	1: Goto MODELYR
		SUVs not used entirely for business?	99: Goto S10_END
		1. Automobiles, trucks, vans, minivans, or SUVs 99. None/No more entries 888. Delete the line	888: IF no more rows then goto S10_END ELSE goto LSD_ITEM - next row of the table
10	MODELYR	• Ask if necessary What is the model year of the vehicle?	1900-current year + 1: IF MODELYR gt (current year + 1) then goto CK_MODELYR ELSE goto MKMD_SCR
			DK,RF: Goto MKMD_SCR
10	MKMD_SCR	What is the make and model of this vehicle?	X: Goto OTHMODEL
		◆ If vehicle make and model is not found, key X	30 characters besides X, DK, RF: IF BUSCREEN = 2 then goto NUMPAY
			ELSE goto ANYBUSIN
10	OTHMODEL	Specify other make and model	IF BUSCREEN = 2 then goto NUMPAY ELSE goto ANYBUSIN
10	ANYBUSIN	Is it used for business?	1: Goto PRCBSNSZ
		1. Yes	2,DK,RF: Goto NUMPAY
10	PRCBSNSZ	2. No What percentage of the mileage is counted as a business expense?	1-99,DK,RF: Goto NUMPAY
-	-	,	100: Goto ERR2_PRCBSNSZ

Section	CAPI Variable Name	Question Text	Skip Instructions
10	NUMPAY	What was the number of payments contracted for?	1-999: G goto PMTMONTH
			DIV DE LO LI DISTRICUTU
10	DNATNAONITU	In what wanth was a will the first various at he was do	DK,RF: Goto PMTMONTH
10	PMTMONTH	In what month was or will the first payment be made?	Goto PMTYEAR
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
10	DIATI (FAD	12. December	O-t- DAVEVDV
10	PMTYEAR	In what year was or will the first payment be made?	Goto PAYEXPX
10	PAYEXPX	(What is your monthly payment amount?/What is the amount of each payment?)	IF NUMPAY It 12 then goto PAYTIME
			ELSE goto ANYEXTRA
10	PAYTIME	What period is covered by each payment?	1: goto ANYEXTRA
10	. /	Trial poriou is covered by each payment.	I. goto / titl Extrat
			2: goto ANYEXTRA
		1. Week	3
		2. 2 Weeks	3: goto ANYEXTRA
		3. Month	•
		4. Quarter	4: goto ANYEXTRA
		5. Semiannually	
		6. Annually	5: goto ANYEXTRA
		7. One time payment	0
		8. Other	6: goto ANYEXTRA
			7: ANYEXTRA
			<u>-</u>
			8: goto PAYOTH
			DK,RF: goto ANYEXTRA
10	PAYOTH	• Specify:	Goto ANYEXTRA
10	ANYEXTRA	Does the payment include any charges other than the lease amount such as auto	1: Goto EXTRAEXP
		insurance or maintenance?	

Section	CAPI Variable Name	Question Text	Skip Instructions
			2,DK,RF: Goto ANYEMPLY
		1. Yes	
		2. No	
10	EXTRAEXP	How much of the payment is for these extra charges?	Goto ANYEMPLY
10	ANYEMPLY	Is any of the (\$ (amount in PAYEXPX)) lease payment paid by an employer?	1: Goto EMPLYEXP
		1. Yes 2. No	2,DK,RF: Goto ANYTRADE
10	EMPLYEXP	How much?	Goto ANYTRADE
10	ANYTRADE	Was a trade-in allowance received?	1: Goto TRADEEXP
		1. Yes 2. No	2,DK,RF: Goto ANYDOWN
10	TRADEEXP	How much?	Goto ANYDOWN
10	ANYDOWN	Was a cash down payment made?	1: Goto DOWNEXP
		Read if necessary -	2,DK,RF: Goto ANYHAVE
		Your lease agreement may list this as a capitalized cost reduction. 1. Yes	
		2. No	
10	DOWNEXP	How much?	Goto ANYDNEMP
10	ANYDNEMP	Was any portion of the cash down payment paid by an employer?	1: Goto DNEMPEXP
			2,DK,RF: Goto ANYHAVE
		1. Yes 2. No	
10	DNEMPEXP	How much?	Goto ANYHAVE
10	ANYHAVE	Are you still leasing this vehicle?	1,DK,RF: Goto ANYOTH
		• If the vehicle was purchased at the end of the lease, collect the new vehicle in Section 11.	2: Goto LSDENDMO
		1. Yes 2. No	
10	LSDENDMO	In what month was the lease terminated?	Goto LSDENDYR
		1. January	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. February	
		3. March	
		4. April 5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
10	I CDENDVD	12. December	O-4- ANIVEEEO
10	LSDENDYR	In what year was the lease terminated?	Goto ANYFEES
10	ANYFEES	? [F1]	1: Goto FEESEXP
		Were any fees incurred at the termination of the lease?	2,DK,RF: Goto ANYOTH
		1. Yes	
		2. No	
10	FEESEXP	How much?	Goto ANYOTH
10	ANYOTH	Did you lease any other automobiles, trucks, vans, minivans, or SUVs?	 IF ROW number = 6 then goto ERR_MAX ELSE goto LSD_ITEM, next row
		1. Yes	
		2. No	2,DK,RF: Exit block and goto S10_END
11	S11_INTRO	□ 29	IF there are vehicles on the chart with 8500.OVB_STAT ne 3 then goto OVAHAVE
		Now I'm going to ask about owned vehicles.	ELSE goto OVB_ITEM
		^S11_prechart	LESE goto OVB_ITEM
		1. Enter 1 to Continue	
11	OVAHAVE	(Do/Does) (you/your household) still have the (Car Description)?	1,DK,RF: Goto OVAHAVE for next appropriate vehicle
		^S11_prechart	on chart, if no more vehicles exit block and goto OVB_ITEM
			2: Goto VEHDISP
		1. Yes 2. No	
11	VEHDISP	How did you dispose of the (Car description)?	1-5,DK,RF: Goto VDISPMO
-			

Section	CAPI Variable Name	Question Text	Skip Instructions
		 Sold Traded in Given away or donated to someone outside the household, including students away at school Totaled (damaged beyond repair) Stolen Other 	6: Goto DISPOTHV
11	DISPOTHV	◆ Specify:	Goto VDISPMO
11	VDISPMO	In what month was it (sold/traded in/given away to someone outside the CU/damaged beyond repair/stolen/disposed of)? 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December	IF VEHDISP = 1 then goto SALEX ELSEIF VEHDISP = 2, 3, 6, DK or RF then goto LOANSTAT ELSEIF VEHDISP = 4 or 5 then goto REIMBURS
11	SALEX	How much did you sell it for?	Goto LOANSTAT
11	REIMBURS	Were you reimbursed for the value of the (Car description)? 1. Yes 2. No	1: Goto REIMBURX 2,DK,RF: Goto EXREIMB
11	REIMBURX	How much did you receive?	Goto LOANSTAT
11	EXREIMB	Do you expect to be reimbursed for the value of the (Car description)? 1. Yes 2. No	1: Goto EXREIMBX 2,DK,RF: Goto LOANSTAT
11	EXREIMBX	How much will you receive?	Goto LOANSTAT
11	LOANSTAT	Were there any outstanding loans on the (Car description) when it was (sold/traded in/given away to someone outside the CU/damaged beyond repair/stolen/disposed of)?	1: Goto FINPAYMT

Section	CAPI Variable Name	Question Text	Skip	Instructions
			2,DK	C,RF: IF no more vehicles, exit block and goto
			OVB	_ITEM
		1. Yes		ELSE goto OVAHAVE next line on grid
	FINID AND AT	2. No		O FINIDAYANA
11	FINPAYMT	Were any final payments made on the loan?	1:	Goto FINPAYMX
			2.DK	C,RF: IF no more vehicles, exit block and goto
		1. Yes		_ITEM
		2. No		ELSE goto OVAHAVE next line on grid
11	FINPAYMX	How much was the final payment?	IF no	more vehicles, exit block and goto OVB_ITEM
	0) (5) (5)			E goto OVAHAVE next line on grid
11	OVB_ITEM	□ 29 ? [F1]	1:	Goto VEHICYR
		SCREEN 1A	2-10	: IF BUSCREEN = 2 goto VEHNEWU
		SCREEN 1A	2 10	ELSE goto VEHBSNS
		(Since the first of (REF_MONTH), (have/has) (you/your household) purchased or acquired		
		any vehicle that is not used entirely for business? Include th	95:	Goto OVB_ITEM, next screen
			00	0 + 044 FND
		◆ IF YES - What kind of vehicle was it?	99:	Goto S11_END
			888	IF no more grid lines goto S11_END
			000.	ELSE goto OVB_ITEM - next line of grid
		SCREEN 1B		
		(Do/Does) (you/your household) own any automobiles, trucks, minivans, vans or SUV's		
		which were not used entirely for business?		
		SCREEN 2		
		(Do/Does) (you/your household) own any other types of vehicles including boats and		
		planes which are not used entirely for business?		
		▲ IF VEC. Dood oosh itom on list		
		◆ IF YES- Read each item on list		
		Do you own any		
		, 		
		SCREEN 3		

Section	CAPI Variable Name	Question Text	Skip Instructions
		(Have/Has) (you/your household) purchased any (other/) vehicles since the first of (reference month) for someone outside of your household?	
		♦ IF YES -	
		What kind of vehicle(s) did you purchase?	
		SCREEN 4	
		(Have/Has) (you/your household) disposed of (any/any automobiles or) other vehicles since the first of (reference month)?	
		◆ IF YES -	
		Which kind of vehicle(s) did you dispose of?	
		 ^AutoOrTruck Motor home Trailer-type camper Other attachable-type camper Motorcycle, motor scooter, or moped (motorized bicycle) Boat, with motor Boat, without a motor Trailer other than a camper type, such as for a boat or cycle Private aircraft Any other vehicle Continue list None/No more entries 	
11	VEHICYR	888. Delete the line What (was/is) the model year of the vehicle?	Goto MKMDL_SC
11	MKMDL_SC	What (was/is) the make and model of this vehicle?	30 characters: IF MKMDLY(4:5) = XX or ZZ then goto AUTOTRK
		◆ If vehicle make and model is not found, key X.	ELSE goto FUELTYPE
			DK,RF: Goto AUTOTRK

Section	CAPI Variable Name	Question Text	Skip Instructions
			X: Goto OTHMDLY
11	OTHMDLY	• Specify:	Goto AUTOTRK
11	AUTOTRK	Is this vehicle an automobile or a truck, minivan, van or SUV?	Goto FUELTYPE
		1. Automobile	
		2. Truck, van, minivan, or SUV	
11	FUELTYPE	Is it fueled by -	1-3,DK,RF: IF BUSCREEN = 2 goto VEHNEWU ELSE goto VEHBSNS
		• Read each item on list.	ŭ
			4: Goto FUELOTH
		1. Gasoline?	
		2. Diesel fuel?	
		3. Hybrid electric power?	
		4. Other - specify?	
11	FUELOTH	Specify:	IF BUSCREEN = 2 goto VEHNEWU
			ELSE goto VEHBSNS
11	VEHBSNS	(Was/Is) it used for business?	1: Goto VEHBSNZ
			2,DK,RF: Goto VEHNEWU
		1. Yes	
		2. No	
11	VEHBSNZ	What percentage of the mileage (was/is) counted as a business expense?	1-99,DK,RF: Goto VEHNEWU
			100: Goto ERR2 VEHBSNZ
11	VEHNEWU	Was it new or used when acquired?	1: IF coming from OVB_ITEM screen 1A, 1B, 2, or 4
			then goto VEHGFTC
			ĔLSE goto VEHPURMO
		1. New	•
		2. Used	2,DK,RF: IF coming from OVB_ITEM screen 1A, 1B,
			2, or 4 then goto VEHGFTC
			ELSE goto VPURINDV
11	VEHGFTC	Was this vehicle -	1,2,DK,RF: IF VEHNEWU = 1 then goto VEHPURMO
		1. Purchase for own use?	ELSE goto VPURINDV
		2. Purchased for someone outside of your household?	3: IF DISPOSED = 1 then goto VEHDISP
		3. Received as a gift?	ELSE goto ANYOTHR
11	VPURINDV	Was this vehicle purchased from a private individual?	IF ITEM = 1-2 or 5 AND VEHGFTC = 3 AND
T T	VI OININD V	vvas tins veinete parenasca nom a private marviadar:	DISPOSED ne 1 then goto ANYOTHR
			DIST SOLD HE I WISH GOLD ANTO THIN

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	ELSEIF OVB_ITEM = 1-2 or 5 AND VEHGFTC = 3 AND DISPOSED = 1 then goto VEHDISP
			ELSE goto VEHPURMO
11	VEHPURMO	In what month was it purchased?	Goto VEHPURYR
		 January February March April May June July August September October November December 	
11	VEHPURYR	In what year was it purchased?	Goto VFINANCE
11	VFINANCE	Was any portion of the purchase price financed?	1: Goto VLOANST
		1. Yes 2. No	2,DK,RF: IF VEHPURMO + VEHPURYR is prior to 3 months ago AND DISPOSED = 1 then goto VEHDISP ELSIF VEHPURMO + VEHPURYR is prior to 3 months ago AND DISPOSED ne 1 then goto ANYOTHR ELSE goto TRADE
11	VLOANST	On the first of (reference month), were there remaining loan payments?	1,DK,RF: Goto TRADE
		1. Yes 2. No	2: IF VEHPURMO + VEHPURYR is prior to 3 months ago AND DISPOSED = 1 then goto VEHDISP ELSEIF VEHPURMO + VEHPURYR is prior to 3 months ago AND DISPOSED ne 1 then goto ANYOTHR ELSE goto TRADE
11	TRADE	Was a trade-in allowance received?	1: Goto TRADEX
		1. Yes 2. No	2,DK,RF: Goto NETPURX
11	TRADEX	How much?	0-999999: Goto NETPURX

Section	CAPI Variable Name	Question Text	Skip Instructions
			DK,RF: Goto NETPURX
11	NETPURX	What was the amount paid for the vehicle after (trade-in allowance, /) rebate, and discount?	0-999999: Goto SALESTAX
			DK,RF: IF VLOANST = 1 then goto DNPAYMTX
		◆ Include destination fee in the price.	ELSE goto ANYOTHR
11	SALESTAX	Did this include sales tax?	IF VLOANST = 1 then goto DNPAYMTX ELSE goto ANYOTHR
		1. Yes 2. No	
11	DNPAYMTX	What was the amount of the cash down payment?	0-999999: Goto VEHEQTLN
			DK,RF: Goto VEHEQTLN
11	VEHEQTLN	Was the source of credit a Home Equity Loan?	Goto PRINCIPX
		1. Yes 2. No	
11	PRINCIPX	How much was borrowed, excluding any interest?	Goto VINTRATE
11	VINTRATE	What was the interest rate?	Goto PMT1YR
		• Enter percent including decimal.	
11	PMT1YR	In what year was or will the first payment be made?	Goto PMT1MO
11	PMT1MO	In what month was or will the first payment be made?	Goto VEHQPMT
		1. January	
		2. February	
		3. March	
		4. April 5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
11	VEHQPMT	For how many months was the payment contract?	Goto PAYMENTX
11	PAYMENTX	What is your monthly payment amount?	IF DISPOSED = 1 then goto VEHDISP
			ELSE goto ANYOTHR
11	VEHDISP	How did you dispose of the (Car description)?	1-5,DK,RF: Goto VDISPMO

Section	CAPI Variable Name	Question Text	Skip Instructions
		 Sold Traded in Given away or donated to someone outside the household, including students away at school Totaled (damaged beyond repair) Stolen Other 	6: Goto DISPOTHV
11	DISPOTHV	◆ Specify:	Goto VDISPMO
11	VDISPMO	In what month was it ^Vehdisp_fill? 1. January 2. February 3. March 4. April 5. May 6. June 7. July 8. August 9. September 10. October 11. November 12. December	IF VEHDISP = 1 then goto SALEX ELSEIF VEHDISP = 2, 3, 6, DK or RF then goto LOANSTAT ELSEIF VEHDISP = 4 or 5 then goto REIMBURS
11	SALEX	How much did you sell it for?	Goto LOANSTAT
11	REIMBURS	Were you reimbursed for the value of the (Car description)? 1. Yes 2. No	1: Goto REIMBURX 2,DK,RF: Goto EXREIMB
11	REIMBURX	How much did you receive?	Goto LOANSTAT
11	EXREIMB	Do you expect to be reimbursed for the value of the (Car description)? 1. Yes 2. No	1: Goto EXREIMBX 2,DK,RF: Goto LOANSTAT
11	EXREIMBX	How much will you receive?	Goto LOANSTAT
11	LOANSTAT	Were there any outstanding loans on the (Car description) when it was (sold/traded in/given away to someone outside the CU/damaged beyond repair/stolen/disposed of)?	1: Goto FINPAYMT 2,DK,RF: Goto ANYOTHR

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
11	FINPAYMT	Were any final payments made on the loan?	1: Goto FINPAYMX
		1. Yes 2. No	2,DK,RF: Goto ANYOTHR
11	FINPAYMX	How much was the final payment?	Goto ANYOTHR
11	ANYOTHR	(Did (you/you household) purchase or acquire any other (vehicle description)?/(Do/Does) (you/your household) own any other (vehicle description)?/Did	Goto OVB_ITEM, next screen as appropriate
		1. Yes 2. No	
12A	S12A_INTRO	4 30	Goto VEQ_ITEM
		I will now ask about expenses for vehicle services, parts, and equipment. Please do not include expenses for vehicles used entirely for business.	
		Description Month Amount (VOPDESC) (VOPMOA) (VOPEXPX)	
		1. Enter 1 to Continue	
12A	VEQ_ITEM	■ 30 ? [F1]	1-12: Goto VOPDESC
		Since the first of (reference month), have (you/you or any members of your household)	99: Goto S12A_END
		had expenses for any of the following?	888: IF no more rows then goto S12A_END ELSE goto VEQ_ITEM - next row of the table
		Read each item on list	
		 Oil change, lubrication, or oil filter Motor tune-up Battery purchases or installation Tire purchases or mounting Tire repair Front end alignment, wheel balancing, or wheel rotation Shock absorber replacement 	
		8. Body work or painting 9. Any other vehicle or engine repairs 10. Vehicle accessories or customizing	

Section	CAPI Variable Name	Question Text	Skip Instructions
		11. Other vehicle services, parts, or equipment	
		12. Vehicle cleaning services including car washes	
		99. None/No more entries	
104	\(\(\text{OPDF00}\)	888. Delete a line	IF ITEM O A SUF the survey MODMOA
12A	VOPDESC	What was the expense for?	IF ITEM = 3, 4, or 5 then goto VOPMOA ELSE goto VOPLABOR
		_Description Month Amount	LESE 9010 VOFLABOR
		(VOPDESC) (VOPMOA) (VOPEXPX)	
12A	VOPLABOR	Did this expense include labor?	Goto VOPMOA
		Description Month Amount	
		(VOPDESC) (VOPMOA) (VOPEXPX)	
		1. Yes	
		2. No	
12A	VOPMOA	In what month did you have this expense?	Goto VOPEXPX
		_Description Month Amount	
		(VOPDESC) (VOPMOA) (VOPEXPX)	
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August 9. September	
		10. October	
		11. November	
		12. December	
12A	VOPEXPX	What was the total cost?	1-99999: Goto VOPTAX
		Description Month Amount	DK,RF: Goto VOPCMB C
		(VOPDESC) (VOPMOA) (VOPEXPX)	DIC, CI . GOLO VOI CIVID_C
12A	VOPTAX	Did this include sales tax?	Goto VOPCMB_C

<u>Description Month Amount</u> (VOPDESC) (VOPMOA) (VOPEXPX)

Section	CAPI Variable Name	Question Text	Skip Instructions
		1 Voc	
		1. Yes 2. No	
12A	VOPCMB_C	◆ Enter 'C' for combined expense	C: Goto VOPCMB
	_		
104	VODOMB		EMPTY: Goto VOPREIMB
12A	VOPCMB	■ 30 ?[F1]	Goto VOPREIMB
		What expense was combined with the ^VOPCMB expense?	
		• Enter all that apply, separate with commas.	
		Description Month Amount (VOPDESC) (VOPMOA) (VOPEXPX)	
		1. Oil change, lubrication, or oil filter	
		2. Motor tune-up	
		3. Battery purchases or installation	
		4. Tire purchases or mounting	
		5. Tire repair	
		6. Front end alignment, wheel balancing, or wheel rotation	
		7. Shock absorber replacement	
		Body work or painting Any other vehicle or engine repairs	
		10. Vehicle accessories or customizing	
		11. Other vehicle services, parts, or equipment	
		12. Vehicle cleaning services including car washes	
		77. Misc combined (unable to specify/DK)	
12A	VOPREIMB	Has any of this expense been, or will any of it be, reimbursed?	1: Goto VOPRMBXA
		Description Month Amount	2,DK,RF: Goto MOREVEOP
		(VOPDESC) (VOPMOA) (VOPEXPX)	Z,BT,TT. Coto MOTELLO
		1. Yes	
		2. No	
12A	VOPRMBXA	How much?	Goto MOREVEOP
		Description Month Amount	
		(VOPDESC) (VOPMOA) (VOPEXPX)	

