

Consumer Tipping Survey

Welcome to the 2016 Survey on Consumer Behaviors. The purpose of this survey is to explore consumer's behavior with respect to specific goods and services in the United States. In this short survey, we will ask you about what, if any, transactions of these types have occurred within the last calendar day. This survey is being conducted by a third party research group, Fors Marsh Group, LLC.

This survey should take 8 minutes or less to complete.

SINGLE PUNCH ANSWER

Q1_A. In the last calendar day, have you made any transactions at a *restaurant or other prepared food/drink service*?

- 00 No [SKIP TO Q2_A]
- 01 Yes

Instruction Page

On the next page, we will ask you to record one *restaurant or other prepared food/drink service* transaction that you made in the last calendar day. You will have an opportunity to record a separate transaction of this type later. If you had more than one transaction of this type (even at the same establishment and/or during the same visit), please record each separately. Do not record transactions for which you have already provided information. **[NEXT]**

SINGLE PUNCH ANSWER

Q1_B. What type of service did you receive? Record each transaction separately.

- 01 Full-Service Dining (e.g., traditional restaurants)
- 02 Fast Casual (e.g., Chipotle, Panera)
- 03 Fast Food
- 04 Carry-out/Delivery
- 05 Bar
- 06 Coffee Shops
- 07 Ice Cream/Smoothie Shops
- 08 Self-Service/Cafeteria/Buffets
- 09 Food Cart/Truck
- 99 Refused
- 100 Valid Skip

///If -99/Refused issue soft prompt to respondents before allowing them to proceed///

SINGLE PUNCH ANSWER

Q1_C. Did you pay for this particular service (**excluding any automatic or voluntary tip**)?

- 00 No [SKIP TO Q1_F]

- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q1_D. What payment type(s) did you use to pay your portion of the bill?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other
- 100 Valid Skip

OPEN-ENDED ANSWER

Q1_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.
(after tax, before automatic or voluntary tip)

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q1_F. Did the business add an automatic tip for this service? If so, how much did you pay?

- 00 No
- 01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q1_G. Did you leave a voluntary tip for this transaction?

- 00 No [SKIP TO Q1_J]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q1_H. What payment type(s) did you use to pay the voluntary tip?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Non-monetary*
- 09 Other
- 100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q1_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q1_J. Have you made any other transactions at a *restaurant or other prepared food/drink service* in the last calendar day?

00 No [**SKIP TO Q2_A**]

01 Yes [**PROCEED TO NEXT INSTRUCTION PAGE**]

-100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. [**PROCEED to new record for Q1_B**]

///RANDOMIZE DETERMINE NEXT SERIES OF QUESTIONS, SELECT FROM Q2_A - Q6_A. RANDOMLY SELECT AFTER EACH SERIES IS COMPLETE///

SINGLE PUNCH ANSWER

Q2_A. In the last calendar day, have you had any transactions at a *hotel/motel*?

00 No [**SKIP TO Q3_A**]

01 Yes

[**SHOW Q2_RATE and Q2_NIGHTS on same page**]

OPEN-ENDED ANSWER

Q2_RATE. What was the average nightly rate for the room?

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

OPEN-ENDED ANSWER

Q2_NIGHTS. How many nights did you stay at this hotel?

[TEXT BOX].[TEXT BOX]

-100 Valid Skip

Instruction Page

On the next page, we will ask you to record one *hotel/motel* transaction that you made in the last calendar day. You will have an opportunity to record a separate transaction of this type later. If you had more than one transaction of this type (even at the same establishment and/or during the same visit), please record each separately. Do not record transactions for which you have already provided information.

[NEXT]

SINGLE PUNCH ANSWER

Q2_B. What type of service did you receive? Record each transaction separately.

- 01 Concierge/Front Desk Staff
- 02 Housekeeping
- 03 Room Service
- 04 Valet
- 05 Bellhop/Luggage Assistance
- 06 Bar
- 07 Full-Service Dining (e.g., traditional restaurant)
- 08 Self-Service/Cafeteria/Buffets
- 09 Shuttle Service to/from Hotel/Motel
- 99 Refused
- 100 Valid Skip

///**If -99/Refused issue soft prompt to respondents before allowing them to proceed**///
///

SINGLE PUNCH ANSWER

Q2_C. Did you pay for this particular service (**excluding any automatic or voluntary tip**)?

- 00 No [SKIP TO Q2_F]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q2_D. What payment type(s) did you use to pay your portion of the bill?

