**APPENDIX I1**

**48-mo advance letter - English**

[DATE]

«First\_Name» «Last\_Name»

«Address1»

«City», «State» «Zip»

Dear «First\_Name»:

We cannot stress enough **how much** we value your participation in the national *Feeding My Baby* Study. Now that <<CHILD FIRST NAME>> is about to turn 4 years old, it is time for us to interview you again. This interview will take 30 minutes and will focus on what <<CHILD FIRST NAME>> ate and drank in the 24 hours prior to the interview.

 If <<CHILD FIRST NAME>> is in preschool, daycare, Head Start or is cared for by a friend or family member during the day, please ask them what <<CHILD FIRST NAME>> ate so you can report this during the interview. We are including a notes page for you to jot down this information for the interview.

As a token of appreciation, we will add **$50** to your prepaid MasterCard after you complete the interview and an additional **$10** if you are using your own cellphone.

Measures of children’s height and weight are also an important part of the study. Because it is essential to get an accurate measure, we are asking you to take the enclosed card and <<CHILD FIRST NAME>> to a WIC clinic for measurement, even if you are no longer receiving WIC benefits. To express our thanks, we will add **$50** to your prepaid MasterCard after the measurement card is returned to us plus an additional **$10** to cover transportation costs. Your child does not need to be enrolled in WIC to be measured at a WIC office for the study.

***If you complete the interview using your own cell phone and take your child to WIC to be measured, we will add a total of $120 to your prepaid MasterCard.***

Please contact your Study Liaison, << STUDY LIAISON NAME >>, at << STUDY LIAISON TOLL FREE NUMBER>> or << STUDY LIAISON EMAIL ADDRESS>> or by text at <<STUDY LIAISON TEXT>> <<to find the closest WIC clinic to you to schedule the appointment for measurement/find out how to get your child measured>> [LATTER USED WHERE RESPONDENT CAN ONLY GO TO ORIGINAL WIC CLINIC PER STATE WIC RULES].

Your Study Liaison will work with you to make other arrangements for measurement if you cannot return to WIC, such as taking <<CHILD FIRST NAME>> to the doctor for measurement.

The Age 4 Feeding My Baby interview is scheduled to start on <<START DATE>>. One of our interviewers will be calling you on <<START DATE>>. The display on your phone when the interviewer calls will be 301-762-1940 or FEED MY BABY.

You can also call our phone center after <<START DATE>> at **(888) 783-6493** to complete the interview at your convenience.

Phone center hours are (Eastern Time):

Monday – Friday 9:00 am – Midnight

Saturday 10:00 am – 6:00 pm

Sunday 2:00 pm – 10:00 pm

We are grateful to you for your assistance. Your continued participation has been key to the success of this study.

Best wishes,

Nancy Weinfield

Feeding My Baby Study Project Director

Notes: Foods your child ate/drank away from home

This note sheet is for you to use to jot down the foods your child ate or drank away from home the day before your interview. We will not ask you to return it. You will use it as a reference for the interview. If someone else feeds your child, please ask the person what foods your child ate or drank while in their care and write it on this page as a reminder for the interview.

|  |  |  |
| --- | --- | --- |
| *What food did child drink or eat?* | *How much did child drink or eat?* | *What time did child drink or eat?* |
| *Example:* |  |  |
| Cheerios | ½ cup | 10AM |
| With 2% milk | ¼ cup | 10AM |
| Apple wedges | ½ apple | 10AM |
| Peanut butter and jelly sandwich | 1 sandwich | 12noon |
|  | 1 slice Wonder bread |  |
|  | 1 TBSP Jif peanut butter |  |
|  | 1 tsp grape jam |  |
| Baked potato wedges | 4 small wedges | 12 noon |
| 2% milk | ½ cup | 12noon |
| Raisins | 25 pieces | 12noon |
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