Did you have any other expenses for (description)? Description Month Amount (VOPDESC) (VOPMOA) (VOPEXPX) 1. Yes 2. No 12B S12B_INTRO Description Month Amount (VOPEXPX) Drivers licenses, vehicle inspection, vehicle registration, and personal property taxes for vehicles collected in the previous interview: Description Month Amount (VREGDESC) (VOPMO_C) (VOPREGX) 1. Enter 1 to Continue 12B VLR_ITEM Discription Month Amount (VREGDESC) Since the first of (reference month), have (youlyou or any members of your household) had any expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicles registration? 4. Local vehicle registration? 4. Local vehicle registration? 5. Personal property taxes for dots VLR_ITEM (VREGDESC) 2. State vehicle registration? 4. Local vehicle registration? 5. Personal property taxes for vehicles?	
(VOPDESC) (VOPMOA) (VOPEXPX) 1. Yes 2. No 12B S12B_INTRO III 31 Drivers licenses, vehicle inspection, vehicle registration, and personal property taxes for vehicles collected in the previous interview: Description Month Amount (VREGDESC) (VOPMO_C) (VOPREGX) 1. Enter 1 to Continue 12B VLR_ITEM III 31 ? [F1] Since the first of (reference month), have (youl/you or any members of your household) had any expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration? 4. Local vehicle registration?	table
2. No 12B S12B_INTRO	
Drivers licenses, vehicle inspection, vehicle registration, and personal property taxes for vehicles collected in the previous interview: Description	
vehicles collected in the previous interview: Description Month Amount (VREGDESC) (VOPMo_C) (VOPREGX) 1. Enter 1 to Continue 12B VLR_ITEM	
(VREGDESC) (VOPMO_C) (VOPREGX) 1. Enter 1 to Continue 12B VLR_ITEM	
12B VLR_ITEM Since the first of (reference month), have (you/you or any members of your household) had any expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration?	
Since the first of (reference month), have (you/you or any members of your household) had any expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration?	
any expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration?	
expenses for - Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration?	
 Read each item on list 1. Driver's licenses? 2. Vehicle inspection? 3. State vehicle registration? 4. Local vehicle registration? 	
2. Vehicle inspection?3. State vehicle registration?4. Local vehicle registration?	
99. None/No more entries 888. Delete line	
12B VREGDESC What was the expense for? Goto VOPMO_C	
Description Month Amount (VREGDESC) (VOPMO_C) (VOPREGX)	
12B VOPMO_C In what month did you have this expense? Goto VOPREGX	

IS	Skip Instructions	Question Text	CAPI Variable Name	Section
		Description Month Amount		
		(VREGDESC) (VOPMO_C) (VOPREGX)		
		1. January		
		2. February		
		3. March		
		4. April		
		5. May		
		6. June		
		7. July		
		8. August		
		9. September		
		10. October		
		11. November		
		12. December	\(\(\alpha\)	
_C	Goto S12BCMB_C	What was the total amount of the expense?	VOPREGX	12B
		Description Month Amount		
		(VREGDESC) (VOPMO_C) (VOPREGX)		
	C: Goto S12B_CMB	◆ Enter 'C' for combined expense	S12BCMB_C	12B
2_05	G. 0000 012B_0mB	Zinor o for combined expense	01250M5_0	125
MOREREG	EMPTY: Goto MOREREG			
i	Goto MOREREG	🚇 31 ? [F1]	S12B_CMB	12B
		What was combined with the (Description) expense?		
		what was combined with the (Description) expense?		
		 Enter all that apply, separate with commas 		
		and the state of t		
		Description Month Amount		
		(VREGDESC) (VOPMO_C) (VOPREGX)		
		1. Drivaria licanos		
TEM, next row or the table	1: Goto VLR_ITEM, next row or the table	Did you have any other (Description) expenses?	MOREREG	12B
0144 margin and 114 th are seed to 0100. The	O DK DE LE DOM soushes 44 th 1 C	Description Month Assessed		
.u ver_i i eivi, ilext fow of the table	ELSE YOU VER_ITEM, NEXT TOW OF THE	(VREGDESC) (VOPNIO_C) (VOPREGA)		
OW number = 11 t	1: Goto VLR_ITEM, next row or t 2,DK,RF: IF ROW number = 11 t ELSE goto VLR_ITEM, nex	1. Driver's license 2. Vehicle inspection 3. State Vehicle registration 4. Local Vehicle registration 5. Personal property taxes for vehicles Did you have any other (Description) expenses? Description Month Amount (VREGDESC) (VOPMO_C) (VOPREGX)	MOREREG	12B

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
12C	VOPGASX	? [F1]	0,RF: Goto VOPOIL
		Since the first of (reference month) not including this month	1-9999: Goto VOPDIES
		What has been (your/your household's) AVERAGE MONTHLY expense for gasoline and other fuels for all vehicles?	DK: Goto VOPDIES
12C	VOPDIES	? [F1]	1: Goto VOPDIESX
		Was any of this expense for diesel fuel? 1. Yes 2. No	2,DK,RF: IF BCeintro.BUSCREEN = 2 AND INTNMBR = 4 AND (INTPER = 201607, 201608, 201609, 201406, 201407 or 201409) then goto GASLOC ELSEIF BCeintro.BUSCREEN = 2 goto VOPOIL ELSE goto VOPBSNS
12C	VOPDIESX	How much?	1-9999: IF (VOPDIESX It 5 or gt 400) then goto ERR1_VOPDIESX
12C	VOPBSNS	Was any of the AVERAGE MONTHLY cost counted as a business expense?	ELSE goto VOPBSNS 1: Goto VOPBSPER 2,DK,RF: IF INTNMBR = 4 AND (INTPER = 201607,
		1. Yes	201608, 201609, 201406, 201407 or 201409) then goto GASLOC
		2. No	
			ELSE goto VOPOIL
12C	VOPBSPER	What percentage of the AVERAGE MONTHLY COST was counted as a business expense?	1-99,DK,RF: IF INTNMBR = 4 AND (INTPER = 201607,

Section	CAPI Variable Name	Question Text	Skip Instructions
			201608, 201609, 201406, 201407 or 201409) then goto
			GASLOC ELSE goto VOPOIL
			ELSE goto VOI OIE
			100: Goto ERR2_VOPBSPER
12C	GASLOC	From (reference month) through (last month), where did (you/your household) (last/most frequently) purchase gas?	Goto VOPOIL
		Enter city and state	
12C	VOPOIL	? [F1]	1: Goto VOPOILX
		Since the first of (reference month) not including this month	2,DK,RF: Goto VOPFLUID
		Have (you/you or any members of your household) purchased any oil for operating vehicles?	
		1. Yes 2. No	
12C	VOPOILX	? [F1]	Goto VOPFLUID
		What was the total cost?	
12C	VOPFLUID	? [F1]	1: Goto VOPFLUDX
		Since the first of (reference month), not including this month	2,DK,RF: Goto VOPPARK
		Have (you/you or any members of your household) purchased any antifreeze, brake fluid, transmission fluid, windshield wiper fluid, or additives, except if purchased with a tune-up?	
		1. Yes 2. No	
12C	VOPFLUDX	What was the total cost of these purchases?	Goto VOPPARK
12C	VOPPARK	? [F1]	1: Goto VOPPARKX
		Since the first of (reference month) not including this month	2,DK,RF: Goto VOPTOLL
		Have (you/you or any members of your household) had expenses for parking, such as parking garages, parking lot fees, or parking meters?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Do not include expenses that are part of your property ownership or rental costs, a business expense or expenses that will be totally reimbursed.	
		1. Yes	
		2. No	
12C	VOPPARKX	How much was paid, not including any payments made this month?	Goto VOPTOLL
12C	VOPTOLL	? [F1]	1: Goto VOPTOLLX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had expenses for -	2,DK,RF: Goto VOPDOCK
		Local tolls or electronic toll passes?	
		1. Yes	
		2. No	
12C	VOPTOLLX	How much was paid, not including any payments made this month?	Goto VOPDOCK
12C	VOPDOCK	? [F1]	1: Goto VOPDOCKX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had expenses for -	2,DK,RF: Goto VOPPOLCY
		Docking and landing fees for boats and planes?	
		1. Yes 2. No	
12C	VOPDOCKX	How much was paid, not including any payments made this month?	Goto VOPPOLCY
12C	VOPPOLCY	? [F1]	1: Goto VOPPLCYX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had any expenses for	2,DK,RF: Goto VOPAUTO
		Auto repair service policies such as extended warranties? Do not include service policies for vehicles used entirely for business.	
		1. Yes 2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
12C	VOPAUTO	? [F1]	1: Goto VOPCLUBX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had any expenses for	2,DK,RF: Goto VOPTOW
		Automobile service clubs, such as AAA or services such as OnStar or LoJack?	
		1. Yes 2. No	
12C	VOPCLUBX	How much?	Goto VOPTOW
12C	VOPTOW	? [F1]	1: Goto VOPTOWX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had expenses for -	2,DK,RF: Goto TANKGAS
		Towing charges, not already reported?	
		1. Yes 2. No	
12C	VOPTOWX	How much was paid, not including any payments made this month?	Goto TANKGAS
12C	TANKGAS	? [F1]	1: Goto TANKGASX
		Since the first of (reference month) not including this month, have (you/you or any members of your household) had any expenses for	2,DK,RF: Goto S12C_END
		Bottled or tank gas for recreational vehicles, including vans, campers, and boats?	
		1. Yes 2. No	
12C	TANKGASX	How much?	Goto S12C_END
13A	S13A1_INTRO	1 32	IF there are any active Policies listed on the inventory chart (8500.PLCYSTAB ne 1) then goto BSect13A Block
		Now I am going to ask about your non-health insurance policies. (Include policies paid by your household for someone outside your household./)	ELSE goto S13A_END
		Policy Insurance Insurance Paid Payroll Payment Paid Paid	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Number Description Type Company By Deduction Period Total Month	
		1. Enter 1 to Continue	
13A	PLCYSTIL	Do (you/you or any members of your household) still have or make payments for the (long term care/life or disability/auto/homeowner's/tenants'/other type of non-health) insurance policy from (Insurance Company)?	IF 8500.PREMYOU = 2 then goto S13A_END ELSE goto INSEX3A
		Policy Insurance Insurance Paid Payroll Paid Paid Number Description Type Company By Deduction Total Month	
		1. Yes 2. No	
13A	INSEX3A	Since the first of (reference month) have you had any expenses for this policy?	1: Goto INSEX3AX
		Policy Insurance Insurance Paid Payroll Paid Paid Number Description Type Company By Deduction Total Month	2,DK,RF: Goto S13A_END
		1. Yes 2. No	
13A	INSEX3AX	How much was paid?	1-99999: Goto INSEXXA
		Policy Insurance Insurance Paid Payroll Paid Paid Number Description Type Company By Deduction Total Month	DK,RF: Goto S13A_END
13A	INSEXXA	How much was paid this month?	Goto S13A_END
		Policy Insurance Insurance Paid Payroll Paid Paid Number Description Type Company By Deduction Total Month	
13B	INB_ITEM	□ 32 ? [F1]	1-6: Goto INSCOMP
		(Do ^YOU_ANYMEM have any or pay for any -/Since the first of ^REF_MONTH have ^YOU ANYMEM purchased o	99: Goto S13B_END
		• Read each item on list	888: IF no more rows in the table then goto S13B_END ELSE goto INB_ITEM - next row of the table
		 Long term care insurance? Life insurance or other policies which provide benefits in case of death or disability? Homeowners' insurance? Renters' insurance? 	

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. Automobile or other vehicle insurance? 6. Other types of non-health insurance? 99. None/No more entries 888. Delete a line	
13B	INSCOMP	What is the name of the insurance company for your (long term care/life or disability/homeowners'/tenants'/vehicle/other type of insurance) policy?	Goto INSDESC
		• Enter name of insurance company, not the insurance agent.	
13B	INSDESC	Briefly describe the policy.	IF ITEM = 3 then goto INSPROP ELSE goto PREMYOU
13B	INSPROP	Which property (ies) does this policy cover?	Goto PREMYOU
		• Enter number of each property covered, separate with commas.	
		1. PROPDESC[1] 2. PROPDESC[2] 3. PROPDESC[3] 4. PROPDESC[4] 5. PROPDESC[6] 6. PROPDESC[6] 7. PROPDESC[7] 8. PROPDESC[8] 9. PROPDESC[9] 10. PROPDESC[10] 11. PROPDESC[11] 12. PROPDESC[12] 13. PROPDESC[12] 13. PROPDESC[14] 15. PROPDESC[14] 15. PROPDESC[15] 16. PROPDESC[16] 17. PROPDESC[16] 19. PROPDESC[18] 19. PROPDESC[19] 20. PROPDESC[20] 99. Property not owned or rented by the household	
13B	PREMYOU	(Do/Does) (you/your household) pay ANY portion of the premiums for this policy?	1, DK, RF: Goto PAYDEDPR
		1. Yes 2. No	2: Goto PREMOUT
13B	PREMOUT	Who pays the policy premiums?	Goto S13_S

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. An employer or union?	
		2. Another group or persons outside your household?	
13B	PAYDEDPR	Are any premiums paid through payroll deductions?	Goto INSEXPBX
		1. Yes	
		2. No	
13B	INSEXPBX	Since the first of (reference month), what was (your/your household's) total expense for	1-99999: Goto INSNEXXB
		this insurance policy?	0.DV.DE: 0-4-040.0
		A Forter the netural executable become held unit. Do not include only expressing for the	0,DK,RF: Goto S13_S
		• Enter the actual amount the household paid. Do not include any expenses paid for the household by others.	
13B	INSNEXXB	How much was paid this month?	Goto S13_S
13B	S13_S	◆ Enter "C" for a combined expense	C: Goto S13CMB
			EMPTY: Goto INSMORE
13B	S13CMB	□ 32 ? [F1]	IF 3 is selected then goto COMBPROP ELSE goto INSMORE
		What other type of policy is the (Insurance type) combined with?	
		• Enter all that apply, separate with commas.	
		1. Long term care insurance	
		2. Life insurance or other policies which provide benefits in case of death or disability	
		3. Homeowners' insurance	
		4. Renters' insurance	
		5. Automobile or other vehicle insurance	
		6. Other types of non-health insurance	
		77. Misc. combined (unable to specify/DK)	
13B	S13CMBPROP	Which property (ies) did this policy cover?	Goto INSMORE
		 Enter number of each property covered, separate with commas. 	

- Enter number of each property covered, separate with commas.
- 1. PROPDESC[1]
- 2. PROPDESC[2]

- 3. PROPDESC[3] 4. PROPDESC[4] 5. PROPDESC[5]

Section	CAPI Variable Name	Question Text	Skip Instructions
		6. PROPDESC[6]	
		7. PROPDESC[7]	
		8. PROPDESC[8]	
		9. PROPDESC[9]	
		10. PROPDESC[10]	
		11. PROPDESC[11]	
		12. PROPDESC[12]	
		13. PROPDESC[13	
		14. PROPDESC[14]	
		15. PROPDESC[15]	
		16. PROPDESC[16]	
		17. PROPDESC[17]	
		18. PROPDESC[18]	
		19. PROPDESC[19]	
		20. PROPDESC[20] 99. Property not owned or rented by the household	
13B	INSMORE	(Do ^You_Anymem have any or make payments for any other ^inbdescription policy?/Did	1: ELSE goto INB_ITEM, next row of the table
TOD	INSWORE	^you_Anymem purchase or begin paying for any other ^inbdescritpion	1. ELSE goto IND_ITEM, flext fow of the table
		You_Anymem purchase or begin paying for any other Ambuescripion	2,DK,RF: IF Row number = 100 then goto S13B END
			ELSE goto INB ITEM, next row of the table
		1. Yes	ELSE goto IND_ITEM, Hext Tow of the table
		2. No	
14A	S14A INTRO	₽ 33	IF there are any records on the SCIF with
	<u> </u>		8500.IHB STAT = 1 then goto BSect14ARow block
		Now I am going to ask about health Insurance.	
		Now I am going to ask about nearth mountainer.	ELSE goto S14A_END
		Policy Insurance Insurance Payroll Time Paid Paid	3 =
		# Description Type Company Deduction Period Payment Total Non-CU	
		1 Bosonphon Typo Company Boddonon Chod Cymond Total To	
		1. Enter 1 to Continue	
14A	HHISTILL	(Do/Does) (you/your household) still have your (HMO/fee for service/commercial Medicare	IF 8500.HHIPRYOU = 2 then goto S14A_END
		supplement /special purpose) policy from (insurance company name)?	ELSE goto HHIANYPD
		Policy Insurance Insurance Payroll Time Paid Paid	
		# Description Type Company Deduction Period Payment Total Non-CU	
		1 Van	
		1. Yes	
1 4 4		2. No	1. IF 0500 HUDDINDD 4.0 their right HUU CTTM
14A	HHIANYPD	Since the first of (reference month), have (you/you or any members of your household)	1: IF 8500.HHIRPMPD = 1-9 then goto HHILSTTM

Section	CAPI Variable Name	Question Text	Skip Instructions
		made any payments on this policy (including payroll deductions/)?	ELSE goto HHIRPMPA
		Policy Insurance Insurance Payroll Time Paid Paid # Description Type Company Deduction Period Payment Total Non-CU	2,DK,RF: Goto S14A_END
		1. Yes 2. No	
14A	HHILSTTM	Last time, I recorded that payments are made (periodicity). Is this still correct?	1: Goto HHIREGXA
		Policy Insurance Insurance Payroll Time Paid Paid # Description Type Company Deduction Period Payment Total Non-CU	2, DK, RF: Goto HHIRPMPA
		1. Yes 2. No	
14A	HHIRPMPA	How often are payments made (including payroll deductions/)?	1-9: Goto HHIREGXA
		Policy Insurance Insurance Payroll Time Paid Paid # Description Type Company Deduction Period Payment Total Non-CU	10, DK, RF: Goto HHIPDAMT
		 Once a week Once every 2 weeks Twice a month Once a month Every 2 months Quarterly (every 3 months) Once every 4 months Twice a year (every 6 months) Once a year Other 	
14A	HHIREGXA	What is the amount currently paid (periodicity)?	Goto S14A_END
		Policy Insurance Insurance Payroll Time Paid Paid # Description Type Company Deduction Period Payment Total Non-CU	
14A	HHIPDAMT	How much was paid since the first of (reference month)?	1-99999: Goto HHICMXXA
		Policy Insurance Insurance Payroll Time Paid Paid # Description Type Company Deduction Period Payment Total Non-CU	DK,RF: Goto S14A_END

Section	CAPI Variable Name	Question Text	Skip Instructions
L4A	HHICMXXA	How much of that (\$(amount from HHIPDAMT) /) was paid this month?	Goto S14A_END
		Policy Insurance Insurance Payroll Time Paid Paid	
		# Description Type Company Deduction Period Payment Total Non-CU	
14B	IHB_ITEM	□ 33 ? [F1]	1: Goto HINSCMP
		^IHBITEM	99: Goto S14B_END
		 Do not report Medicare Prescription Drug plans (Medicare Part D) here. 	888: IF no more grid lines then goto S14B_END
		Medicare Prescription Drug plans are collected in Section 14C.	ELSE goto IHB_ITEM - next line of grid
		Hospitalization or health insurance plans	
		99. None/No More Entries 888. Delete the Line	
14B	HINSCMP	What is the name of the insurance company for this policy?	Goto HHIBCBS
		 Enter name of insurance company, not the insurance agent 	
14B	HHIBCBS	Do not read to respondent.	1: Goto HHICOVQ
		Is the insurance company Blue Cross/Blue Shield?	2: Goto TRICARE
		1. Yes	
4.40	TDIOADE	2. No	0-4-1111001/0
14B	TRICARE	 Do not read to respondent. 	Goto HHICOVQ
		Is the insurance company Tricare?	
		1. Yes	
14B	HHICOVQ	2. No How many household members are/were covered by this policy?	IF TRICARE = 1 goto HHIGROUP
T4D	TITICOVQ	now many household members aretwere covered by this policy?	ELSE goto HHICODE
14B	HHICODE	₩ 33 ? [F1]	1: Goto HHIPOS
		What type of insurance plan is it?	2-3,DK,RF: Goto HHIGROUP
		 Do not include Medicare prescription drug plans in Commercial Medicare Supplements. Medicare prescription drug plans are collected in Part C. 	4: Goto HHISPECT