(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other
- 100 Valid Skip

OPEN-ENDED ANSWER

Q2_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.

(after tax, before automatic or voluntary tip)

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q2_F. Did the business add an automatic tip for this service? If so, how much did you pay?

- 00 No
- 01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q2_G. Did you leave a voluntary tip for this transaction?

- 00 No [**SKIP TO Q2_J**]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q2_H. What payment type(s) did you use to pay the voluntary tip?

(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit

- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Non-monetary*
- 09 Other
- 100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q2_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q2_J. Have you made any other transactions at a *hotel/motel* in the last calendar day?

- 00 No [SKIP TO Q3_A]
- 01 Yes
- 100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. **[PROCEED to new record for Q2_B]**

SINGLE PUNCH ANSWER

Q3_A. In the last calendar day, have you made any transactions for *personal grooming, beauty, or massage services*?

- 00 No [SKIP TO Q4_A]
- 01 Yes

Instruction Page

On the next page, we will ask you to record one *personal grooming, beauty, or massage service* transaction that you made in the last calendar day. You will have an opportunity to record a separate transaction of this type later. If you had

more than one transaction of this type (even at the same establishment and/or during the same visit), please record each separately. Do not record transactions for which you have already provided information.

[NEXT]

SINGLE PUNCH ANSWER

Q3_B. What type of service did you receive? Record each transaction separately.

- 01 Hair Stylist
- 02 Barber
- 03 Manicurist/Pedicurist
- 04 Massage Therapist
- 05 Waxing/Hair Removal
- 06 Facial/Skin Care
- 07 Makeup Artist
- 99 Refused
- 100 Valid Skip

///If -99/Refused issue soft prompt to respondents before allowing them to proceed///

SINGLE PUNCH ANSWER

Q3_C. Did you pay for this particular service (excluding any automatic or voluntary tip)?

- 00 No [SKIP TO Q3_F]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q3_D. What payment type(s) did you use to pay your portion of the bill?

(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other
- 100 Valid Skip

OPEN-ENDED ANSWER

Q3_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.

(after tax, before automatic or voluntary tip)

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q3_F. Did the business add an automatic tip for this service? If so, how much did you pay?

00 No

01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q3_G. Did you leave a voluntary tip for this transaction?

00 No [SKIP TO Q3_J]

01 Yes

-100 Valid Skip

MULTIPLE PUNCH ANSWER

Q3_H. What payment type(s) did you use to pay the voluntary tip?

(select all that apply)

01 Cash

02 Debit

03 Credit

04 Check

05 Gift Card

06 Smartphone credit or app

07 Paper or online coupon (e.g., Groupon)

08 Non-monetary*

09 Other

-100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q3_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q3_J. Have you made any other transactions for *personal grooming, beauty, or massage services* in the last calendar day?

- 00 No [SKIP TO Q4_A]
- 01 Yes [PROCEED TO NEXT INSTRUCTION PAGE]
- 100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. [PROCEED to new record for Q3_B]

SINGLE PUNCH ANSWER

Q4_A. In the last calendar day, have you made any transactions for *moving or household maintenance services*?

- 00 No [SKIP TO Q5_A]
- 01 Yes

Instruction Page

On the next page, we will ask you to record one *moving or household maintenance service* transaction that you made in the last calendar day. You will have an opportunity to record a separate transaction of this type later. If you had more than one transaction of this type (even at the same establishment and/or during the same visit), please record each separately. Do not record transactions for which you have already provided information.

[NEXT]

SINGLE PUNCH ANSWER

Q4_B. What type of service did you receive? Record each transaction separately.

- 01 Professional Movers
- 02 Maid or Cleaning Service
- 03 Lawn/Gardening Service
- 04 Handyman/Repairman
- 05 Equipment Rental
- 99 Refused
- 100 Valid Skip

///If -99/Refused issue soft prompt to respondents before allowing them to proceed///

SINGLE PUNCH ANSWER

Q4_C. Did you pay for this particular service (**excluding any automatic or voluntary tip**)?

- 00 No [**SKIP TO Q4_F**]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q4_D. What payment type(s) did you use to pay your portion of the bill?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other
- 100 Valid Skip

OPEN-ENDED ANSWER

Q4_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.
(after tax, before automatic or voluntary tip)

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q4_F. Did the business add an automatic tip for this service? If so, how much did you pay?