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Health Maintenance Organization	
		2. Fee for Service Plan	
		Commercial Medicare Supplement Other special purpose plan	
	HHIPOS	Under normal circumstances, if you go to a doctor who is not part	Goto HHIGROUP
	55	of your plan without a referral, will your insurance pay for the cost?	
		1. Yes	
1.40	LUUCDECT	2. No	1.2 DV DE. Cata HIJICDOUD
14B	HHISPECT	? [F1]	1-3,DK,RF: Goto HHIGROUP
		Is this special purpose insurance plan -	4: Goto OTHINTYP
		1. Dental insurance?	
		2. Vision insurance?	
		3. Prescription drug insurance?	
		4. Other type of special purpose health insurance? - Specify	
14B	OTHINTYP	◆ Specify:	Goto HHIGROUP
14B	HHIGROUP	Was the policy obtained on an individual or group basis?	1, 3, DK, RF: IF TRICARE = 1 goto HHIPRYOU ELSE goto PORTAL
		1. Individually obtained	2: goto HHIPRYOU
		2. Group through place of employment	ŭ
		3. Group through other organization	
14B	PORTAL	Was the policy obtained through ^ST_PORTAL Healthcare.gov?	1: goto PORTPLAN
		1. Yes	2, DK, RF: goto HHIPRYOU
		2. No	
14B	PORTPLAN	Is this policy a platinum, gold, silver, bronze, or catastrophic plan?	Goto HHIPRYOU
		1. Platinum plan	
		2. Gold plan	
		3. Silver plan	
		4. Bronze plan	
140	HHIPRYOU	5. Catastrophic plan (Da/Dass) (varyhous bousehold) pay ANY partial of the premiums for this policy?	1 DV DE: Coto HUIDDDED
14B	HULKIOO	(Do/Does) (you/your household) pay ANY portion of the premiums for this policy?	1,DK,RF: Goto HHIPRDED
		1. Yes	2: Goto HHIPROUT
		2. No	
14B	HHIPROUT	Who pays the policy premiums?	IF PORTAL = 1 goto PREMSUBS

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSE goto HHIMORE
		1. An employer or union?	
		Another group or persons outside your household?	
14B	HHIPRDED	Are any premiums paid through payroll deductions?	Goto HHIRPMXB
		1. Yes 2. No	
14B	HHIRPMXB	How much (do/does) (you/your household) currently spend for (entry for HINSCMP/this plan) (including payroll deductions/)?	Goto HHIRPMPD
		• Enter dollar amount for premium payments.	
		Select time period in next question.	
14B	HHIRPMPD	Enter time period for premium payments.	1-9: IF PORTAL = 1 goto PREMSUBS ELSE goto HHIMORE
		1. Once a week	10,DK,RF: Goto HHIIRGXB
		2. Once every 2 weeks	
		3. Twice a month	
		4. Once a month	
		5. Every 2 months	
		6. Quarterly (every 3 months)	
		7. Once every 4 months	
		8. Twice a year (every 6 months)	
		9. Once a year	
14B	HHIIRGXB	10. Other What was the total expense paid for this policy since (reference month)?	Goto HHICMXXB
14B	HHICMXXB	How much was paid this month?	IF PORTAL = 1 goto PREMSUBS
			ELSE goto HHIMORE
14B	PREMSUBS	Is the cost of the premium subsidized based on (your/your household's) income?	1: goto HHISUBPD
		 Subsidized health coverage is insurance with a reduced premium. Low 	2, DK, RF: goto HHIMORE
		and middle income families are eligible to receive tax credits that allow them to pay lower premiums for insurance bought through healthcare exchanges or marketplaces.	
		1. Yes	
		2. No	
14B	HHISUBPD	Is the subsidy paid directly to the health insurance company?	Goto HHIMORE

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
14B	HHIMORE	Did you have any other hospitalization or health insurance plans?	1: IF ROW number = 12 then goto ERR_MAX ELSE goto IHB_ITEM, next line of grid
		1. Yes 2. No	2,DK,RF: Goto IHB_ITEM, next line of grid
14C	CHGHHMCR	(Last time you said that you were enrolled in Medicare. Has that changed?/Last time you said that ^8500HHMCRCOV ^MEMBARE2 enrolled in Medicare. Has 1. Yes	1: IF NUMHOUSE gt then goto HHMCRCOV ELSEIF 8500.HHPARD = 1 goto BUPDATEDPblock ELSE goto RETPARTD
		2. No	
			2,DK,RF: IF 8500.HHPARTD = 1 then goto BUPDATEDP block ELSE goto RETPARTD
14C	HHMCRENR	Are (you/you or any members of your household) presently enrolled in Medicare? Medicare is the Federal Health Insurance Plan.	1: If NUMHOUSE = 1 and ((INTNMBR = 2 and RT25.DESIGN = 00) or (INTNMBR = 1) or new CU) goto HHPARTD
		1. Yes	Elseif NUMHOUSE = 1 and 8500.HHPARTD = 1
		2. No	goto BUPDATEDPblock Elseif NUMHOUSE = 1 goto RETPARTD Elseif NUMHOUSE gt 1 goto HHMCRCOV
			2,DK,RF: IF 8500.MDCDENR = 1 then goto CHGMDCDE ELSE goto MDCDENR
14C	HHMCRCOV	How many members of your household are covered by Medicare?	IF (INTNMBR = 2 and RT25.DESIGN = 00) OR (INTNMBR = 1) OR new CU then goto HHPARTD ELSEIF 8500.HHPARTD = 1 then goto BUPDATEDP block
14C	STILDRUG	Is ^NAME still enrolled in a Medicare Prescription Drug plan?	ELSE goto RETPARTD 1: Goto PREMCHG
		• Enter 'YES' if the member changed to a different Medicare Prescription Drug plan.	2,DK,RF: IF no more members AND there exist values of MEMBNO that do not match any value of 8500.PRTDMBNO then goto RETPARTD
		1. Yes	ELSEIF no more members AND 8500.MDCDENR
		2. No	ne 1 then goto MDCDENR ELSEIF no more members goto CHGMDCDE

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSE goto next member on 14C_UPDATE
14C	PREMCHG	Is (your/ Name's) premium still (the same/\$(DRGPREMX))?	1,DK,RF: IF no more members AND there exist values of MEMBNO that do not match any value of 8500.PRTDMBNO, then goto RETPARTD
		1. Yes	ELSEIF no more members AND 8500.MDCDENR
		2. No	ne 1 thengoto MDCDENR
			ELSEIF no more members then goto CHGMDCDE
			ELSE goto STILDRUG for next member
			2: Goto PREMCHGX
14C	PREMCHGX	What is (your/ Name's) current premium amount for the Medicare Prescription Drug Plan?	IF no more members AND there exist values of
			MEMBNO that do not match any value of 8500.PRTDMBNO then goto RETPARTD
			6300.FRIDINO (HEIT GOLO RETFARTO
			ELSEIF no more members AND 8500.MDCDENR ne 1
			then goto MDCDENR
			ELSEIF no more members goto CHGMDCDE
			ELSE goto STILDRUG for next member
14C	RETPARTD	Have (you/you or any members of your household) enrolled in a Medicare Prescription Drug plan since the first of (reference month)?	1: IF NUMHOUSE = 1 goto BNEWEDP block ELSE goto DRUGPLAN
		◆ The Medicare Prescription Drug plan is also known as Medicare Part D	2,DK,RF: IF 8500.MDCDENR = 1 then goto
			CHGMDCDE
		4 Mar	ELSEIF 8500.MDCDENR ne 1 then goto MDCDENR
		1. Yes 2. No	MIDCULINA
14C	HHPARTD	Are (you/you or any members of your household) presently enrolled in a Medicare Prescription Drug plan?	1: IF NUMHOUSE = 1 then goto BNEWDP block ELSE goto DRUGPLAN
		◆ The Medicare Prescription Drug plan is also known as Medicare Part D	2,DK,RF: Goto MDCDENR
		1. Yes	
		2. No	
14C	DRUGPLAN	Who (is enrolled/enrolled) in a Medicare Prescription Drug plan?	1-30: Goto BNEWDP block
		 Enter line numbers for all that apply, separate with commas. 	DK,RF: Goto MDCDENR
			2.q

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Person 1	
		2. Person 2	
		3. Person 3	
		4. Person 4	
		5. Person 5	
		6. Person 6	
		7. Person 7	
		8. Person 8	
		9. Person 9	
		10. Person 10	
		11. Person 11	
		12. Person 12	
		13. Person 13	
		14. Person 14	
		15. Person 15	
		16. Person 16	
		17. Person 17	
		18. Person 18	
		19. Person 19	
		20. Person 20	
		21. Person 21	
		22. Person 22	
		23. Person 23	
		24. Person 24	
		25. Person 25	
		26. Person 26	
		27. Person 27	
		28. Person 28	
		29. Person 29	
		30. Person 30	
14C	ENROLLYR	In what year did (you/ Name) enroll in the prescription drug plan?	IF ENROLLYR gt (current year + 3) then goto
			CK_ENROLLYR
		◆ Enter year of enrollment	ELSEIF ENTRY = current year through current year + 2,
			goto ENROLLMO
			ELSEIF ENTRY = previous year AND (CUR_MONTH =
			1 (January), 2 (February) or 3 (March)) goto
			ENROLLMO
			ELSE goto DRGPREMX
14C	ENROLLMO	In what month did (you/ Name) enroll in the prescription drug plan?	Goto DRGPREMX

Enter month of enrollment

Section	CAPI Variable Name	Question Text	Skip Instructions
14C	DRGPREMX	What is the monthly premium for (your/ Name's) Medicare Prescription Drug plan?	Goto HHDRGSS
		A Do not include only monthly on newsparts and levelled become led	
1.10	LILIDDOOG	Do not include any monthly co-payments paid by the household.	IF as a second line as well are AND OFOO MOODEND as a
14C	HHDRGSS	Is the monthly premium deducted from a Social Security payment?	IF no more line numbers AND 8500.MDCDENR ne 1
			then goto MDCDENR
		1. Yes	ELSEIF no more line numbers then goto CHGMDCDE
		2. No	
			ELSE goto ENROLLMO for the next line number
			entered in DRUGPLAN
14C	CHGMDCDE	(Last time you said that you were enrolled in Medicaid. Has that changed?/Last time you	1: IF NUMHOUSE gt 1 then goto MDCDCOV
		said that ^8500MDCDCOV ^MEMBARE enrolled in Medicaid. Has th	ELSEIF 8500.OTHMED = 1 then goto
		1 Van	STLOTHMD
		1. Yes 2. No	ELSE goto OTHMED
		Z. INU	2,DK,RF: IF 8500.OTHMED = 1 then goto
			STLOTHMD
			ELSE goto OTHMED
14C	MDCDENR	Are (you/you or any members of your household) enrolled in Medicaid^MDCDSTfill?	1: IF NUMHOUSE gt 1 then goto MDCDCOV
			ELSEIF 8500.OTHMED = 1 then goto
			STLOTHMD
		1. Yes	ELSE goto OTHMED
		2. No	
			2,DK,RF: IF 8500.OTHMED = 1 then goto STLOTHMD
			ELSE goto OTHMED
14C	MDCDCOV	How many members of your household are covered by Medicaid^MDCDSTfill?	ELSEIF 8500.OTHMED = 1 then goto STLOTHMD
			ELSE goto OTHMED
14C	STLOTHMD	□ 33 ? [F1]	Goto S14C_END
		And for the contract of the co	
		Are (you/you or any members of your household) still covered by a plan such as VA Medical, CHAMPVA, CHIP^ST_CHIP, or Indian Health Service (IHS)?	
		1. Yes	
		2. No	
14C	OTHMED	□ 33 ? [F1]	1: IF NUMHOUSE gt 1 goto OTHMDCOV
			ELSE goto S14C_END
		Are (you/you or any members of your household) covered by a plan such as VA Medical,	
		CHAMPVA, CHIP^ST_CHIP, or Indian Health Service (IHS)?	2, DK, RF: Goto S14C_END
		1. Yes	
		T. 1C2	

2. No 14C OTHMDCOV How many members of your household are covered by these plans?	
· · · · · · · · · · · · · · · · · · ·	
	Goto S14C_END
15A S15A_INTRO 🚇 34-35	Goto MDB_ITEM
Now I am going to ask some questions about medical payments and reimbu will begin with your payments.	ursements. I
By payments I mean any co-pays and out-of-pocket expenses. Include all payments, even those for persons who are outside of your house	ehold.
Description Amount Month (MEDPDESC) (MEDPMTX) (MEDPMTMO)	
1. Enter 1 to Continue	
15A MDB_ITEM SCREEN 1 34 ? [F1]	1-15: Goto MEDPDESC
	95: Goto next ROW
Since the first of (reference month), have (you/you or any members of your	
made any payments for the following?	99: Goto S15A_END
Read each item on list	888: IF no more rows then goto S15A_END ELSE goto MDB_ITEM - next row of the table
SCREEN 2	
Have (you/you or any members of your household) made any payments for ◆ Read each item on list	
 Eye examinations, treatment, or surgery Purchase of eye glasses or contact lenses Dental care 	
4. Hospital room or hospital services	
5. Services by medical professionals other than physicians	
6. Physician services	
7. Lab tests or x-rays 8. Care in convalescent or nursing homes	
9. Care in convalescent or nursing nomes 9. Care for invalids, convalescents, handicapped, or elderly persons in the home	
10. Adult day care centers	
11. Other medical care and services	

Section	CAPI Variable Name	Question Text	Skip Instructions
		12. Hearing aids	
		13. Prescription drugs	
		14. Purchase or rental of supportive or rehabilitative equipment15. Purchase or rental of medical or surgical equipment for general use	
		95. Continue List	
		99. None/No more entries	
		888. Delete a line	
15A	MEDPDESC	◆ Ask if not apparent	IF MDB_ITEM = 14 or 15 then goto MEDPPRNT ELSE goto MEDPGFTC
		Describe the care/service/item.	
		Description Amount Month	
15A	MEDPPRNT	(MEDPDESC) (MEDPMTX) (MEDPMTMO) ◆ Ask if not apparent	Goto MEDPGFTC
10, (WEST TAILT		330 M251 31 13
		Was this for a purchase or rental?	
		Description Amount Month (MEDPDESC) (MEDPMTX) (MEDPMTMO)	
		Purchase Rental	
15A	MEDPGFTC	◆ Ask if not apparent	Goto MEDPMTMO
		(Was/Were) the (description) for a member of your household or someone outside of your household?	
		Description Amount Month (MEDPDESC) (MEDPMTX) (MEDPMTMO)	
		1. Household member	
		2. Non-household member	
15A	MEDPMTMO	In what month was(were) the payment(s) made?	Goto MEDPMTX
		(\star Enter 13 for same amount each month of the reference period. $\!I$)	
		Description Amount Month (MEDPDESC) (MEDPMTX) (MEDPMTMO)	
		1. January	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. February	
		3. March	
		4. April	
		5. May 6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
454	MEDDIATY	13. ^S15_13Option	Osts MEDDOD 0
15A	MEDPMTX	(What was the total amount paid in (month)?/What was the total amount paid?/What is your	Goto MEDPCB_S
		monthly expense?)	
		Description Amount Month	
		(MEDPDESC) (MEDPMTMO)	
15A	MEDPCB_S	◆ Enter 'C' for a combined expense	C: Goto MEDPCMB
			EMPTY Out MERRMORE
15A	MEDPCMB	□ 34-35 ? [F1]	EMPTY: Goto MEDPMORE Goto MEDPMORE
TOA	MEDPCIMB	84 34-35 ? [F1]	GOIO MEDPMORE
		What is (description) combined with?	
		• Enter all that apply, separate with commas	
		Description Amount Month	
		(MEDPDESC) (MEDPMTX) (MEDPMTMO)	
		Eye examinations, treatments, or surgery	
		2. Purchase of eye glasses or contact lenses	
		3. Dental care	
		4. Hospital room or hospital services	
		5. Services by medical professionals other than physicians	
		6. Physician services	
		7. Lab tests or x-rays	
		8. Care in convalescent or nursing homes	
		 Care for invalids, convalescents, handicapped, or elderly persons in the home Adult day care centers 	
		11. Other medical care and services	
		12. Hearing aids	

Section	CAPI Variable Name	Question Text	Skip Instructions
		13. Prescription drugs 14. Purchase or rental of supportive or rehabilitative equipment 15. Purchase or rental of medical or surgical equipment for general use 77. Misc. combined (unable to specify/DK)	
15A	MEDPMORE	Did (you/you or any members of your household) make any other payments for (description)?	1: IF ROW number = 40 then goto ERR_MAX ELSE goto MDB_ITEM, next line on the grid
		Description Amount Month (MEDPDESC) (MEDPMTX) (MEDPMTMO)	2,DK,RF: IF ROW number = 40 then goto S15A_END ELSE goto MDB_ITEM, next line on the grid
		1. Yes 2. No	
15B	S15B_INTRO	₽ 34-35	Goto MDC_ITEM
		Now I am going to ask some questions about your reimbursements.	
		By reimbursements I mean any money received for any members of your household from an insurance company, medical care provider or non-household member for medical expenses which you previously paid or will pay.	
		Do not include reimbursements from any consumer-driven health plans such as Flexible Spending Accounts (FSA), Health Reimbursement Accounts (HRA), Health Savings Accounts (HSA), High Deductible Health Plans (HDHP), or Medical Savings Accounts (MSA).	
		Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)	
		1. Enter 1 to Continue	
15B	MDC_ITEM	SCREEN 1	1-15: Goto MEDRDESC
		□ 34-35 ? [F1]	95: Goto next ROW
		Since the first of (reference month), have (you/you or any members of your	99: Goto S15B_END
		household) received any medical reimbursements for the items I just asked about?	888: IF no more grid lines then goto S15B_END
		IF YES - What did you get reimbursed for?	ELSE goto MDC_ITEM - next line of grid
		• Read each item on list	

Section	CAPI Variable Name	Question Text	Skip Instructions
		SCREEN 2	
		□ 35 ? [F1]	
		Have you received any reimbursements for	
		•	
		◆ Read each item on list	
		Eye examinations, treatment, or surgery	
		2. Purchase of eye glasses or contact lenses	
		3. Dental care	
		4. Hospital room or hospital services	
		5. Services by medical professionals other than physicians	
		6. Physician services	
		7. Lab tests or x-rays	
		8. Care in convalescent or nursing homes	
		9. Care for invalids, convalescents, handicapped, or elderly persons in the home	
		10. Adult day care centers	
		11. Other medical care and services	
		12. Hearing aids	
		13. Prescription drugs	
		14. Purchase or rental of supportive or rehabilitative equipment	
		15. Purchase or rental of medical or surgical equipment for general use	
		95. Continue List	
		99. None/No more entries	
		888. Delete a line	
.5B	MEDRDESC	◆ Ask if not apparent	IF ITEM = 14 or 15 then goto MEDRPRNT ELSE goto MEDRGFTC
		Describe the care/service/item.	ELOE goto MEDITOL 10
		Describe the outerest vicentein	
		Description Amount Month	
		(MEDRDESC) (MEDRMBX) (MEDRMBMO)	
.5B	MEDRPRNT	◆ Ask if not apparent	Goto MEDRGFTC
		Was this for a purchase or rental?	
		Description Amount Month	

Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)

1. Purchase

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. Rental	
15B	MEDRGFTC	◆ Ask if not apparent	Goto MEDRMBMO
		(Was/Were) the (description) for a member of your household or someone outside of your household?	
		Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)	
		Household member Non-household member	
15B	MEDRMBMO	In what month was(were) the reimbursement(s) received?	Goto MEDRMBX
		Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)	
		 January February March April May June July August September October November December 	
15B	MEDRMBX	What was the total amount received (in month)?	Goto MEDRCB_S
		Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)	
15B	MEDRCB_S	◆ Enter 'C' for a combined reimbursement	C: Goto MEDRCMB
			EMPTY: Goto MEDRMORE
15B	MEDRCMB	□ 34-35 ? [F1]	Goto MEDRMORE
		What other medical reimbursement is (description) combined with?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Enter all that apply, separate with commas	
		Description Amount Month	
		(MEDRDESC) (MEDRMBX) (MEDRMBMO)	
		 Eye examinations, treatments, or surgery Purchase of eye glasses or contact lenses 	
		3. Dental care	
		4. Hospital room or hospital services	
		5. Services by medical professionals other than physicians	
		6. Physician services	
		7. Lab tests or x-rays	
		8. Care in convalescent or nursing homes	
		9. Care for invalids, convalescents, handicapped, or elderly persons in the home	
		10. Adult day care centers11. Other medical care and services	
		12. Hearing aids	
		13. Prescription drugs	
		14. Purchase or rental of supportive or rehabilitative equipment	
		15. Purchase or rental of medical or surgical equipment for general use	
		77. Misc. combined (unable to specify/DK)	
15B	MEDRMORE	Did (you/you or any members of your household) receive any other reimbursements for (description)?	 IF ROW number = 22 then goto ERR_MAX ELSE goto MDC_ITEM, next line of grid
		Description Amount Month (MEDRDESC) (MEDRMBX) (MEDRMBMO)	2,DK,RF: IF ROW number = 22 then goto S15B_END ELSE goto MDC_ITEM, next line of grid
		(, (, (, (,	g <u>_</u> ,, e. g
		1. Yes	
10	EDA INTRO	2. No	0 / 50/ 175/
16	EDA_INTRO	□ 36	Goto EDA_ITEM
		Now I am going to ask about education expenses. Please	
		include any direct payments made for any members of your	
		household or for anyone outside your household and any payments you	
		made online or had automatically deducted.	
		◆ Do NOT include payments made on student loans	
		Description Type Month Amount	
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Enter 1 to Continue	
16	EDA_ITEM	□ 36 ? [F1]	1-9: Goto EDUDESC
		Since the first of (reference month), have (you/you or any members of your	99: Goto S16_END
		household) paid for any -	000: IF no mare grid lines then gote C16 END
		A Dood cook item on list	888: IF no more grid lines then goto S16_END ELSE goto EDA ITEM - next line of grid
		 Read each item on list. Baby sitting and in home day care are collected in Section 19A 	ELSE goto EDA_ITEM - Hext line of grid
		 Baby sitting and in nome day care are collected in Section 19A Do not include payments on student loans. They are collected in Section 22. 	
		Do not include payments on student loans. They are collected in Section 22.	
		1. Recreational lessons or other instructions?	
		2. Preschool or child day care centers?	
		3. Tuition, including pre-paid tuition?	
		4. Housing while attending school?	
		5. Food or board while attending school?6. Private school bus service?	
		7. Test preparation or tutoring services?	
		8. Purchase of any school books, supplies, or equipment which has not already been reported?	
		9. Other school related expenses not already reported?	
		99. None/No more entries	
		888. Delete the line	
16	EDUDESC	What was the expense for?	Goto EDUCGFTC
		Description Type Month Amount	
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	
16	EDUCGFTC	Was this expense for?	IF ITEM = 3 or 8 then goto EDSCHL_A
			ELSE goto EDMONTHA
		Description Type Month Amount	
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	
		4. Operating its distribution becomes table	
		1. Someone inside the household?	
16	EDSCHL_A	2. Someone outside the household? ◆ Ask if not apparent.	Goto EDMONTHA
10	ED3CUL_A	Ask if flot apparent.	GUIU EDIVION I MA
		What kind of school or facility was it?	
		Description Type Month Amount	
		Soonpass Typo Month Amount	

Section	CAPI Variable Name	Question Text	Skip Instructions
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	
		1. College or university	
		2. Elementary through high school	
		3. Child day care center	
		4. Nursery school or preschool	
		5. Vocational or technical school6. Other	
16	EDMONTHA	In what month was the payment made?	Goto EDEXOXA
10	LDINIOIVIII) (in mac month was the payment made.	0010 23270701
		 Enter 13 for same amount each month of the reference period. 	
		Description Type Month Amount (EDUDESC) (EDSHI A) (EDMONTHA) (EDEXOVA)	
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	
		1. January	
		2. February	
		3. March	
		4. April 5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December 13. Same amount each month.	
16	EDEXOXA	(How much was paid?/How much is paid monthly?)	Goto EDUCMB_S
			_
		Description Type Month Amount	
10	EDUOMB 0	(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	O. O. S. EDLIONE
16	EDUCMB_S	Enter 'C' for a combined expense	C: Goto EDUCMB
			EMPTY: Goto EDREIMB
16	EDUCMB	□ 36 ? [F1]	Goto EDREIMB
		What was a subject to the Market Constitution (O	
		What was combined with (Description)?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		◆ Enter all that apply, separate with commas	
		Description Type Month Amount	
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	
		1. Descriptional leaders or other instructions	
		 Recreational lessons or other instructions Preschool or child day care centers 	
		3. Tuition, including pre-paid tuition	
		4. Housing while attending school	
		5. Food or board while attending school	
		6. Private school bus service	
		7. Test preparation or tutoring services	
		8. Purchase of any school books, supplies, or equipment which has not already been reported	
		 Other school related expenses not already reported Misc. combined (unable to specify/DK) 	
16	EDREIMB	Has any of this amount been or will any of it be reimbursed	1: Goto EDREIMBX
		by an employer, agency, or other person?	
			2,DK,RF: Goto EDUMORE
		 Do not include reimbursements from dependent flexible spending accounts (FSA). 	
		Description Type Month Amount	
		<u>Description Type Month Amount</u> (EDUDESC) (EDSHL A) (EDMONTHA) (EDEXOXA)	
		(EDODESC) (EDSTIE_A) (EDMONTIA) (EDEXOXA)	
		1. Yes	
		2. No	
16	EDREIMBX	How much was or will be reimbursed?	Goto EDUMORE
		Do not include reimbursements from dependent flexible spending accounts (FSA).	
		Description Type Month Amount	
		(EDUDESC) (EDSHL A) (EDMONTHA) (EDEXOXA)	
16	EDUMORE	Did you make any other payments for (Description)?	1: IF ROW number = 34 then goto ERR_MAX
			ELSE goto EDA_ITEM, next line of grid
		Description Type Month Amount (EDUPESO) (EDUPESO) (EDUPESO)	O DIV DELLE DOM month. OATH COST TOTAL
		(EDUDESC) (EDSHL_A) (EDMONTHA) (EDEXOXA)	2,DK,RF: IF ROW number = 34 then goto S16_END ELSE goto EDA_ITEM, next line of grid
		1. Yes	
		2. No	

7		Question Text	Skip Instructions
	SUB_INTRO	₽ 37-38	Goto SUB_ITEM
		Now I am going to ask about expenses for subscriptions, memberships, books, and entertainment. Please remember to include any payments you made online or had automatically deducted. Also, include any shipping and handling charges with the cost of any item that was shipped.	
		Description Month Amount (SUBDESC) (SUBMO) (SUBEXPX)	
7A	SUB_ITEM	1. Enter 1 to Continue SCREEN 1	1-26: Goto SUBDESC
	SOD_ITEM	SCILLIN 1	1-20. G010 30DDE3C
		₩ 37 ? [F1]	95: Goto next row
		Since the first of (reference month) have (you/you or any members of your household) had	99: Goto S17A_END
		any membership costs or other expenses related to any of the following? Do not include contributions to or membership in religious, professional, business, or other tax deductible organizations.	888: IF no more grid lines goto S17A_END ELSE goto SUB_ITEM - next line of grid
		Read each item on list.	
		SCREEN 2	
		□ 37 ? [F1]	
		Since the first of (reference month), have (you/you or any members of your household) purchased any of the following items for your household or for someone outside your household?	
		• Read each item on list	
		SCREEN 3	
		₩ 38 ? [F1]	
		Have you purchased any -	

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Read each item on list	
		 Report blank tapes, CDs, and DVDs in Section 6B under item code 11 	
		1. Golf courses or country clubs	
		2. Health clubs, fitness centers, swimming pools, weight loss centers, or other sports or	
		recreational organizations	
		3. Fees for participating in sports such as golf, bowling, biking, hockey, football, or swimming	
		4. Vacation clubs	
		5. Civic, service, fraternal, or other social organizations	
		6. Credit card membership fees	
		7. Shopping club memberships including warehouse clubs like Sam's Club and discount	
		memberships like Amazon Prime	
		8. Direct or online dating services	
		9. Single or season tickets to spectator sports events such as football, baseball, hockey racing, or	
		track events	
		10. Single or season tickets to plays, operas, or concerts	
		11. Tickets to movies, parks, or museums	
		12. Single copies of newspapers, magazines, or periodicals, including digital	
		13. Subscriptions to newspapers, magazines, or periodicals, including digital	
		14. Books purchased through a book club	
		15. Books or digital books not purchased through a book club. Do not include school books or reference books.	
		16. Photographic film or disposable cameras	
		17. Photo printing or processing	
		18. Purchased music files, CDs, or records	
		19. Subscription music services such as Rhapsody or Pandora	
		20. Purchased video files, Blu-Ray discs, or DVDs	
		21. Rented video files or DVDs	
		22. Streaming video subscription	
		23. Purchased video games, not including computer games	
		24. Rented video games	
		25. Applications, games, or ringtones for a cellphone or mobile device not already reported	
		26. Online games or other internet entertainment sites	
		95. Continue list	
		99. None/No more entries	
		888. Delete the line	
17A	SUBDESC	(Description)	Goto S17GFTCA
		fill for SUBDESC	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Month Amount (SUBDESC) (SUBMO) (SUBEXPX)	
17A	S17GFTCA	Was this purchase for your household or someone outside your household?	Goto SUBMO
		Description Month Amount	
		(SUBDESC) (SUBMO) (SUBEXPX)	
		1. For household	
		2. For someone outside your household	
17A	SUBMO	In what month did you have this expense?	Goto SUBEXPX
		(* Enter 13 for same amount each month of the reference period/)	
		Description Month Amount (SUBDESC) (SUBMO) (SUBEXPX)	
		1. January	
		2. February	
		3. March 4. April	
		5. May	
		6. June	
		7. July	
		8. August 9. September	
		10. October	
		11. November	
		12. December	
17A	SUBEXPX	13. ^S17_13Option (What was the total amount of this expense?/What is ^YR_YRCUS monthly expense?) ((Include shipping and handling fees./))	IF ITEM = 18, 20, 21, 22, or 25, goto C
		(finetiage emblang and namaning recent //	ELSEIF INTNMBR = 4 AND (ITEM = 11) AND (INTPER
		(Include ticket/admission service fees and surcharges/)	= 201607,
		Description Month Amount	201608, 201609, 201406, 201407 or 201409)
		<u>Description Month Amount</u> (SUBDESC) (SUBMO) (SUBEXPX)	then goto TICSTORE
		(332223) (3322,47)	ELSE goto MORE
17A	S17ACM_S	◆ Enter a 'C' for a combined expense.	C: goto S17ACMB
			empty: goto S17AOTHR

Section	CAPI Variable Name	Question Text	Skip Instructions
		<u>Description Month Amount</u> (SUBDESC) (SUBMO) (SUBEXPX)	
17A	S17ACMB	□ 38 ?[F1]	Goto S17AOTHR
		What other expense is the (description) combined with?	
		• Enter all that apply, separate with commas.	
		Description Month Amount (SUBDESC) (SUBMO) (SUBEXPX)	
		18. Purchased music files, CDs, or records20. Purchased video files, Blu-Ray discs, or DVDs21. Rented video files or DVDs22. Streaming video subscriptions	
		25. Applications, games, or ringtones for a cellphone or mobile device not already reported	
17A	TICSTORE	Where did you purchase these tickets?	IF ENTRY contains ".com", ".Com", ".cOm", ".coM", ".COm", ".COM", ".cOM", or ".COM", then goto MORE
		Enter store, website, or company nameIf purchased from a private individual, enter "private individual."	ELSEIF ENTRY = DK or RF then goto MORE
			ELSE goto TICPURCH
17A	TICPURCH	◆ Ask if not apparent	1,DK,RF: Goto MORE
		Was this purchased online or in-person?	2: Goto TICLOC
		Online In person	
17A	TICLOC	Where is ^TICSTORE_fill located?	Goto MORE
		◆ Enter city and state	
17A	S17AOTHR	Did you (purchase/pay for renting/pay for) any other (description)?	 IF ROW number = 40 then goto ERR_MAX ELSE goto SUB_ITEM, next line of grid
		Description Month Amount (SUBDESC) (SUBMO) (SUBEXPX)	2,DK,RF: Goto SUB_ITEM, next line of grid
		1. Yes 2. No	
18A	ANYOUTSD	Now I am going to ask about trips and vacations.	1: Goto NUMOUTSD
±5/ \	,	יים	2. 03.0 NOMOOTOD

Section	CAPI Variable Name	Question Text	Skip Instructions
		Since the first of (reference month) have (you/you or any members of your household) taken any trips entirely paid for by anyone outside your household, such as a business, employer, or relative?	2,DK,RF: IF I_18Acoun gt 0 then goto TBLSECT18A_1 ELSE goto ANYTRIPS
		1. Yes 2. No	
18A	NUMOUTSD	How many?	Goto ANYYUPD
18A	ANYYUPD	Even on trips entirely paid for by someone outside of your household there are sometimes miscellaneous expenses which are not paid for. Did (you/your household) have any expenses on (this trip/these trips) that will not be covered by a business, employer or other non-	1: Goto FOODYUPD 2,DK,RF: Goto CHKUNTRP
		1. Yes 2. No	
18A	FOODYUPD	Did these expenses include anything for Food and beverages?	Goto LODGYUPD
		1. Yes 2. No	
18A	LODGYUPD	Did these expenses include anything for	Goto TRANYUPD
		Lodging?	
		1. Yes 2. No	
18A	TRANYUPD	Did these expenses include anything for	Goto ELSEYUPD
		Transportation?	
		1. Yes 2. No	
18A	ELSEYUPD	Did these expenses include	1: Goto S18AELSE
		Anything else?	2,DK,RF: Goto TOTYUPDX

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
L8A	S18AELSE	◆ Specify:	Goto TOTYUPDX
L8A	TOTYUPDX	What was the total amount of these expenses?	1Goto CHKUNTRP
18A1	ENDTRP1	(Last interview you reported (# of unfinished trips) (trip/trips) which had not yet ended. I'd like to ask about (that trip/those trips) now. /	0: IF no more unended trips then exit block and goto ANYTRIPS
			ELSE goto next line on grid
		In what month did your trip to (place word for 8500.TRIPPLAC) end?	
		<u>Destination Ended How paid Number of trips</u> (TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	REF_MONTH - CUR_MONTH: Goto ANYBOTH1
		()	DK,RF: Goto ANYBOTH1
		0. Trip not ended	
		1. January	
		2. February 3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
18A1	ANYBOTH1	Did a business, employer, or any other non-household member pay any of the costs for this trip?	IF no more unended trips then exit the block and goto ANYTRIPS
			ELSE goto ENDTRP1, next line of grid
		1. Yes	LEGE goto LIND ITA 1, HEAT line of grid
		2. No	
18A2	ANYTRIPS	□ 39 ? [F1]	1: Goto TRPPLACE
		Since the first of (reference month), have (you/you or any members of your household)	2,DK,RF: Goto S18A_END
		taken (any trips/any other trips) for reasons such as:	_,,

^{*} Visiting relatives or friends?

Section	CAPI Variable Name	Question Text	Skip Instructions
		* Business? * Recreational trips? * Other trips overnight or longer? * Day trips of at least 75 miles away from home?	
10.4.0	TRIPRIAG	1. Yes 2. No	00 de marte de la DECTOORE
18A2	TRIPPLAC	Where did (you/your household) go?	30 characters: Goto DESTCODE
		◆ Enter 888 to delete the trip	888: Goto S18MORE
		<u>Destination Ended How paid Number of trips</u> (TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	
18A2	DESTCODE	?[F1]	2 character state abbrev.,DK,RF: Goto ENDTRP2
		◆ Type state abbreviation for a U.S. destination or X for foreign country destination	X: Goto FOREIGN
		<u>Destination Ended How paid Number of trips</u> (TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	
18A2	FOREIGN	Select the country or region.	Goto ENDTRP2
		 Africa Asia Australia Canada Caribbean Central America Europe Mexico Middle East South America South Pacific 	
18A2	ENDTRP2	In what month did this trip end?	0: Goto S18MORE
		• (0) Trip not ended	REF_MONTH-CUR_MONTH: Goto MORTHONE
		<u>Destination Ended How paid Number of trips</u> (TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	DK,RF: Goto MORTHONE

Section	CAPI Variable Name	Question Text	Skip Instructions
		O. Tribunat and ad	
		0. Trip not ended	
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October	
		11. November	
		12. December	
18A2	MORTHONE	Did you take more than one trip to (trip destination) in (month trip ended)?	1: Goto NUMTRIPS
		Destination Ended How paid Number of trips	2,DK,RF: Goto ANYBOTH2
		(TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	2,DK,KF. GOIO ANTBOTTIZ
		(1111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		1. Yes	
		2. No	
18A2	NUMTRIPS	How many times did you go to (trip destination)	Goto ANYBOTH2
10, 12		in (month trip ended)?	00.07.11.1201112
		(c	
		Destination Ended How paid Number of trips	
		(TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	
18A2	ANYBOTH2	Were any of the expenses for (this trip/these trips) paid for	Goto S18MORE
		by anyone outside of your household?	
		<u>Destination Ended How paid Number of trips</u>	
		(TRPPLACE) (ENDTRP2) (ANYBOTH2) (NUMTRIPS)	
		1. Yes	
		2. No	
18A2	S18MORE	□ 40 ? [F1]	1: Goto TRIPPLAC, next line on the grid
10/12	CIONOILE	BOOM TO . [I A]	1. Ooto Trail I LAO, Hoxelline on the grid
		Since the first of (reference month), have you taken any other trips for reasons such as:	2,DK,RF: Goto S18A_END
		chief and meter (reference menting, have you taken any other trips for reasons such as	

* Visiting relatives or friends?

Section	CAPI Variable Name	Question Text	Skip Instructions
		* Business? * Recreational trips? * Other trips overnight or longer? * Day trips of at least 75 miles away from home?	
		1. Yes 2. No	
18BC	NUMNIGHT	(Now I'm going to ask you about the ^TRIP that ^YOU_YRCU took to ^TRPPLACE ending in ^NUMNIGHTC/You	0-800: Goto PKGTRIP
		(Since (you/your CU) took a set of similar trips to (Trip destination) in (month trip ended) , I	DK,RF: Goto PKGTRIP
		wil	888: Goto S18BC_END
		How many nights did (you/you or any members of your household) spend away from home on (these trips/this trip)?	
		 Enter 0 for none Enter 888 to delete this trip 	
18BC	PKGTRIP	(Sometimes when people take a trip they have some sort of package deal that covers some or all of the costs./	1: Goto FOODDEAL
		Was all or part of (these trips/this trip) covered by a package deal?	2,DK,RF: Goto TRPTRNS
		1. Yes 2. No	
18BC	FOODDEAL	Did the package deal include	Goto LODGDEAL
		Food and beverages?	
		1. Yes 2. No	
18BC	LODGDEAL	Did the package deal include	Goto TRANDEAL
		Lodging?	
		1. Yes 2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
18BC	TRANDEAL	Did the package deal include	Goto ELSEDEAL
		Transportation?	
		1. Yes	
		2. No	
18BC	ELSEDEAL	Did the package deal include	1: Goto S18BELSE
		Anything else?	2,DK,RF: Goto PKGTRIPX
		1. Yes	
		2. No	
18BC	S18BELSE	• Specify:	Goto PKGTRIPX
18BC	PKGTRIPX	How much did (you/your household) pay for the package deal?	Goto TRPTRNS
18BC	TRPTRNS	🚇 39 ? [F1]	1-14: IF 1 is selected then goto CMLOCALX
			ELSEIF 2 is selected then goto CMPLANEX
		Starting at the beginning of this trip, please tell me all the kinds of transportation	ELSEIF 3 is selected then goto CMTRAINX
		(you/you or any members of your household) used from the time you (they) left home to	ELSEIF 4 is selected then goto CMBUSX
		the time you (they) got back home.	ELSEIF 5 is selected then goto CMSHIPX
			ELSEIF 6 is selected then goto RTCARX
		Enter all that apply, separate with commas	ELSEIF 7 is selected then goto RTMOPEDX
			ELSEIF 8 is selected then goto RTPLANEX
		1. Local (taxi, etc.)	ELSEIF 9 is selected then goto RTBOATX
		2. Airplane	ELSEIF 10 is selected then goto RTCAMPX
		3. Train	ELSEIF 11 is selected then goto RTOTHERX ELSEIF 12-14 is selected then goto ANYGAS
		4. Bus	ELSEIF 12-14 is selected their goto ANYGAS
		5. Ship	DK,RF: Goto LODGING
		6. Automobile, truck, van (Rented)	DK,KF. GOIO LODGING
		7. Motorcycle, moped (Rented)	
		8. Private plane (Rented)	
		9. Boat, trailer (Rented)	
		10. Camper (Rented)	
		11. Other vehicles (Rented)	
		12. Automobiles or other vehicles privately owned or leased by household	
		13. Vehicle owned by someone else (Private)	
18BC	CMLOCALX	14. Other transport (Private) How much did (you/you or any members of your household) spend for local transportation	IF 2 is selected in TRPTRNS then goto CMPLANEX
TODC	CIVILUCALA	(taxi, etc.)	ELSEIF 3 is selected in TRPTRNS then goto
		(mai, etc.)	LLOLIT O IS SCIEGLED III TIXI TIXING LITERI YOLU

Section	CAPI Variable Name	Question Text	Skip Instructions
		(other than what the package deal covered/)?	CMTRAINX ELSEIF 4 is selected in TRPTRNS then goto CMBUSX ELSEIF 5 is selected in TRPTRNS then goto CMSHIPX ELSEIF 6 is selected in TRPTRNS then goto RTCARX ELSEIF 7 is selected in TRPTRNS then goto RTMOPEDX ELSEIF 8 is selected in TRPTRNS then goto RTPLANEX ELSEIF 9 is selected in TRPTRNS then goto RTBOATX ELSEIF 10 is selected in TRPTRNS then goto RTCAMPX ELSEIF 11 is selected in TRPTRNS then goto RTOTHERX ELSEIF 12-14 are selected in TRPTRNS then goto
			ANYGAS ELSE goto LODGING
18BC	CMPLANEX	How much did (you/you or any members of your household) spend for airfare (other than what the package deal covered/)?	IF 3 is selected in TRPTRNS then goto CMTRAINX ELSEIF 4 is selected in TRPTRNS then goto CMBUSX ELSEIF 5 is selected in TRPTRNS then goto CMSHIPX ELSEIF 6 is selected in TRPTRNS then goto RTCARX ELSEIF 7 is selected in TRPTRNS then goto RTMOPEDX ELSEIF 8 is selected in TRPTRNS then goto RTPLANEX ELSEIF 9 is selected in TRPTRNS then goto RTBOATX ELSEIF 10 is selected in TRPTRNS then goto RTCAMPX ELSEIF 11 is selected in TRPTRNS then goto RTOTHERX ELSEIF 12-14 are selected in TRPTRNS then goto ANYGAS ELSE goto LODGING
18BC	CMTRAINX	How much did (you/you or any members of your household) spend for train fare (other than what the package deal covered/)?	IF 4 is selected in TRPTRNS then goto CMBUSX ELSEIF 5 is selected in TRPTRNS then goto CMSHIPX ELSEIF 6 is selected in TRPTRNS then goto RTCARX ELSEIF 7 is selected in TRPTRNS then goto RTMOPEDX ELSEIF 8 is selected in TRPTRNS then goto RTPLANEX ELSEIF 9 is selected in TRPTRNS then goto RTBOATX ELSEIF 10 is selected in TRPTRNS then goto