- 00 No
- 01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q4_G. Did you leave a voluntary tip for this transaction?

- 00 No [**SKIP TO Q4_J**]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q4_H. What payment type(s) did you use to pay the voluntary tip?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Non-monetary*
- 09 Other
- 100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q4_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q4_J. Have you made any other transactions for *moving or household maintenance services* in the last calendar day?

- 00 No [SKIP TO Q5_A]
- 01 Yes [PROCEED TO NEXT INSTRUCTION PAGE]
- 100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. [PROCEED to new record for Q4_B]

SINGLE PUNCH ANSWER

Q5_A. In the last calendar day, have you made any transactions at a *casino*?

- 00 No [SKIP TO Q6_A]
- 01 Yes

Instruction Page

On the next page, we will ask you to record one *casino* transaction that you made in the last calendar day. You will have an opportunity to record a separate transaction of this type later. If you had more than one transaction of this type (even at the same establishment and/or during the same visit), please record each separately. Do not record transactions for which you have already provided information.

[NEXT]

SINGLE PUNCH ANSWER

Q5_B. What type of service did you receive? Record each transaction separately.

- 01 Dealers [SKIP TO Q5_F]
- 02 Floor Servers
- 03 Bar
- 04 Full-Service Dining (e.g., traditional restaurant)
- 05 Self-Service/Cafeteria/Buffets
- 06 Shuttle Service to/from Casino
- 07 Valet
- 99 Refused
- 100 Valid Skip

///If -99/Refused issue soft prompt to respondents before allowing them to proceed///

SINGLE PUNCH ANSWER

Q5_C. Did you pay for this particular service (excluding any automatic or voluntary tip)?

- 00 No [SKIP TO Q5_F]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q5_D. What payment type(s) did you use to pay your portion of the bill?

(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other

-100 Valid Skip

OPEN-ENDED ANSWER

Q5_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.
(after tax, before automatic or voluntary tip)

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q5_F. Did the business add an automatic tip for this service? If so, how much did you pay?

00 No

01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q5_G. Did you leave a voluntary tip for this transaction?

00 No [SKIP TO Q5_J]

01 Yes

-100 Valid Skip

MULTIPLE PUNCH ANSWER

Q5_H. What payment type(s) did you use to pay the voluntary tip?
(select all that apply)

01 Cash

02 Debit

03 Credit

04 Check

05 Gift Card

06 Smartphone credit or app

07 Paper or online coupon (e.g., Groupon)

08 Non-monetary*

09 Other

-100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q5_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

\$ [TEXT BOX].[TEXT BOX]

-100 Valid Skip

SINGLE PUNCH ANSWER

Q5_J. Have you made any other transactions at a *casino* in the last calendar day?

00 No [SKIP TO Q6_A]

01 Yes [PROCEED TO NEXT INSTRUCTION PAGE]

-100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. [PROCEED to new record for Q5_B]

SINGLE PUNCH ANSWER

Q6_A. In the last calendar day, have you made any transactions for a *taxi, limousine, rideshare, or shuttle service*?

00 No [SKIP TO DEM_4]

01 Yes

Instruction Page

On the next page, we will ask you to record one transaction you have made for a *taxi, limousine, rideshare, or shuttle service*. Do not record transactions for which you have already provided information. [NEXT]

SINGLE PUNCH ANSWER

Q6_B. What type of service did you receive? Record each transaction separately.

01 Limousine

02 Standard Taxi (e.g., "yellow cabs")

03 Uber, Lyft, or other Ride-Share service

04 Shuttle Service (e.g., Super Shuttle)

05 Valet

-99 Refused

-100 Valid Skip

///**If -99/Refused issue soft prompt to respondents before allowing them to proceed**///
///

SINGLE PUNCH ANSWER

Q6_C. Did you pay for this particular service (**excluding any automatic or voluntary tip**)?

- 00 No [**SKIP TO Q6_F**]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q6_D. What payment type(s) did you use to pay your portion of the bill?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Other
- 100 Valid Skip

OPEN-ENDED ANSWER

Q6_E. What was the amount of the bill that you paid? When filling in cents please enter a value from 0-99.
(after tax, before automatic or voluntary tip)

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q6_F. Did the business add an automatic tip for this service? If so, how much did you pay?

- 00 No
- 01 Yes, and the amount was: \$[TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q6_G. Did you leave a voluntary tip for this transaction?