Section	CAPI Variable Name	Question Text	Skip Instructions
			RTCAMPX
			ELSEIF 11 is selected in TRPTRNS then goto
			RTOTHERX
			ELSEIF 12-14 are selected in TRPTRNS then goto
			ANYGAS
			ELSE goto LODGING
18BC	CMBUSX	How much did (you/you or any members of your household) spend for bus fare (other than	IF 5 is selected in TRPTRNS then goto CMSHIPX
		what the package deal covered/)?	ELSEIF 6 is selected in TRPTRNS then goto RTCARX
			ELSEIF 7 is selected in TRPTRNS then goto
			RTMOPEDX
			ELSEIF 8 is selected in TRPTRNS then goto
			RTPLANEX
			ELSEIF 9 is selected in TRPTRNS then goto RTBOATX
			ELSEIF 10 is selected in TRPTRNS then goto
			RTCAMPX
			ELSEIF 11 is selected in TRPTRNS then goto
			RTOTHERX
			ELSEIF 12-14 are selected in TRPTRNS then goto
			ANYGAS
			ELSE goto LODGING
18BC	CMSHIPX	How much did (you/you or any members of your household) spend for ship fare (other than	IF 6 is selected in TRPTRNS then goto RTCARX
		what the package deal covered/)?	ELSEIF 7 is selected in TRPTRNS then goto
			RTMOPEDX
			ELSEIF 8 is selected in TRPTRNS then goto
			RTPLANEX
			ELSEIF 9 is selected in TRPTRNS then goto RTBOATX
			ELSEIF 10 is selected in TRPTRNS then goto
			RTCAMPX
			ELSEIF 11 is selected in TRPTRNS then goto
			RTOTHERX
			ELSEIF 12-14 are selected in TRPTRNS then goto
			ANYGAS
			ELSE goto LODGING
18BC	RTCARX	How much did (you/you or any members of your household) spend for rented automobiles,	IF 7 is selected in TRPTRNS then goto RTMOPEDX
		trucks or vans, not including	ELSEIF 8 is selected in TRPTRNS then goto
		gas (you/you or any members of your household) bought (other than what the package	RTPLANEX
		deal covered/)?	ELSEIF 9 is selected in TRPTRNS then goto RTBOATX
			ELSEIF 10 is selected in TRPTRNS then goto
		(* Do not include any rental costs already collected in Section 10 /)	RTCAMPX
			ELSEIF 11 is selected in TRPTRNS then goto
			RTOTHERX

Section	CAPI Variable Name	Question Text	Skip Instructions
			ELSE goto ANYGAS
18BC	RTMOPEDX	How much did (you/you or any members of your household) spend for rented motorcycles or mopeds, not including gas (you/you or any members of your household) bought (other than what the package deal covered/)?	IF 8 is selected in TRPTRNS then goto RTPLANEX ELSEIF 9 is selected in TRPTRNS then goto RTBOATX ELSEIF 10 is selected in TRPTRNS then goto RTCAMPX
		(* Do not include any rental costs already collected in Section 10 /)	ELSEIF 11 is selected in TRPTRNS then goto RTOTHERX ELSE goto ANYGAS
18BC	RTPLANEX	How much did (you/you or any members of your household) spend for rented private planes, not including gas (you/you or any members of your household) bought (other than what	IF 9 is selected in TRPTRNS then goto RTBOATX ELSEIF 10 is selected in TRPTRNS then goto RTCAMPX
		the package deal covered/)?	ELSEIF 11 is selected in TRPTRNS then goto RTOTHERX
		(*Do not include any rental costs already collected in Section 10 /)	ELSE goto ANYGAS
18BC	RTBOATX	How much did (you/you or any members of your household) spend for rented boats or trailers,	IF 10 is selected in TRPTRNS then goto RTCAMPX ELSEIF 11 is selected in TRPTRNS then goto
		not including gas (you/you or any members of your household) bought (other than what the package deal covered/)?	RTOTHERX ELSE goto ANYGAS
		(* Do not include any rental costs already collected in Section 10 /)	
18BC	RTCAMPX	How much did (you/you or any members of your household) spend for rented campers, not including gas (you/you or any members of your household) bought (other than what the package deal covered/)?	IF 11 is selected in TRPTRNS then goto RTOTHERX ELSE goto ANYGAS
		(* Do not include any rental costs already collected in Section 10 /)	
18BC	RTOTHERX	How much did (you/you or any members of your household) spend for other rented vehicle transportation, not including gas (you/you or any members of your household) bought (other than what the package deal covered/)?	Goto ANYGAS
		(* Do not include any rental costs already collected in Section 10 /)	
18BC	ANYGAS	While on the trip did (you/you or any members of your household) stop to buy any gasoline, diesel fuel, or any other fuels?	1: Goto GASOILX
			2,DK,RF: Goto ANYTOLL
		1. Yes 2. No	
18BC	GASOILX	(How much did ^YOU_ANYMEM spend for that?/What costs for gasoline or other fuels won't be reimbursed?)	Goto ANYTOLL
18BC	ANYTOLL	While on the trip, did (you/you or any members of your household) spend anything for tolls, not already reported?	1: Goto TRPTOLLX

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	2,DK,RF Goto ANYPARK
18BC	TRPTOLLX	2. No (How much did ^YOU_ANYMEM spend for tolls?/What costs for tolls won't be reimbursed?)	Goto ANYPARK
18BC	ANYPARK	Did (you/you or any members of your household) have any parking fees?	1: Goto PARKINGX
		1. Yes 2. No	2,DK,RF: Goto LODGING
18BC	PARKINGX	(How much were they?/What cost for parking fees won't be reimbursed?)	IF entry gt 100 and (ne DK or RF) then goto ERR1_PARKINGX ELSE goto LODGING
18BC	LODGING	Did (you/you or any members of your household) spend anything for hotels, cottages, trailer camps,	1: Goto LDGCOSTX
		or other lodging (not counting what the package deal covered/)? (Do not include expenses previously reported for vacation clubs.)	2,DK,RF: Goto TRPFOOD
		1. Yes 2. No	
18BC	LDGCOSTX	(What was the cost, including taxes and tips?/What costs for lodging, including taxes and tips, won't be reimbursed?)	Goto TRPFOOD
18BC	TRPFOOD	Did (you/you or any members of your household) spend anything for meals, snacks, or drinks at restaurants,	1: Goto TRPFOODX
		bars, or fast food places (not counting what the package deal covered/)?	2,DK,RF: Goto ANYGROC
		1. Yes 2. No	
18BC	TRPFOODX	(What was the cost, including taxes and tips?/What costs for these things won't be reimbursed?)	Goto TRPALCIN
18BC	TRPALCIN	Was any of the (amount/\$ (entry in TRPFOODX) for alcoholic beverages?	1: Goto TRPALCHX
		1. Yes 2. No	2,DK,RF: Goto ANYGROC
18BC	TRPALCHX	(What was the cost for alcoholic beverages, including taxes and trips?/What costs for alcoholic beverages, including taxes and tips, won't be reimburs	Goto ANYGROC
18BC	ANYGROC	Did (you/you or any members of your household) spend anything for food or beverages at grocery stores,	1: Goto TRPGROCX

Section	CAPI Variable Name	Question Text	Skip Instructions
		convenience stores, or liquor stores on this trip?	2,DK,RF: Goto ANYSPEQP
		1. Yes	
		2. No	
18BC	TRPGROCX	(What were the expenses, including taxes?/What costs, including taxes, won't be reimbursed?)	Goto ANYALC
L8BC	ANYALC	Was any of the (amount/\$ (entry in TRPGROCX)) for alcoholic beverages?	1: Goto TRPALCGX
		1. Yes 2. No	2,DK,RF: Goto ANYSPEQP
18BC	TRPALCGX	(What was the cost for alcoholic beverages, including taxes?/What costs for alcoholic beverages, including taxes, won't be reimbursed?)	Goto ANYSPEQP
L8BC	ANYSPEQP	🚇 40 ? [F1]	1: Goto TRPSPRTX
		Did (you/you or any members of your household) pay any fees to play sports, exercise, or rent an sports equipment (not counting what the package deal covered/)?	2,DK,RF: Goto ANYENTER
		1. Yes 2. No	
18BC	TRPSPRTX	4 0	Goto ANYENTER
		(How much did (you/you or any member of your CU) pay?/What costs for playing sports or renting sports equipment won't be reimbursed?)	
18BC	ANYENTER	🚇 40 ? [F1]	1: Goto TRPETRTX
		Did (you/you or any members of your household) spend anything on this trip for entertainment or admissions (not counting what the package deal covered/)?	2,DK,RF: Goto ANYMISC
		1. Yes 2. No	
18BC	TRPETRTX	(How much did (you/you or any member of your CU) spend?/What costs for entertainment and admissions won't be reimbursed?)	Goto ANYMISC
18BC	ANYMISC	Did (you/you or any members of your household) have any expenses for this trip such as for	1: Goto TRMISCX
		souvenirs, tourist booklets, and so on?	2,DK,RF: Exit block and goto CHKTCOMB
		1. Yes	

2. No (How much were these expenses?/What costs for these things won't be reimbursed?) Exit block and goto CHKT REC CHKTCOMB Are there combined expenses for this trip the respondent was not able to separate? 1. Yes 2. No 18BC TCOMBEST Only those expenses the respondent could not provide individual expenses for should be combined and entered here. Does this (\$ (entry in TCOMBEST)) include anything for	СОМВ
18BC CHKTCOMB Are there combined expenses for this trip the respondent was not able to separate? 1. Yes 2. No 18BC TCOMBEST (Only those expenses the respondent could not provide individual expenses for should be combined and entered here.) 18BC FOODCOMB Does this (\$ (entry in TCOMBEST)) include anything for	COMB
was not able to separate? 1. Yes 2. No 18BC TCOMBEST	
1. Yes 2. No 18BC TCOMBEST	
1. Yes 2. No **Only those expenses the respondent could not provide individual expenses for should be combined and entered here./ 18BC FOODCOMB **Does this (\$ (entry in TCOMBEST)) include anything for Goto LODGCOMB Food? 1. Yes 2. No 18BC LODGCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto TRANCOMB Lodging 1. Yes 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for	
2. No 18BC TCOMBEST	
18BC TCOMBEST	
Combined and entered here./ Does this (\$ (entry in TCOMBEST)) include anything for	
FOODCOMB Does this (\$ (entry in TCOMBEST)) include anything for	
1. Yes 2. No 18BC LODGCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto TRANCOMB 1. Yes 2. No 1. Yes 2. No 1. Yes 2. No Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
1. Yes 2. No 18BC LODGCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto TRANCOMB Lodging 1. Yes 2. No 1. Yes 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
2. No 18BC LODGCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto TRANCOMB Lodging 1. Yes 2. No 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
18BC LODGCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto TRANCOMB 1. Yes 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
1. Yes 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
1. Yes 2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
2. No 18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
18BC TRANCOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto ELSECOMB	
Transportation?	
1. Yes	
2. No	
18BC ELSECOMB Does this (\$ (entry in TCOMBEST)) include anything for Goto OTHRCOMB	
Other expenses?	
1. Yes	
2. No	
18BC OTHRCOMB Does this (\$ (entry in TCOMBEST)) include Goto TRPGFTC	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Any expenses for others?	
		1. Yes	
18BC	TRPGFTC	2. No (You've told me about many expenses (you/you or your CU) had on this trip. Were any of	1: Goto TRPGTCX
10BC	TRAGETO	these expens	1: Goto TRPGTCX
			2,DK,RF: Goto S18BC_END
		1. Yes	
		2. No	
18BC	TRPGFTCX	(How much of the total expenses for this trip were for persons outside your CU?/How much of the tota	Goto S18BC_END
18E	ANYNONCU	Sometimes people in a household don't take a trip themselves, but pay for	1: Goto FOODNOCU
		part or all of a trip that someone else takes. Since the first of (reference month), have (you/you or any members of your household) paid for part or all of	2 DV DE: Coto S10E END
		such a trip for any non-household members?	Z,DK,KF. G010 S10L_LND
		1. Yes	
		2. No	
18E	FOODNOCU	Did these expenses include anything for	Goto LODGNOCU
		Food and beverages?	
		1. Yes	
		2. No	
18E	LODGNOCU	Did these expenses include anything for	Goto TRANNOCU
		Lodging?	
		1. Yes 2. No	
18E	TRANNOCU	Did these expenses include anything for	Goto ELSENOCU
		Transportation?	
		• • • • • • • • • • • • • • • • • • • •	
		1. Yes	
		1.100	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. No	
18E	ELSENOCU	Did these expenses include	Goto TRNONCUX
		Anything else?	
		1. Yes	
		2. No	
18E	TRNONCUX	What was the total amount that (you/your household) paid for those trips?	Goto S18E_END
18F	ANYLOC	Sometimes people stay overnight in a local hotel or motel during holidays, family getaways, moves, or home repair. Since the first of (reference month), have	1: Goto NUMLOC
		(you/you or any members of your household) stayed overnight in a local hotel or motel?	2,DK,RF: Goto S18F_END
		1. Yes 2. No	
18F	NUMLOC	How many nights did (you/you or any members of your household) spend away from home on this stay?	Goto ANYLOCDL
18F	ANYLOCDL	Sometimes when people stay away from home overnight they have some sort of package deal that covers some or all of the costs. Was all	1: Goto FOODLCDL
		or part of this stay covered by anything like that?	2,DK,RF: Goto ANYLODGE
		1. Yes	
		2. No	
18F	FOODLCDL	Did the package deal include anything for	Goto LODGLCDL
		Food and beverages?	
		1. Yes 2. No	
18F	LODGLCDL	Did the package deal include anything for	Goto ENTRLCDL
		Lodging?	
		1. Yes	
18F	ENTRLCDL	2. No Did the package deal include anything for	Goto ELSELCDL
101	LIVINLODE	Did the package deal melade anything for	OUR LEGELODE

Section	CAPI Variable Name	Question Text	Skip Instructions
		Entertainment?	
		1. Yes	
		2. No	
18F	ELSELCDL	Did the package deal include	1: Goto S18FELSE
		Anything else?	2,DK,RF: Goto LOCDEALX
		Anything eise?	2,DK,RF. G010 LOCDEALX
		1. Yes	
105	040551.05	2. No	Octo LOODEALY
18F	S18FELSE	• Specify:	Goto LOCDEALX
18F	LOCDEALX	How much did (you/you or any members of your household) pay for the package deal?	Goto ANYLODGE
18F	ANYLODGE	Did (you/you or any members of your household) spend anything for hotels, motels, cottages, trailer camps, or other lodging (not counting what the package deal covered/)?	1: Goto LOCLODGX
			2,DK,RF: Goto ANYMEAL
		1. Yes 2. No	
18F	LOCLODGX	What was the cost, including taxes and tips?	Goto ANYMEAL
18F	ANYMEAL	Did (you/you or any members of your household) spend anything for meals, snacks, or	1: Goto LOCMEALX
		drinks	
		at restaurants, bars, or fast food places (not counting what the package deal covered/)?	2,DK,RF: Goto ANYLCGR
		1. Yes	
		2. No	
18F	LOCMEALX	What was the cost, including taxes and tips?	Goto ANYALCML
18F	ANYALCML	Was any of the (amount/(entry in LOCMEALX)) for alcoholic beverages?	1: Goto ALCMEALX
		1. Yes	2,DK,RF: Goto ANYLCGR
		2. No	2,513,141. 00107111120013
18F	ALCMEALX	What was the cost for alcoholic beverages, including taxes and tips?	Goto ANYLCGR
18F	ANYLCGR	Did (you/you or any members of your household) spend anything for food or beverages at grocery stores, convenience stores, or liquor stores?	1: Goto LOCGROCX
		g : , ,	2,DK,RF: Goto ANYADMIS
		1. Yes	
100	LOCGROCX	2. No	Coto ANIVALCOD
18F		What were the expenses, including taxes?	Goto ANYALCGR
18F	ANYALCGR	Was any of the (amount/ entry in LOCGROCX) for alcoholic beverages?	1: Goto ALCGROCX
			2,DK,RF: Goto ANYADMIS

CAPI Variable Name	Question Text	Skip Instructions
	1. Yes	
ALCGROCX		Goto ANYADMIS
ANYADMIS	□ 40 ? [F1]	1: Goto LOCADMSX
	Did (you/you or any members of your household) spend anything on this stay for entertainment or admissions (not counting what the package deal covered/)?	2,DK,RF: Goto LOCCOMBX
	1. Yes 2. No	
LOCADMSX	How much did (you/you or any members of your household) pay?	Goto LOCCOMBX
CHKFCOMB	 Are there combined expenses for food/beverages, lodging, 	1: Goto LOCCOMBX
	transportation, or other things?	2: Goto DIDYOU
	1. Yes 2. No	
LOCCOMBX	Only those things the respondent could not provide individual expenses	1-99999999: Goto FOODLCCM
	for should be combined and entered here.	D,R: Goto FOODLCCM
FOODLCCM	Does this include anything for	Goto LODGLCCM
	Food and beverages?	
	1. Yes	
LODGLCCM	Does this include anything for	Goto ENTRLCCM
	Lodging?	
	1. Yes	
ENTRLCCM	Does this include anything for	Goto ELSELCCM
	Entertainment?	
	1. Yes	
	ALCGROCX ANYADMIS LOCADMSX CHKFCOMB LOCCOMBX FOODLCCM	ALCGROCX What was the cost for alcoholic beverages, including taxes? ANYADMIS Did (you/you or any members of your household) spend anything on this stay for entertainment or admissions (not counting what the package deal covered/)? 1. Yes 2. No LOCADMSX How much did (you/you or any members of your household) pay? CHKFCOMB Are there combined expenses for food/beverages, lodging, transportation, or other things? 1. Yes 2. No LOCCOMBX Only those things the respondent could not provide individual expenses for should be combined and entered here. FOODLCCM Does this include anything forFood and beverages? 1. Yes 2. No LODGLCCM Does this include anything forLodging? 1. Yes 2. No Does this include anything forLodging?

	CAPI Variable Name	Question Text	Skip Instructions
		2. No	
.8F	ELSELCCM	Does this include any	Goto DIDYOU
		Other expenses?	
		1. Yes 2. No	
8F	DIDYOU	Did (you/you or any members of your household) have any other stays at local hotels or motels?	1: Goto NUMLOC, next row
			2,DK,RF: Exit block and goto S18F_END
		1. Yes 2. No	
.9A	S19A_INTRO	₩ 41-42	Goto MIS_ITEM
		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. Also, please include any shipping and handling charges with the	
		cost of any item that was shipped.	
		Description Assessment Month	
		Description Amount Month (MISCDESC) (MISCEXPX) (MISCMO)	
		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue	
.9A		(MISCDESC) (MISCEXPX) (MISCMO)	1-24: Goto MISCDESC
9A		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue	1-24: Goto MISCDESC 95: Goto MIS_ITEM - next line of grid
9A		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue Screen 1	
9A		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue Screen 1	95: Goto MIS_ITEM - next line of grid99: Goto S19A_END888: IF no more grid lines then goto S19A_END
9A		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue Screen 1	95: Goto MIS_ITEM - next line of grid99: Goto S19A_END
9A		(MISCDESC) (MISCEXPX) (MISCMO) 1. Enter 1 to Continue Screen 1 41 ? [F1] Since the first of (reference month), have (you/you or any members of your household) had expenses for any of the following, either for (you/your household) or for someone outside your household?	95: Goto MIS_ITEM - next line of grid99: Goto S19A_END888: IF no more grid lines then goto S19A_END

Section	CAPI Variable Name	Question Text	Skip Instructions
		Have (you/you or any members of your household) had expenses for	
		• Read each item on list.	
		Do not include pet food. It is a Diary-only item.	
		1. Fresh flowers or potted plants?	
		2. Professional photography?	
		3. Services of lawyers or other legal professionals?	
		4. Accounting fees?	
		5. Occupational expenses, such as union dues or professional licenses?	
		6. Gardening or lawn care services?	
		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 inside or outside of your home? 14. Toys or games?	
		15. Arts or crafts kits?	
		16. Sewing, knitting, or quilting materials and items?	
		17. Purchase of pets, pet supplies, or medicine for pets?	
		18. Pet services?	
		19. Veterinarian expenses for pets?	
		20. Catering?	
		21. Arrangement of live entertainment for special occasions?	
		22. Rental of party supplies?	
		23. Purchase or upkeep of cemetery lots or vaults?	
		24. Funerals, burials, or cremation?	
		95. Continue List	
		99. None/No more entries	
		888. Delete the line	
19A	MISCDESC	What was the expense for?	Goto MISCMO
		Description Amount Month	
101	14100140	(MISCDESC) (MISCEXPX) (MISCMO)	O-th MICCOSTO
19A	MISCMO	In what month did you have this expense?	Goto MISCGFTC
		(* Enter 13 for same amount each month of the reference period)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Description Amount Month	
		(MISCDESC) (MISCEXPX) (MISCMO)	
		1. January	
		2. February	
		3. March	
		4. April	
		5. May	
		6. June	
		7. July	
		8. August	
		9. September	
		10. October 11. November	
		12. December	
		13. ^S19 13Option	
19A	MISCGFTC	Was this expense for someone inside or outside your household?	Goto MISCEXPX
		Description Assessed Month	
		Description Amount Month (AUSCRESS) (AUSCRESS)	
		(MISCDESC) (MISCEXPX) (MISCMO)	
		1. For household	
		2. For someone outside your household	
19A	MISCEXPX	(What was the total amount of this expense?/What is your monthly expense?)	IF ITEM = 14-24 then goto S19ACM_S
		(* Do not include level foce veleted to year entate along anota veneward in Section 2.1.)	ELSE goto MISCMORE
		(* Do not include legal fees related to real estate closing costs reported in Section 3./)	
		Description Amount Month	
		(MISCDESC) (MISCEXPX) (MISCMO)	
19A	S19ACM_S	◆ Enter a 'C' for a combined expense.	C: Goto S19ACMB
			EMPTY: Goto MISCMORE
19A	S19ACMB	₩ 42 ? [F1]	Goto MISCMORE
		What other expense is the (description) combined with?	
		• Enter all that apply, separate with commas.	
		Description Amount Month	
		(MISCDESC) (MISCEXPX) (MISCMO)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		14. Toys or games 15. Arts or craft kits 16. Sewing, knitting, or quilting materials and items 17. Purchase of pets, pet supplies, or medicine for pets 18. Pet services 19. Veterinary expenses for pets 20. Catering 21. Arrangement of live entertainment for special occasions 22. Rental of party supplies 23. Purchase or upkeep of cemetery lots or vaults	
100	14100140DE	24. Funerals, burials, or cremations	15 70 14 10 11 15 70 14 14
19A	MISCMORE	Did you have any other expenses for (description)?	 IF ROW number = 43 then goto ERR_MAX ELSE goto ITEM, next line of grid
		Description Amount Month (MISCDESC) (MISCEXPX) (MISCMO)	2,DK,RF: IF ROW number = 43 then goto S19A_END ELSE goto MIS_ITEM, next line of grid
		1. Yes 2. No	_
19B	S19B_INTRO	Q 43	Goto CNT_ITEM
		Now I am going to ask about payments and contributions to persons outside of your household.	
		Description Month Amount (CONTDESC) (CONTMO) (CONTEXPX)	
		1. Enter 1 to Continue	
19B	CNT_ITEM	□ 43 ? [F1]	1-9: Goto CONTDESC
			95: Goto next row
		SCREEN 1	99: Goto S19B_END
		Since the first of (reference month), have (you/you or any members of your household) given any money by cash, checks, or given any gift cards to	888: IF no more grid lines then goto S19B_END ELSE goto CNT_ITEM - next line of grid
		Dead each item on list	

Consumer Expenditure Quarterly Interview Survey July 2016 Specifications CAPI Variable Name Question Text Section Since the first of (reference month), have (you/you or any members of your household) paid any of the following . . . Read each item on list Since the first of (reference month), have (you/you or any members of your household) given any money by cash, checks, money orders, or credit cards to benefit . . . Read each item on list Since the first of (reference month), have (you/you or any members of your household) given any . . . Read item on list 1. College students living away from home? 2. Any other people not in your household, such as friends, co-workers, or homeless persons? 3. Child support? 4. Alimony? 5. Educational institutions? 6. Political organizations? 7. Religious organizations, including churches, temples and mosques?

8. Charities or other organizations?

95. Continue list

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

9. Stocks, bonds, or mutual funds to persons or organizations outside of your household?

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Skip Instructions

Section	CAPI Variable Name	Question Text	Skip Instructions
19B	CONTDESC	What was the (payment/contribution) for?	Goto CONTMO
		Description Month Amount	
		(CONTDESC) (CONTMO) (CONTEXPX)	
19B	CONTMO	In what month did you make the (payment/contribution)?	Goto CONTEXPX
		• Enter 13 for same (payment/contribution) each month of the reference period.	
		Description Month Amount (CONTDESC) (CONTMO) (CONTEXPX)	
		1. January	
		2. February	
		3. March	
		4. April 5. May	
		6. June	
		7. July	
		8. August 9. September	
		10. October	
		11. November	
		12. December	
19B	CONTEXPX	13. Same amount each month. (What was the total amount of the (payment/contribution)./What is the monthly	Goto CONTMORE
100	CONTEXIX	(payment/contribution).)	COLO CONTINONE
		Description Month Amount	
19B	CONTMORE	(CONTDESC) (CONTMO) (CONTEXPX) Did you make any other (payment/contribution).	1: IF Row number = 43 then goto ERR_MAX
130	CONTINONE		ELSE goto CNT_ITEM, next line in grid
		Description Month Amount (CONTDESC) (CONTMO) (CONTEXPX)	2,DK,RF: IF Row number = 43 then goto S19B_END ELSE goto CNT_ITEM, next line in grid
		1. Yes	
20A	GROCWEKX	2. No 44	0,DK,RF: Goto OTHSTOR
20/1	SINOUVEIN		S,BA,IAI. COLO OTTIOTOR
		Now I am going to ask about expenses for food, beverages and other items (you/your household) (have/has) purchased since the first of (reference month).	1-9999: Goto OTHSTUFX

Section	CAPI Variable Name	Question Text	Skip Instructions
		What has been (you/your household) usual WEEKLY expense for grocery shopping?	
		Include grocery home delivery service fees and drinking water delivery fees.	
20A	OTHSTUFX	About how much of this amount was for nonfood items, such as paper products, detergents, home cleaning supplies, pet foods, and alcoholic beverages?	Goto OTHSTOR
20A	OTHSTOR	44	1: Goto OSTORWKX
		Other than your regular grocery shopping already reported, have (you/you or any members of your household) purchased any food or nonalcoholic beverages from places such as grocery stores, convenience stores, specialty stores, home delivery, or farmer's markets?	2,DK,RF: Goto DINE_WKX
		1. Yes 2. No	
20A	OSTORWKX	What was your usual WEEKLY expense at these places?	Goto DINE_WKX
20A	DINE_WKX	44	Goto CIGARETT
		What has been (you/your household) usual WEEKLY expense for meals or snacks from restaurants, fast food places, cafeterias, carryouts or other such places? (Do not include meals purchased at school./)	
20A	CIGARETT	4 4	1: Goto CIGARETX
		Since the first of (reference month), have (you/you or any members of your household) purchased cigarettes?	2,DK,RF: Goto OTHTOBAC
		1. Yes 2. No	
20A	CIGARETX	What is the usual WEEKLY expense for cigarettes?	Goto OTHTOBAC
20A	OTHTOBAC	🚇 44 ?[F1]	1: Goto OTHTBACX
		Have (you/you or any members of your household) purchased other tobacco products such as cigars, pipe tobacco, or chewing tobacco?	2,DK,RF: Goto ALC_HOMX
		1. Yes 2. No	
20A	OTHTBACX	44 ?[F1]	Goto ALC_HOMX
		What is the usual WEEKLY expense?	

Section	CAPI Variable Name	Question Text	Skip Instructions
20A	ALC_HOMX	What has been (you/your household) usual MONTHLY expense for alcohol, including beer and wine to be served at home?	Goto ALC_OUTX
20A	ALC_OUTX	What has been your usual MONTHLY expense for alcohol, including beer and wine at restaurants, bars and recreational events?	IF any "active" CU member has AGE It 22 then goto ANYMEALS
20A	ANYMEALS	44	ELSE goto S20A_END 1: Goto FBPERSN
		Since the first of (reference month), not including (current month), have (you/you or any members of your household) purchased any meals at school for preschool through high school age children?	2,DK,RF: Goto 20A_END
		1. Yes 2. No	
20A	FBPERSON	What are the names of all household members who purchased meals at school?	1-30: Goto TbISCHMEAL
		• Enter line numbers for all that apply, separate with commas.	DK,RF: Goto 20A_END
		1. Person 1	
		2. Person 2	
		3. Person 3	
		4. Person 4	
		5. Person 5	
		6. Person 6 7. Person 7	
		7. Person 7 8. Person 8	
		9. Person 9	
		10. Person 10	
		11. Person 11	
		12. Person 12	
		13. Person 13	
		14. Person 14	
		15. Person 15	
		16. Person 16	
		17. Person 17 18. Person 18	
		19. Person 19	
		20. Person 20	
		21. Person 21	
		22. Person 22	

Section	CAPI Variable Name	Question Text	Skip Instructions
		23. Person 23	
		24. Person 24 25. Person 25	
		26. Person 26	
		27. Person 27	
		28. Person 28	
		29. Person 29	
		30. Person 30	0
20A	SCHLMLX	Since the first of (reference month), not including (current month), what has been the usual expense for the meals ^NAME purchased at school?	Goto SCHMLPD
		◆ Select time period on the next screen.	
20A	SCHLMLPD	◆ Specify time period	1: Goto SCHMLWKQ
		1. Day	2: Goto SCHMLWKQ
		2. Week	3: Goto SCHMLWKQ
		3. Two Weeks 4. Month	3. Goto Scrimewing
		5. Other, specify	4: Goto SCHMLWKQ
			5: Goto SCHLMLSP
			DK,RF: Goto SCHMLWKQ
20A	SCHLMSP	• Specify:	Goto SCHMLWKQ
20A	SCHMLWKQ	How many WEEKS did ^NAME purchase meals?	IF no more persons then goto S20_END
20B	LNDROMAT	□ 44 ? [F1]	ELSE goto SCHLMLX for next person 1: Goto LNDRYX
200	LNDROWAT		1. GOLO ENDRIA
		Since the first of (reference month), not including (current month) have (you/you or any members of your household) had any expenses for self-service laundry machines?	2,DK,RF: Goto DRYCLEAN
		1. Yes	
		2. No	
20B	LNDRYX	□ 44 ? [F1]	Goto OTHLNDRY
		What was the total cost?	
20B	OTHLNDRY	44 ? [F1]	1: Goto OTHLNDRX

Section	CAPI Variable Name	Question Text	Skip Instructions
		Was any of this amount for items other than clothes, such as linens or drapes?	2,DK,RF: Goto DRYCLEAN
		1. Yes	
20B	OTHLNDRX	2. No 44 ? [F1]	Goto DRYCLEAN
200	OTTENDIX		Coto Bitti CEE, iii
	DDVQLEAN	How much?	4 DEVOLVIV
20B	DRYCLEAN	□ 44 ? [F1]	1: Goto DRYCLNX
		Have (you/you or any members of your household) had any expenses for dry cleaning or laundry service?	2,DK,RF: Goto SALONS
		1. Yes 2. No	
20B	DRYCLNX	□ 44 ? [F1]	Goto OTHDRCLN
		What was the total past?	
20B	OTHDRCLN	What was the total cost? 44 ? [F1]	1: Goto OTHDCLNX
		Was any of this amount for items other than clothes, such as linens, drapes, or rugs?	2,DK,RF: Goto SALONS
		1. Yes	
20B	OTHDCLNX	2. No 44 ? [F1]	Goto SALONS
202	3111B 32117		30.0 3.123.13
200	CALONC	How much?	1. Coto CALONIV
20B	SALONS	□ 44 ? [F1]	1: Goto SALONX
		Since the first of (reference month), not including (current month) have (you/you or any members of your household) had any expenses for haircutting, styling, attached hair	2,DK,RF: Goto WIGS
		pieces, manicures, massages or other salon services?	
		1. Yes	
20B	SALONX	2. No	Goto WIGS
200	3/12011/1		20.0 1.100

Section	CAPI Variable Name	Question Text	Skip Instructions
		What was the total expense for these services since the first of (reference month), not including (current month)?	
20B	WIGS	🔐 44 ? [F1]	1: Goto WIGSX
		Since the first of (reference month), not including (current month) have (you/you or any members of your household) had any expenses for removable hairpieces, wigs or toupees?	2,DK,RF: Goto SAFEDPST
		1. Yes 2. No	
20B	WIGSX	₽ 44 ? [F1]	Goto SAFEDPST
		What was the total expense for these items since the first of (reference month), not including (current month)?	
20B	SAFEDPST	Q 44	1: Goto SAFDPSTX
		Have (you/you or any members of your household) had any expenses for the rental of a safe deposit box located in a bank or similar financial institution?	2,DK,RF: Goto BANKSRVC
		1. Yes 2. No	
20B	SAFDPSTX	What was the total rental expense for the safe deposit box since the first of (reference month), not including (current month)?	Goto BANKSRVC
20B	BANKSRVC	🚇 44	1: Goto BANKMOX
		Have (you/you or any members of your household) paid any charges or fees for bank services such as ATM or overdraft fees or account service charges from a bank or similar financial institution?	2,DK,RF: Goto TXLIMSRV
		1. Yes 2. No	
20B	BANKMOX	□ 44 ? [F1]	Goto TXLIMSRV
		What is the usual MONTHLY charge?	
20B	TXLIMSRV	🚇 44 ? [F1]	1: Goto TXLIMX

Section	CAPI Variable Name	Question Text	Skip Instructions
		Since the first of (reference month) not including (current month), have (you/you or any members of your household) had expenses for taxis or limousine service? Do not include expenses entirely reimbursed for business purposes or expenses incurred on a trip.	2,DK,RF: Goto MASSTRAN
		1. Yes 2. No	
20B	TXLIMX	🚇 44 ? [F1]	Goto MASSTRAN
		What was the total expense?	
20B	MASSTRAN	🚇 44 ? [F1]	1: Goto TRANWRKX
		Do (you/you or any members of your household) use mass transportation services such as a bus, subway, mini-bus or train? Include all commuter services. Do not include expenses covered by employer-provided transit subsidies.	2,DK,RF: Goto S20B_END
		◆ Include commuter rail, light rail, and trolleys as mass transit	
		1. Yes 2. No	
20B	TRANWRKX	□44 ?[F1]	1-9999: Goto TRANSUB
		What is the usual MONTHLY cost to use mass transit to go to -	0,DK,RF: Goto TRANSCHX
		Work?	
20B	TRANSUB	Did you receive a transit subsidy?	1: Goto TRANSUBX
		1. Yes 2. No	2,DK,RF: Goto TRANSCHX
20B	TRANSUBX	What is the usual monthly amount?	Goto TRANSCHX
20B	TRANSCHX	What is the usual MONTHLY cost to use mass transit to go to -	Goto TRANOTHX
		School?	
20B	TRANOTHX	What is the usual MONTHLY cost to use mass transit to go to -	Goto S20B_END
		Other places?	
21A	ANYWORK	Since the first of (reference month), did (You/NAME) earn any income from wages or	1: Goto 21A_INTRO
		salary?	2,DK,RF: Goto S21A_CHECK

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes 2. No	
21A	S21A_INTRO	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.	Goto INCWEEKQ
04.4	INION/EEL/O	1. Enter 1 to Continue	
21A	INCWEEKQ	(Now I am going to ask about (Your/Name's) work experience and income/)	0: Goto INCNONWK
		In the past 12 months, including paid vacation and sick leave, how many weeks did (You/NAME) work?	1-52,DK,RF: Goto INC_HRSQ
		◆ If household member did not work, enter zero.	
21A	INC_HRSQ	In the weeks that (You/NAME) worked, how many hours did (you/he/she) usually work per week?	Goto OCCUCODE
21A	OCCUCODE	🚇 45 ? [F1]	Goto INCOMEY
		Which of the following categories best describes the job in which (You/NAME) received the most earnings during the past 12 months?	
21.0	INCOMEY	 Administrator, manager Teacher Professional Administrative support, including clerical Sales, retail Sales, business goods and services Technician Protective service Private household service Other service Machine or transportation operator, laborer Construction workers, mechanics Farming Forestry, fishing, groundskeeping Armed Forces 	Coto SALADVST
21A	INCOMEY	(Were/Was) (You/NAME):	Goto SALARYST
		 An employee of a PRIVATE company, business, or individual working for wages or salary? A Federal government employee? 	

Section	CAPI Variable Name	Question Text	Skip Instructions
		A State government employee? A local government employee?	
		5. Self-employed ^YourHisHer OWN business, partnership, professional practice, or farm?	
		6. Working WITHOUT PAY in a family business or farm?	
21A	INCNONWK	What was the main reason (You/NAME) did not work during the past 12 months?	Goto SALARYST
		(Were/Was) (you/he/she) -	
		1. Retired?	
		2. Taking care of home/family?	
		3. Going to school?	
		4. III, disabled, unable to work? 5. Unable to find work?	
		6. Doing something else?	
21A	SALARYST	? [F1]	1: Goto SALARYX
		The next few questions are about income DURING THE PAST 12 MONTHS, that is from (Date - one year ago) to (Yesterdays date)	2,DK,RF: Goto SEMPFRM
		Did (You/NAME) receive any wages, salary, tips, bonuses, or commissions?	
		1. Yes 2. No	
21A	SALARYX	? [F1]	1-99999999: Goto GROSPAYX
		How much did (You/NAME) receive before taxes?	DK,RF: Goto SALARYB
21A	SALARYB	₩ 46 ? [F1]	Goto GROSPAYX
		Could you tell me which range on CARD A best reflects (your/NAME's) total wages and salaries for ALL JOBS during the PAST 12 MONTHS?	
		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	
		o. 400,000-403,333	

Section	CAPI Variable Name	Question Text	Skip Instructions
		9. \$70,000-\$89,999	
		10. \$90,000-\$119,999 11. \$120,000 and over	
21A	GROSPAYX	What was the amount of (your/NAME's) last pay before any deductions?	Goto PAYPERD
21A	PAYPERD	What period of time did this cover?	1: Goto PAYSTUB
		1. One week	2: Goto PAYSTUB
		2. Two weeks 3. Month	3: Goto PAYSTUB
		4. Quarter 5. Year	4: Goto PAYSTUB
		6. Twice a month 7. Other	5: Goto PAYSTUB
			6: Goto PAYSTUB
			7: Goto PAYPRDOT
			DK,RF: Goto PAYSTUB
21A	PAYPRDOT	◆ Specify:	Goto PAYSTUB
21A	PAYSTUB	Does the respondent have a paper or electronic pay check record present for (his / her / his/her) last paycheck?	Goto PRIVPENS
		1. Yes 2. No	
21A	PRIVPENS	Was there any money deducted from (your/NAME's) pay for -	1: Goto PRIVPENX
		Private pension fund?	2,DK,RF: Goto GOVRET
		1. Yes 2. No	
21A	PRIVPENX	How much?	1-99999999: ELSE goto GOVRET
			DK,RF: Goto GOVRET
21A	GOVRET	Was there any money deducted from (your/NAME's) pay for -	1: Goto GOVRETX
		Government retirement?	2,DK,RF: Goto RRRDED
		1. Yes	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. No	
21A	GOVRETX	How much?	Goto RRRDED
21A	RRRDED	Was there any money deducted from (your/NAME's) pay for -	1: Goto RRRDEDX
		Railroad retirement?	2,DK,RF: Goto SSDED
		1. Yes 2. No	
21A	RRRDEDX	How much?	Goto SSDED
21A	SSDED	Was there any money deducted from (your/NAME's) pay for -	1: Goto MEDICOV
		Social Security including Medicare?	2,DK,RF: Goto SSNORM
		1. Yes 2. No	
21A	SSNORM	Are Social Security payments NORMALLY deducted from (your/NAME's) pay?	1: Goto MEDICOV
		1. Yes 2. No	2,DK,RF: Goto EMPLCONT
21A	MEDICOV	Does the money deducted for Social Security cover only the Medicare portion of Social Security?	Goto EMPLCONT
		1. Yes 2. No	
21A	EMPLCONT	Other than Social Security, did any employer or union contribute to (your/NAME's) pension or retirement plan in the past 12 months?	Goto SEMPFRM
		1. Yes 2. No	
21A	SEMPFRM	? [F1]	1: Goto SEMPFRMX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto SOCSRRET
		Did (You/NAME) receive any self-employment income or have a loss?	
		(Report income from own businesses (farm or non-farm) including proprietorships and partnerships)	
		1. Yes 2. No	

Section	CAPI Variable Name	Question Text	Skip Instructions
21A	SEMPFRMX	? [F1]	-99999999-9999999999999999999999999999
		What was the amount?	DK,RF: Goto SEMPFRMB
		(Report net income after operating expenses. Include earning as a tenant farmer or sharecropper.)	
		If net income was a loss, precede amount with a '-' Breakeven = 1	
21A	SEMPFRMB	₩ 46 ?[F1]	Goto SOCSRRET
		Could you tell me which range on CARD A best reflects (your/NAME's) income or loss from self-employment during the PAST 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	
21A	SOCSRRET	? [F1]	1: Goto RRRETIRX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto SUPPLINC
		Did (You/NAME) receive any Social Security or Railroad Retirement benefits?	
		1. Yes 2. No	
21A	RRRETIRX	? [F1]	1-99999999: Goto INCMEDCR
		What was the amount of the last Social Security or Railroad Retirement payment received?	DK,RF: Goto RRRETIRB
21A	RRRETIRB	🚇 47 ? [F1]	Goto INCMEDCR