- 00 No [**SKIP TO Q6_J**]
- 01 Yes
- 100 Valid Skip

MULTIPLE PUNCH ANSWER

Q6_H. What payment type(s) did you use to pay the voluntary tip?
(select all that apply)

- 01 Cash
- 02 Debit
- 03 Credit
- 04 Check
- 05 Gift Card
- 06 Smartphone credit or app
- 07 Paper or online coupon (e.g., Groupon)
- 08 Non-monetary*
- 09 Other
- 100 Valid Skip

[Instructions at the bottom of response option list] ***Examples of non-monetary gifts are: concert tickets, a bottle of wine, or a meal. Note that non-monetary gifts should only be recorded if they were used to compensate for the service. Non-monetary gifts that are given as personal tokens of appreciation should not be recorded.**

OPEN-ENDED ANSWER

Q6_I. What was the amount of voluntary tip you paid? When filling in cents please enter a value from 0-99.

- \$ [TEXT BOX].[TEXT BOX]
- 100 Valid Skip

SINGLE PUNCH ANSWER

Q6_J. Have you made any other transactions for a *taxi, limousine, rideshare, or shuttle service* in the last calendar day?

- 00 No [SKIP TO DEM_4]
- 01 Yes [PROCEED TO NEXT INSTRUCTION PAGE]
- 100 Valid Skip

Instruction Page

Please record your next transaction in the same way as before. [PROCEED to new record for Q6_B]

[Note: Demographic items 1-8 will be captured by the frame file of GfK and will not be asked. Ipsos will ask demographic item of participants at the beginning of the survey.]

SINGLE PUNCH ANSWER

DEM_1. What is your age?

<Text box>

SINGLE PUNCH ANSWER

DEM_2. In which ZIP code do you live?

<Text box>

SINGLE PUNCH ANSWER

DEM_3. What is your gender?

- 01 Male
- 02 Female

SINGLE PUNCH ANSWER

DEM_4. Are you of Hispanic or Latino origin (ethnicity)?

- 01 Yes, of Hispanic origin
- 02 No, not of Hispanic origin

MULTIPLE PUNCH ANSWER

DEM_5. What is your race? Please select one or more. Are you...

- 01 White
- 02 Black or African-American
- 03 Asian
- 04 Native Hawaiian or Other Pacific Islander
- 05 American Indian or Alaskan Native
- 06 Other

SINGLE PUNCH ANSWER

DEM_6. Please indicate your highest level of educational attainment:

- 01 No formal education
- 02 1st, 2nd, 3rd, or 4th grade
- 03 5th or 6th grade
- 04 7th or 8th grade
- 05 9th grade
- 06 10th grade
- 07 11th grade
- 08 12th grade NO DIPLOMA

- 09 HIGH SCHOOL GRADUATE - high school DIPLOMA or the equivalent GED)
- 10 Some college, no degree
- 11 Associate degree
- 12 Bachelors of degree
- 13 Master's degree
- 14 Professional or Doctorate degree

SINGLE PUNCH ANSWER

DEM_7. Please indicate your employment status:

- 01 Working - as a paid employee
- 02 Working - self-employed
- 03 Not working - on temporary layoff from a job
- 04 Not working - looking for work
- 05 Not working - retired
- 06 Not working - disabled
- 07 Not working - other

SINGLE PUNCH ANSWER

DEM_8. Please indicate your annual household income:

- 01 Less than \$5,000
- 02 \$5,000 to \$7,499
- 03 \$7,500 to \$9,999
- 04 \$10,000 to \$12,499
- 05 \$12,500 to \$14,999
- 06 \$15,000 to \$19,999
- 07 \$20,000 to \$24,999
- 08 \$25,000 to \$29,999
- 09 \$30,000 to \$34,999
- 10 \$35,000 to \$39,999
- 11 \$40,000 to \$49,999
- 12 \$50,000 to \$59,999
- 13 \$60,000 to \$74,999
- 14 \$75,000 to \$84,999
- 15 \$85,000 to \$99,999
- 16 \$100,000 to \$124,999
- 17 \$125,000 to \$149,999
- 18 \$150,000 to \$174,999
- 19 \$175,000 or more

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this survey is 1545-2261. We estimate the time required to be eight minutes. Also, if you have any comments regarding the time estimates associated with this study or suggestions on making this process simpler, please write to:

Internal Revenue Service
Tax Product Coordinating Committee
1111 Constitution Avenue NW
Washington, DC 20224