Section	CAPI Variable Name	Question Text	Skip Instructions
		Could you tell me which range on CARD B best reflects the amount of (your/NAME's) last Social Security or Railroad Retirement payment during the PAST 12 MONTHS?	
		1. Less than \$500 2. \$500-\$699 3. \$700-\$999 4. \$1,000-\$1,299 5. \$1,300-\$1,699 6. \$1,700 and over	
21A	INCMEDCR	Is this amount AFTER the deduction for a Medicare premium?	Goto SS_RRQ
		1. Yes 2. No	
21A	SS_RRQ	During the past 12 months, how many Social Security or Railroad Retirement payments did (You/NAME) receive?	Goto SUPPLINC
21A	SUPPLINC	? [F1]	1: Goto SSIX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto INDRETAC
		Did (You/NAME) receive any -	
		Supplemental Security Income (SSI) payments?	
		1. Yes 2. No	
21A	SSIX	? [F1]	1-99999999: Goto INDRETAC
		What was the amount?	DK,RF: Goto SSIB
21A	SSIB		Goto INDRETAC
		Could you tell me which range on CARD C best reflects the amount (You/NAME) received in Supplemental Security income during the past 12 months?	
		1. \$0-\$999 2. \$1,000-\$1,999 3. \$2,000-\$2,999	

Section	CAPI Variable Name	Question Text	Skip Instructions
		4. \$3,000-\$3,999	
		5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
01.4	NIDDET (O	12. \$50,000 and over	1 0 1 NDDETY
21A	INDRETAC	DURING THE PAST 12 MONTHS -	1: Goto INDRETX
		Did (You/NAME) place any money in a retirement plan such as an Individual Retirement Account (IRA) or Keogh? Do not include rollovers.	2,DK,RF: Goto S21A_CHECK
		1. Yes	
		2. No	
21A	INDRETX	How much?	Goto S21A_CHECK
21B	INTERDIV	? [F1]	1: Goto INTRDVX
		fill for INTERDIV	2,DK,RF: Goto NETRENT
		DURING THE PAST 12 MONTHS -	
		Did (you/you or any members of your household) receive any interest or dividends? Report even small amounts credited to an account.	
		1. Yes 2. No	
21B	INTRDVX	? [F1]	1-99999999: Goto NETRENT
		What was the amount?	DK,RF: Goto INTRDVB
21B	INTRDVB	₩ 48 ?[F1]	Goto NETRENT
		Could you tell me which range on CARD C best reflects the amount (you/you or any members of your household) received in interest or dividends during the PAST 12 MONTHS?	
		1. \$0-\$999	

Section	CAPI Variable Name	Question Text	Skip Instructions
		2. \$1,000-\$1,999	
		3. \$2,000-\$2,999	
		4. \$3,000-\$3,999	
		5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999 8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
		12. \$50,000 and over	
21B	NETRENT	? [F1]	1: Goto NETRENTX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto ROYEST
		Did (you/you or any members of your household) receive any net rental income or loss?	
		 Net rental income is the total amount after expenses. 	
		1. Yes	
04.5	NETDENTY	2. No	000000000 000000000 Onto DOVEOT
21B	NETRENTX	? [F1]	-99999999-9999999999999999999999999999
		What was the amount?	DK,RF: Goto NETRENTB
		◆ The net amount is the total amount after expenses.	
		If income was a loss, precede amount with a '-'. Breakeven = 1.	
21B	NETRENTB	🚇 48 ?[F1]	Goto ROYEST
		Could you tell me which range on CARD C best reflects the total net rental income or loss during the PAST 12 MONTHS?	
		0. Loss 1. \$0-\$999 2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999 5. \$4,000-\$4,999 6. \$5,000-\$9,999	

Section	CAPI Variable Name	Question Text	Skip Instructions
		7. \$10,000-\$14,999	
		8. \$15,999-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
		12. \$50,000 and over	
21B	ROYEST	? [F1]	1: Goto ROYESTX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto RETSURV
		Did (you/you or any members of your household) receive any royalty income or income from estates and trusts?	
		1. Yes	
		2. No	
21B	ROYESTX	? [F1]	1-99999999: Goto RETSURV
		What was the amount?	DK,RF: Goto ROYESTB
21B	ROYESTB	🚇 48 ?[F1]	Goto RETSURV
		Could you tell me which range on CARD C best reflects the total amount received in royalty income or income from estates and trusts during the PAST 12 MONTHS?	
		1. \$0-\$999	
		2. \$1,000-\$1,999	
		3. \$2,000-\$2,999	
		4. \$3,000-\$3,999	
		5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
		12. \$50,000 and over	
21B	RETSURV	? [F1]	1: Goto RETSURVX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto OTHREG
		Did (you/you or any members of your household) receive any retirement, survivor, or disability pensions?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. Yes	
		2. No	
21B	RETSURVX	? [F1]	1-99999999: Goto OTHREG
		What was the amount?	DK,RF: Goto RETSURVB
		(Do not include Social Security.)	
21B	RETSURVB	■ 48 ? [F1]	Goto OTHREG
		Could you tell me which range on CARD C best reflects the total amount received in retirement, survivor, or disability pensions during the PAST 12 MONTHS?	
		1. \$0-\$999	
		2. \$1,000-\$1,999	
		3. \$2,000-\$2,999	
		4. \$3,000-\$3,999 5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999 12. \$50,000 and over	
21B	OTHREG	? [F1]	1: Goto OTHREGX
			2 DIV DEL COMO LUMDOUM
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto LUMPSUM
		Did (you/you or any members of your household) receive income on a REGULAR basis from any other source such as Veteran's Administration (VA) payments, unemployment compensation, child support, or alimony?	
		1. Yes	
		2. No	
21B	OTHREGX	? [F1]	1-99999999: Goto LUMPSUM
		What was the amount from all sources?	DK,RF: Goto OTHREGB
		(Do not include lump sum payments such as money from an inheritance or sale of a home.)	
21B	OTHREGB	🚇 48 ? [F1]	Goto LUMPSUM

Section	CAPI Variable Name	Question Text	Skip Instructions
		Could you tell me which range on CARD C best reflects the total amount received in Veteran's Administration (VA) payments, unemployment compensation, child support, or alimony during the PAST 12 MONTHS?	
		1. \$0-\$999	
		2. \$1,000-\$1,999 3. \$2,000-\$2,999	
		4. \$3,000-\$3,999	
		5. \$4,000-\$4,999 6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999 9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999 12. \$50,000 and over	
21B	LUMPSUM	? [F1]	1: Goto LUMPSUMX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto OTHERINC
		Did (you/you or any members of your household) receive any lump sum payments from insurance, estates, trusts, royalties, child support, alimony, prizes or games of chance, or from persons outside your household?	
		1. Yes 2. No	
21B	LUMPSUMX	? [F1]	1-99999999: Goto OTHERINC
		What was the total amount received (by all household members/)?	DK,RF: Goto LUMPSUMB
21B	LUMPSUMB	🚇 48 ? [F1]	Goto OTHERINC
		Could you tell me which range on CARD C best reflects the total lump sum payments during the PAST 12 MONTHS?	
		1. \$0-\$999 2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999	

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
		12. \$50,000 and over	
21B	OTHERINC	? [F1]	1: Goto OTHRINCX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto EITC
		Did (you/you or any members of your household) receive any other money income, including money received from cash scholarship and fellowships, stipends not based on working, or from the care of foster children, not already reported?	
		1. Yes 2. No	
21B	OTHRINCX	? [F1]	1-99999999: Goto EITC
		What was the total amount received (by all household members/)?	DK,RF: Goto OTHRINCB
21B	OTHRINCB	₽ 48 ?[F1]	Goto EITC
		Could you tell me which range on CARD C best reflects the total amount of other money income received during the PAST 12 MONTHS?	
		1. \$0-\$999	
		2. \$1,000-\$1,999	
		3. \$2,000-\$2,999	
		4. \$3,000-\$3,999	
		5. \$4,000-\$4,999	
		6. \$5,000-\$9,999	
		7. \$10,000-\$14,999	
		8. \$15,000-\$19,999	
		9. \$20,000-\$29,999	
		10. \$30,000-\$39,999	
		11. \$40,000-\$49,999	
		12. \$50,000 and over	
21B	EITC	? [F1]	Goto MISCTAX

Section	CAPI Variable Name	Question Text	Skip Instructions
		The Earned Income Tax Credit is a benefit for certain people who work and have low to moderate wages. A tax credit means more money in your pocket. It reduces the amount of tax you owe and may also give you a refund.	
		During the past 12 months, did (you/you or any members of your household) claim an Earned Income Tax Credit on your federal income tax return?	
		1. Yes 2. No	
21B	MISCTAX	DURING THE PAST 12 MONTHS -	1: Goto MISCTAXX
		Did (you/you or any members of your household) PAY any inheritance or estate tax?	2,DK,RF: Goto FOODSMP
		1. Yes 2. No	
21B	MISCTAXX	What was the total amount PAID (by all household members/)?	Goto FOODSMP
21B	FOODSMP	DURING THE PAST 12 MONTHS -	1: Goto FS_MTHI
		Did anyone in this household receive Food Stamps or a Food Stamp benefit card? Include government benefits from the Supplemental Nutritional Assistance Program (SNAP). Do NOT include WIC or the National School Lunch Program.	2,DK,RF: Goto WELFARE
		1. Yes 2. No	
21B	FS_MTHI	In how many of the past 12 months were food stamps or EBTs received?	Goto FS_AMT
21B	FS_AMT	What was the dollar value of the last food stamps or EBT received?	Goto WELFARE
21B	WELFARE	? [F1]	1: Goto WELFAREX
		DURING THE PAST 12 MONTHS -	2,DK,RF: Goto MEALSPAY
		Did (you/you or any members of this household, including children,) receive any welfare payments or cash assistance from the state or local welfare office?	
		Please include even if only for one month. Do NOT include benefits from food, energy, or rental assistance programs.	

2. No	Section	CAPI Variable Name	Question Text	Skip Instructions
## What was the amount for the PAST 12 MONTHS? DK,RF: Goto WELFAREB Goto MEALSPAY			2. No	
Could you tell me which range on CARD C best reflects the total amount of income from cash assistance from state or local government welfare programs during the PAST 12	21B	WELFAREX	? [F1]	1-99999999: Goto MEALSPAY
Could you tell me which range on CARD C best reflects the total amount of income from cash assistance from state or local government welfare programs during the PAST 12 MONTHS? 1. \$0-\$999 2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999 5. \$4,000-\$4,999 6. \$5,000-\$9,999 7. \$10,000-\$14,999 8. \$15,000-\$19,999 9. \$20,000-\$29,999 10. \$30,000-\$39,999 11. \$40,000-\$49,999 12. \$50,000 and over 21B MEALSPAY DURING THE PAST 12 MONTHS - 1: Goto MLPAYWKX Have (youlyou or any members of your household) received any free meals at work as part 2,DK,RF: Goto S21B_END			What was the amount for the PAST 12 MONTHS?	DK,RF: Goto WELFAREB
Cash assistance from state or local government welfare programs during the PAST 12 MONTHS? 1. \$0-\$999 2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999 5. \$4,000-\$4,999 6. \$5,000-\$9,999 7. \$10,000-\$14,999 8. \$15,000-\$14,999 9. \$20,000-\$29,999 10. \$30,000-\$29,999 11. \$40,000-\$49,999 12. \$50,000 and over 21B MEALSPAY DURING THE PAST 12 MONTHS - 1: Goto MLPAYWKX Have (youlyou or any members of your household) received any free meals at work as part 2,DK,RF: Goto S21B_END	21B	WELFAREB	₩ 48 ? [F1]	Goto MEALSPAY
2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999 5. \$4,000-\$4,999 6. \$5,000-\$9,999 7. \$10,000-\$14,999 8. \$15,000-\$19,999 9. \$20,000-\$29,999 10. \$30,000-\$39,999 11. \$40,000-\$49,999 12. \$50,000 and over 21B MEALSPAY DURING THE PAST 12 MONTHS - Have (you/you or any members of your household) received any free meals at work as part 2,DK,RF: Goto S21B_END			cash assistance from state or local government welfare programs during the PAST 12	
21B MEALSPAY DURING THE PAST 12 MONTHS - 1: Goto MLPAYWKX Have (you/you or any members of your household) received any free meals at work as part 2,DK,RF: Goto S21B_END			2. \$1,000-\$1,999 3. \$2,000-\$2,999 4. \$3,000-\$3,999 5. \$4,000-\$4,999 6. \$5,000-\$9,999 7. \$10,000-\$14,999 8. \$15,000-\$19,999 9. \$20,000-\$29,999 10. \$30,000-\$39,999 11. \$40,000-\$49,999	
	21B	MEALSPAY	,	1: Goto MLPAYWKX
				2,DK,RF: Goto S21B_END
1. Yes 2. No				
21B MLPAYWKX About what was the WEEKLY dollar value of these meals? Goto MLPYQWKS	21B	MLPAYWKX	About what was the WEEKLY dollar value of these meals?	Goto MLPYQWKS
21B MLPYQWKS How many weeks did (you/you or any members of your household) receive such meals Goto S21B_END during the past 12 months?	21B	MLPYQWKS	How many weeks did (you/you or any members of your household) receive such meals during the past 12 months?	Goto S21B_END
22 LIAINTRO The next few questions are about financial assets, credit, and loans. We know people aren't used to discussing their debt and financial assets, but we use this information to get a picture of how spending relates to changes in debt and savings. Be assured that, like all other information you have provided, these answers will be kept strictly confidential.	22	LIAINTRO	aren't used to discussing their debt and financial assets, but we use this information to get a picture of how spending relates to changes in debt and savings. Be assured that, like all	Goto IRAX
1. Enter 1 to Continue			1. Enter 1 to Continue	
22 IRAX ? [F1] 0-999999999999999999999999999999999999	22	IRAX	? [F1]	0-999999999999999999999999999999999999

Section	CAPI Variable Name	Question Text	Skip Instructions
		As of TODAY	DK,RF: Goto IRAB
		What is the total value of all retirement accounts such as 401(k)s, IRAs, Thrift Savings Plans that (you/your household) (own/owns)?	
		♦ If no retirement accounts, enter 0	
22	IRAB	₩ 49 ? [F1]	1-6: Goto IRAYRX
		Could you tell me which range on CARD D best reflects the total value of all retirement accounts such as 401(k)s, IRAs, and Thrift Savings Plans?	DK,RF: Goto DEFBENRP
		1. \$0-\$1,999 2. \$2,000-\$9,999 3. \$10,000-\$49,999	
		4. \$50,000-\$199,999 5. \$200,000-\$449,999	
22	IRAYRX	6. \$450,000 and over ? [F1]	0-999999999999999999999999999999999999
		What was the total value of all retirement accounts ONE YEAR AGO TODAY?	DK,RF: Goto IRAYRB
22	IRAYRB	□ 49 ? [F1]	Goto DEFBENRP
		Could you tell me which range on CARD D best reflects the total value of all retirement accounts ONE YEAR AGO TODAY?	
		1. \$0-\$1,999 2. \$2,000-\$9,999	
		3. \$10,000-\$49,999 4. \$50,000-\$199,999 5. \$200,000-\$449,999	
		6. \$450,000 and over	
22	DEFBENRP	? [F1]	Goto STOCK
		Do (you/you or any members of your household) have a defined benefit retirement plan, such as a pension from an employer?	
		1. Yes 2. No	
22	STOCK	? [F1]	1: Goto STOCKX

Section	CAPI Variable Name	Question Text	Skip Instructions
		Do (you/you or any members of your household) have any directly-held stocks, bonds, or mutual funds (Not in Retirement accounts/)?	2,DK,RF: Goto LIQUIDX
		◆ Include U.S. savings bonds	
		1. Yes 2. No	
22	STOCKX	? [F1]	1-999999999999999999999999999999999999
		As of TODAY	DK,RF: Goto STOCKB
		What is the total value of all directly-held stocks, bonds, and mutual funds (Not in Retirement accounts/) that (you/your household) (own/owns)?	
		◆ Include US savings bonds	
22	STOCKB	₩ 49 ? [F1]	1-6: Goto STOCKYRX
		Could you tell me which range on CARD D best reflects the total value of all directly-held stocks, bonds, and mutual funds (Not in Retirement accounts/)?	DK,RF: Goto LIQUIDX
		◆ Include US savings bonds	
		1. \$0-\$1,999	
		2. \$2,000-\$9,999	
		3. \$10,000-\$49,999 4. \$50,000-\$199,999	
		5. \$200,000-\$149,999	
		6. \$450,000 and over	
22	STOCKYRX	? [F1]	0-999999999999999999999999999999999999
		What was the total value of all directly-held stocks, bonds, and mutual funds (Not in Retirement accounts/) ONE YEAR AGO TODAY?	DK,RF: Goto STOCKYRB
		◆ Include US savings bonds	
22	STOCKYRB	□ 49 ? [F1]	Goto LIQUIDX
		Could you tell me which range on CARD D best reflects the total value of all directly-held	

Section	CAPI Variable Name	Question Text	Skip Instructions
		• Include US savings bonds	
		1. \$0-\$1,999	
		2. \$2,000-\$9,999	
		3. \$10,000-\$49,999	
		4. \$50,000-\$199,999	
		5. \$200,000-\$449,999	
		6. \$450,000 and over	
22	LIQUIDX	? [F1]	0-999999999999999999999999999999999999
		As of TODAY	DK, RF: Goto LIQUIDB
		What is the total value of all checking, savings, money market accounts, and certificates of deposit or CDs (you/your household) (have/has)?	
22	LIQUIDB	🚇 50 ? [F1]	1-6: Goto LIQUDYRX
		Could you tell me which range on CARD E best reflects the total value of checking, savings, money market accounts, and certificates of deposit or CDs?	DK, RF: Goto WHOLIF
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999	
		6. \$35,000 and over	
22	LIQUDYRX	? [F1]	0-999999999999999999999999999999999999
		What was the total value of all checking, savings, money market accounts, and certificates of deposit or CDs ONE YEAR AGO TODAY?	DK, RF: Goto LIQUDYRB
22	LIQUDYRB	□ 50 ? [F1]	Goto WHOLIF
		Could you tell me which range on CARD E best reflects the total value of all checking, savings, money market accounts, and certificates of deposit or CDs ONE YEAR AGO TODAY?	
		1. \$0-\$499 2. \$500-\$999 3. \$1,000-\$2,499 4. \$2,500-\$9,999 5. \$10,000-\$34,999	
		3. 7- 3,333 73 1,000	Daga 204 of

Section	CAPI Variable Name	Question Text	Skip Instructions
	-	6. \$35,000 and over	
22	WHOLIF	? [F1]	1: Goto WHOLIFX
		(Do/Does) (you/your household) own any whole life insurance or other life insurance policies that can be surrendered for cash or borrowed against prior to the death of the person insured?	2,DK,RF: Goto OTHAST
		 Also include universal life and variable life insurance Do NOT include term life insurance or other policies that only have a benefit upon death or disability 	
		1. Yes 2. No	
22	WHOLIFX	? [F1]	1-999999999999999999999999999999999999
		As of TODAY	DK,RF: Goto WHOLIFB
		What is the total surrender value of these policies?	
		◆ Surrender value is also known as the cash value	
		 Enter the amount that can be borrowed or withdrawn prior to death, NOT the benefit upon death of the insured 	
22	WHOLIFB	🚇 50 ? [F1]	1-6: Goto WHLFYRX
		Could you tell me which range on CARD E best reflects the total surrender value of these policies?	DK,RF: Goto OTHAST
		 Surrender value is also known as the cash value Enter the amount that can be borrowed or withdrawn prior to death, NOT the benefit upon death of the insured 	
		1. \$0-\$499 2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999 6. \$35,000 and over	
22	WHLFYRX	? [F1]	0-999999999999999999999999999999999999
		What was the total surrender value of these policies ONE YEAR AGO TODAY?	DK,RF: Goto WHLFYRB

◆ Surrender value is also known as the cash value

Section	CAPI Variable Name	Question Text	Skip Instructions
		 Enter the amount that can be borrowed or withdrawn prior to death, NOT the benefit upon death of the insured 	
22	WHLFYRB	□ 50 ? [F1]	Goto OTHAST
		Could you tell me which range on CARD E best reflects the total surrender value of these policies ONE YEAR AGO TODAY?	
		 Surrender value is also known as the cash value Enter the amount that can be borrowed or withdrawn prior to death, NOT the benefit upon death of the insured 	
		1. \$0-\$499 2. \$500-\$999 3. \$1,000-\$2,499	
		4. \$2,500-\$9,999 5. \$10,000-\$34,999	
22	OTHAST	6. \$35,000 and over (Do/Does) (you/your household) have any other financial assets, such as annuities, trusts, and royalties?	1: Goto OTHASTX
			2,DK,RF: Goto CREDIT
		1. Yes	
	071110711	2. No	
22	OTHASTX	As of TODAY	1-999999999999999999999999999999999999
		What is the total value of these other financial assets?	DK, RF: Goto OTHASTB
22	OTHASTB	4 9	1-6: Goto OTHSTYRX
		Could you tell me which range on CARD D best reflects the total value of these other financial assets?	DK, RF: Goto CREDIT
		1. \$0-\$1,999 2. \$2,000-\$9,999 3. \$10,000-\$49,999 4. \$50,000-\$199,999 5. \$200,000-\$449,999 6. \$450,000 and over	
22	OTHSTYRX	What was the total value of these other financial assets ONES YEAR AGO TODAY?	0-999999999999999999999999999999999999
			DK,RF: Goto OTHSTYRB
22	OTHSTYRB	□ 49	Goto CREDIT

Section	CAPI Variable Name	Question Text	Skip Instructions
		Could you tell me which range on CARD D best reflects the total value of these other	
		financial assets ONE YEAR AGO TODAY?	
		1. \$0-\$1,999	
		2. \$2,000-\$9,999	
		3. \$10,000-\$49,999 4. \$50,000-\$199,999	
		4. \$50,000-\$199,999 5. \$200,000-\$449,999	
		6. \$450,000 and over	
22	CREDIT	? [F1]	1: Goto CREDITX
		As of TODAY	2,DK,RF: Goto STUDNT
		(Do/Does) (you/your household) have a balance on any major credit cards including store cards and gas cards?	
		1. Yes	
22	CREDITX	2. No ? [F1]	1-999999999999999999999999999999999999
22	CKLDITA	; [FI]	1-999999999999999999999999999999999999
		What is the total amount owed on all cards?	DK, RF: Goto CREDITB
22	CREDITB	□ 50 ? [F1]	1-6: Goto CREDTYRX
		Could you tell me which range on CARD E best reflects the total amount owed on all major	DK,RF: Goto CREDFINX
		credit cards including store cards and gas cards?	
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999 6. \$35,000 and over	
22	CREDTYRX	? [F1]	0-999999999999999999999999999999999999
		What was the total amount owed on all cards ONE YEAR AGO TODAY?	DK, RF: Goto CREDYRB
22	CREDYRB	□ 50 ? [F1]	Goto CREDFINX
		Could you tell me which range on CARD E best reflects the total amount owed on all major credit cards including store cards and gas cards ONE YEAR AGO TODAY?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999	
	ODEDENNY	6. \$35,000 and over	O . OTUDNIT
22	CREDFINX	What was the total amount paid in finance, late charges, and interest for all cards in (last month)?	Goto STUDNT
22	STUDNT	? [F1]	1: Goto STUDNTX
		As of TODAY	2, DK, RF: Goto OTHLOAN
		(Do/Does) (you/your household) have any student loans?	
		1. Yes	
		2. No	
22	STUDNTX	? [F1]	1-999999999999999999999999999999999999
		What is the total amount owed on all student loans?	DK, RF: Goto STUDNTB
22	STUDNTB	₩ 50 ? [F1]	1-6: Goto STDNTYRX
		Could you tell me which range on CARD E best reflects the total amount owed on all student loans?	DK, RF: Goto STUDFINX
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999	
22	CTDNITVDV	6. \$35,000 and over	0.00000000000 Coto CTUDEINIV
22	STDNTYRX	? [F1]	0-999999999999999999999999999999999999
		What was the total amount owed on all student loans ONE YEAR AGO TODAY?	DK, RF: Goto STDNTYRB
22	STDNTYRB	□ 50 ? [F1]	Goto STUDFINX
		Could you tell me which range on CARD E best reflects the total amount owed on all student loans ONE YEAR AGO TODAY?	

Section	CAPI Variable Name	Question Text	Skip Instructions
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$9,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999	
		6. \$35,000 and over	
22	STUDFINX	What was the total amount paid in finance, late charges, and interest for all student loans in (last month)?	Goto OTHLOAN
22	OTHLOAN	? [F1] As of TODAY	1: Goto OTHLONX
			2,DK,RF: Goto S22_END
		(Do/Does) (you/your household) have any other debt such as medical loans or personal loans?	_
		Do not include mortgages, home equity loans, or vehicle loans	
		1. Yes 2. No	
22	OTHLONX	? [F1]	1-999999999999999999999999999999999999
		What is the total amount owed on all other loans?	DK,RF: Goto OTHLONB
		 Do not include mortgages, home equity loans, or vehicle loans 	
22	OTHLONB	□ 50 ? [F1]	1-6: Goto OTHLNYRX
		Could you tell me which range on CARD E best reflects the total amount owed on all other loans?	DK,RF: Goto OTHFINX
		◆ Do not include mortgages, home equity loans, or vehicle loans	
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999	
		5. \$10,000-\$34,999	
		6. \$35,000 and over	
22	OTHLNYRX	? [F1]	0-999999999999999999999999999999999999

Section	CAPI Variable Name	Question Text	Skip Instructions
		What was the total amount owed on all other loans ONE YEAR AGO TODAY?	DK,RF: Goto OTHLNYRB
		A De noticelude mentages home envituleure envelole leure	
		 Do not include mortgages, home equity loans, or vehicle loans 	
22	OTHLNYRB	□ 50 ? [F1]	Goto OTHFINX
		Could you tell me which range on CARD E best reflects the total amount owed on all other loans ONE YEAR AGO TODAY?	
		◆ Do not include mortgages, home equity loans, or vehicle loans	
		1. \$0-\$499	
		2. \$500-\$999	
		3. \$1,000-\$2,499	
		4. \$2,500-\$9,999 5. \$10,000-\$34,999	
		6. \$35,000 and over	
22	OTHFINX	What was the total amount paid in finance, late charges, and interest for all other loans in (last month)?	Goto S22_END
		Do not include mortgages, home equity loans, or vehicle loans	
BACK	SKIP_CHECK	Some Sections have been skipped.	1: Goto SK_RESP
		Is there anyone in the household now that would be able to provide information on:	2: Goto APPTOTH
		◆ Press Shift-F5 to view the status table	2: Goto APPTOTH
		1 1000 Offile 1 of to view the status table	3: Goto DONE
		1. Yes	
		2. No	
		3. Battery problem	
BACK	SK_RESP	• Ask if necessary:	Goto SK_RESP2
		With whom am I speaking?	
		◆ ENTER LINE NUMBER or 95. For proxy respondent	
		1. ^NAME[1]	
		2. ^NAME[2]	
		3. ^NAME[3]	
		4. ^NAME[4]	

Section	CAPI Variable Name	Question Text	Skip Instructions
		5. ^NAME[5]	
		6. ^NAME[6]	
		7. ^NAME[7]	
		8. ^NAME[8]	
		9. ^NAME[9]	
		10. ^NAME[10]	
		11. ^NAME[11]	
		12. ^NAME[12]	
		13. ^NAME[13]	
		14. ^NAME[14] 15. ^NAME[15]	
		16. ^NAME[16]	
		17. ^NAME[17]	
		18. ^NAME[18]	
		19. ^NAME[19]	
		20. ^NAME[20]	
		21. ^NAME[21]	
		22. ^NAME[22]	
		23. ^NAME[23]	
		24. ^NAME[24]	
		25. ^NAME[25]	
		26. ^NAME[26]	
		27. ^NAME[27]	
		28. ^NAME[28]	
		29. ^NAME[29]	
		30. ^NAME[30] 95. Proxy Respondent	
BACK	APPTOTH	I'd like to schedule a DATE to (conduct/complete) the interview.	25 characters: Goto THANKCB
BACK	ATTOTT	What DATE AND TIME would be best to visit again?	25 Characters. Goto Thanked
		What DATE AND TIME Would be best to visit again.	B: Goto DONE
		◆ Today is: (current date) ◆ B. Battery problem	2. 33. 23.12
			RF: IF outcome = 202 then goto CBREF
		 Missing Sections: Press shift-F5 to view the status table 	ELSE goto VERIFY_INFO
BACK	CBREF	Exit this case now.	Goto VERIFY_INFO
		Call the case up again and make it a TYPE A non-interview before transmitting.	
		1. Enter 1 to Continue	
BACK	THANKCB	Thank you.	Goto VERIFY_INFO
			_
		I will come back at the time suggested	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Revisit (Appointment information)	
		1. Enter 1 to Continue	
BACK	CARDPIN	The letter we mailed you indicated that we would provide you with the PIN number for the	IF RT25.QTYPE = 1 or 2 then goto R USE
		debit card upon completion of the interview. Since we have now completed the interview, I	v –
		can inform you that the PIN number is the last 4 digits of the card number.	ELSE goto DK_CHECK
		1. Enter 1 to Continue	
BACK	R_USE	Did the respondent(s) refer to at least one record or receipt - either paper or digital - during the	1: Goto CARDNAME
		interview?	2. Cata DIV CHECK
		1. Yes	2: Goto DK_CHECK
		2. No	
BACK	CARDNAME	The letter we mailed you indicated that you would receive an additional \$20 debit card for	Goto DK_CHECK
		using any records during this interview. We will mail this debit card to (you/your household) within the next month. Who would you like this addressed to?	
BACK	DK CHECK	◆ Are there any Don't Know items that you need to callback for?	1: Goto DK APPT
	_		_
		 Press Ctrl-M to review all Don't Knows 	2: Goto THANKYOU
		1. Yes	
DACK	DI/ ADDT	2. No	Coto DI/ THANII/
BACK	DK_APPT	I'd like to schedule a DATE to complete the missing items. What DATE AND TIME would be best to visit you again?	Goto DK_THANK
		Today is (current date)	
		◆ DK Items: Press Ctrl-M to review all Don't Knows	
BACK	DK THANK	Thank you.	Goto VERIFY INFO
		I will come back at the time suggested.	
		Revisit: (Appointment information)	
DAO''	THANKO	1. Enter 1 to Continue	JE (DTOE DECION CO and WITH DD CO A
BACK	THANKYOU	This concludes the interview. Thank you for your patience, and for taking the time to answer	IF (RT25.DESIGN = 00 and INTNMBR = 1-4) or (RT25.DESIGN = 10 and INTNMBR = 1-3) then goto
		our questions.	QTRAPPT
			ELSE goto HOW_INTV

		Question Text	Skip Instructions
		Let me remind you that the information you provide is very valuable because it is used to update the Consumer Price Index, which is one of our nation's leading economic indicators.	
		That is why we sincerely appreciate your participation in this survey (and look forward to your continued support when we contact you again in 3 months.)	
		 Interview number: (1/2/3/4/5) NOTE: Inform the respondent that a supervisor may call them to conduct re-interview. Explain re-interview as needed. 	
		1. Enter 1 to Continue	
BACK	QTRAPPT	Today is (current date). I would like to return during the first week of (month) to conduct your next interview. What day and time works best with your schedule?	Goto HOW_INTV
		• Enter date and time of the next quarter appointment.	
		• Give respondent an appointment card with the filled-in date and time with Regional Office or	
		Field Representative contact information.	
		◆ NOTE : If you are not making an appointment for the next interview, press Enter.	
BACK	THANK2	Thank you for your time. You've been very helpful.	IF BCNAME ne blank then goto VERIFY_INFO
		NOTE: Inform the respondent that a supervisor	ELSEIF NONTYP = 1-3 then goto TELPV
		may call them to conduct re-interview.	
		Explain re-interview as needed.	ELSE goto DONE
		◆ Interview number: (1/2/3/4/5)	
		1. Enter 1 to Continue	
BACK	TRANS	Are you ready to transmit this age?	1: Goto MISS_SEC
		Are you ready to transmit this case?	2: Goto VERIFY_INFO
		1. Yes 2. No	
BACK	MISS_SEC	No survey data were collected for a required section(s) in a 302 interview.	Goto TELPV

Section	CAPI Variable Name	Question Text	Skip Instructions
		Enter the reason that best describes why survey data was not collected.	
BACK	HOW_INTV	How did you collect the data for this (first/second/third/fourth/fifth) interview for this household?	1,6: Goto SNGL_INT
			2: Goto TEL_RESN
		 Personal visit for all sections Personal visit for all sections, but telephone followup for some questions Personal visit for more than half of the sections, the rest by telephone 	3,4,5: Goto TEL_SECT
		4. Equally split between personal visit and telephone5. Telephone for more than half of the sections, the rest by personal visit6. Telephone for all sections	
BACK	SNGL_INT	• Were you able to conduct the interview in a single (visit/call)?	IF HOW_INTV = 6 then goto TEL_RESN ELSE goto CONVREF
		1. Yes 2. No	
BACK	TEL_SECT	♦ Which of these sections did you collect entirely by telephone?	Goto TEL_RSN
		Enter all that apply, separate with commas.	
		Do not select 6 or 7 if any part of the section was collected in person.	
		 Sections 2 and 3 Housing - rent, mortgage, home equity loans. Section 4 Utilities/Communications (electricity, heating, telephone, cable, internet). Section 6 Appliances 	
		4. Section 8 Home Furnishings5. Section 9 Clothing	
		6. Sections 10, 11, and 12 Vehicle Expenses	
		7. Sections 13 and 14 Insurance 8. Section 15 Medical/Health Expenses	
		9. Section 18 Trips and Vacations	
BACK	TEL_RESN	10. Section 21 Work Experience and Income ◆ What was the main reason for collecting data by telephone?	1-7: Goto CONVREF
			8: Goto OTHTLRSN
		 Barriers to reaching the sample unit (i.e., doorman, security, dog). Collecting data from additional respondent(s) in household 	
		3. Excessive distance or travel time to sample unit.4. Respondent called FR to do interview.5. Respondent only available by telephone (scheduling issues).	

Section	CAPI Variable Name	Question Text	Skip Instructions
		Respondent refused personal visit.	
		7. Respondent requested telephone interview.	
BACK	OTHTLRSN	8. Other (Specify). Specify	Goto CONVREF
BACK	TELPV	How did you collect MOST of the data for this case? (Include follow-ups)	IF Bcoverage.NONTYP = 1 AND SECTCOMP[2 or 3] = 1 AND NOCONTACT = 0 then goto RESPON
		By personal visit By phone	ELSE goto DONE
BACK	CONVREF	? [F1]	Goto RESPON
		Was this a converted refusal?	
		1. Yes 2. No	
BACK	RESPON	• Enter the line number of the MAIN respondent.	Goto OTHRSP
		1. ^NAME[1] 2. ^NAME[2] 3. ^NAME[3] 4. ^NAME[4] 5. ^NAME[5] 6. ^NAME[6] 7. ^NAME[7] 8. ^NAME[8] 9. ^NAME[9] 10. ^NAME[10] 11. ^NAME[11] 12. ^NAME[12] 13. ^NAME[13] 14. ^NAME[14] 15. ^NAME[14] 15. ^NAME[15] 16. ^NAME[16] 17. ^NAME[17] 18. ^NAME[18] 19. ^NAME[18] 19. ^NAME[19] 20. ^NAME[20] 21. ^NAME[21]	
		22. ^NAME[22]	
			Page 217 a

Section	CAPI Variable Name	Question Text	Skip Instructions
		23. ^NAME[23]	
		24. ^NAME[24]	
		25. ^NAME[25]	
		26. ^NAME[26]	
		27. ^NAME[27]	
		28. ^NAME[28] 29. ^NAME[29]	
		30. ^NAME[30]	
		95. Proxy Respondent	
BACK	OTHRSP	• Enter the line number of ALL OTHER respondents.	Goto USERECS
		Enter 0 For None	
		(Display Names of persons in the household)	
		0. None	
		1. ^NAMEonly(1)	
		2. ^NAMEonly(2)	
		3. ^NAMEonly(3)	
		4. ^NAMEonly(4)	
		5. ^NAMEonly(5)	
		6. ^NAMEonly(6)	
		7. ^NAMEonly(7)	
		8. ^NAMEonly(8) 9. ^NAMEonly(9)	
		10. ^NAMEonly(10)	
		11. ^NAMEonly(11)	
		12. ^NAMEonly(12)	
		13. ^NAMEonly(13)	
		14. ^NAMEonly(14)	
		15. ^NAMEonly(15)	
		16. ^NAMEonly(16)	
		17. ^NAMEonly(17)	
		18. ^NAMEonly(18)	
		19. ^NAMEonly(19)	
		20. ^NAMEonly(20)	
		21. ^NAMEonly(21)	
		22. ^NAMEonly(22) 23. ^NAMEonly(23)	
		24. ^NAMEOnly(24)	
		25. ^NAMEonly(25)	

Section	CAPI Variable Name	Question Text	Skip Instructions
		26. ^NAMEonly(26)	
		27. ^NAMEonly(27)	
		28. ^NAMEonly(28) 29. ^NAMEonly(29)	
		30. ^NAMEOnly(30)	
		95. Proxy respondent	
BACK	USERECS	In this interview, how often did the respondent consult records?	1-3: Goto TYPERECS
			4: Goto HOMEFILE
		1. Always or almost always	
		2. Most of the time	
		Occasionally or used at least one record A Never personal yeard	
BACK	TYPERECS	4. Never, no records used ◆ What types of bills, receipts, or records did the respondent(s) use to answer expenditure	1-8: Goto RSECTN
		questions?	9: Goto SPECRECS
		Enter all that apply, separate with commas.	9. GOIO SPECKECS
		1. Bills	
		2. Checkbook ledger or check stubs	
		Personal finance or budgeting software records	
		4. Receipts or e-mail receipts 5. Home file (provided by Census Bureau)	
		6. Contracts or agreements	
		7. Credit card, bank, or online bill-paying statements	
		8. Pay stub	
		9. Other- specify	
BACK	SPECRECS	◆ Specify	Goto RSECTN
BACK	RSECTN	Which of these sections did the respondent(s) use bills, receipts, or other resources to answer	Goto HOMEFILE
		expenditure questions?	
		Enter all that apply, separate with commas.	
		Section 1 - General Housing Characteristics	
		2. Section 2 - Rental Living Quarters	
		3. Sections 3 - Owned Living Quarters & Other Owned Real Estate 4. Section 4 - Utilities and Fuels	
		5. Section 5 - Construction, Repairs, Alterations, and Maintenance of Property	
		6. Section 6 - Appliances, Household Equipment, and Other Selected Items	

Section	CAPI Variable Name	Question Text	Skip Instructions
		7. Section 7 - Household Item Repairs, Service Contracts, and Extended Warranties	
		8. Section 8 - Home Furnishings and Related Household Items	
		9. Section 9 - Clothing and Clothing Services	
		10. Section 10 - Rented and Leased Vehicles	
		11. Section 11 - Owned vehicles	
		12. Section 12 - Vehicle Operating Expenses	
		13. Section 13 - Insurance Other than Health	
		14. Section 14 - Health Insurance	
		15. Section 15 - Medical and Health Expenses	
		16. Section 16 - Educational Expenses	
		17. Section 17 - Subscriptions, Memberships, Books, and Entertainment Expenses	
		18. Section 18 - Trips and Vacations	
		19. Section 19 - Miscellaneous Expenses	
		20. Section 20 - Expense Patterns for Selected Goods and Services	
		21. Section 21 - Work Experience and Income 22. Section 22 - Assets and Liabilities	
BACK	HOMEFILE	22. Section 22 - Assets and Liabilities	Goto INFOBOOK
DACK	HOMEFILE	◆ Did you give the respondent a Home File this quarter?	GOLO INFOBOOK
		Did you give the respondent a nome the this quarter:	
		1. Yes	
	111111111111111111111111111111111111111	2. No	0
BACK	INFOBOOK		Goto LANGUAGE
		In the interview, how often did the respondent consult the information booklet?	
		If reading the book to the respondent, enter 5.	
		1. Almost always (90% of the time or more)	
		2. Most of the time (50% to 89% of the time)	
		3. Occasionally (10% to 49% of the time)	
		4. Never or almost never (less than 10% of the time)	
		5. The respondent did not have access to the information booklet.	
BACK	LANGUAGE	<u> </u>	1,2: Goto VERIFY_INFO
		In what language was the interview conducted?	_
			3: Goto LANG_SP
		1. English	
		2. Spanish	
		3. Other - specify	
BACK	LANG_SP	• Specify	Goto VERIFY_INFO
	<u> </u>	alterna.	

Section	CAPI Variable Name	Question Text	Skip Instructions
BACK	VERIFY_INFO		1: Goto DONE
	_	 Verify/change any of the information listed below 	
			2: Goto V_PHONE
		Telephone number: ((area)) (phone number) (Extension)	
		Second phone: (2nd phone number) (2nd phone extension)	
		Best time to call: (Bestime code description)	
		Specific best time: (best time specify)	
		No Sunday: ((No Sunday Interview/Sunday interview okay))	
		1. Enter 1 to Continue	
		2. Change something	
BACK	V_PHONE	What is your telephone number?	Goto V_BSTTI
		◆ Enter 0 for none.	
BACK	V_BSTTI	Best time to contact	1-9, Empty: Goto V_BSTTI2
			10: Goto DONE
		1. Morning (9am-12noon)	
		2. Noon/lunchtime (11am-1pm)	
		3. Afternoon (12noon-4pm)	
		4. Suppertime/early evening/dinnertime(4pm-7pm)	
		5. Evening (6pm-9pm)	
		6. Anytime (9am-9pm)	
		7. Late evening/night (7pm-9pm)	
		8. Daytime (9am-4pm)	
		9. After 5pm	
2461/	V DCTTI2	10. Battery problem	Coto V NOCUN
BACK	V_BSTTI2	Enter specific best time to contact	Goto V_NOSUN
BACK	V_NOSUN	Would a Sunday interview be acceptable?	Goto DONE
		1. Yes	
		2. No	
		3. battery problem	