

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

ID _____ PH: _____
R NAME: _____ HHM3: {AGE, GENDER}
HHM1: {AGE, GENDER} HHM4: {AGE, GENDER}
HHM2: {AGE, GENDER} HHM5: {AGE, GENDER}
ADDR: _____ CITY/STATE _____

[CIRCLE HHM # WHEN THE PARTICIPANT IS DEFINITELY IDENTIFIED]

DATA COLLECTOR NAME: _____ DATE: |__|__|/|__|__|/2014

START TIME: |__|__:|__|__| am pm END TIME: |__|__:|__|__| am pm

INTRO 1: Hi, I'm (DC NAME). Recently, you or someone in your household completed a short paper survey about outdoor recreation and fishing activities for the National Oceanic and Atmospheric Administration, NOAA. Was that you?

[IF YES]: Great! Thank you for completing the NOAA survey. The information you provided was very important. Your information will be even more valuable if you could answer a few follow-up questions. (GO TO INTRO3, PAGE 2)

[IF NO/DK]: The survey was mailed to (ADDRESS) and included a \$2 bill. Is that your address?

[IF R ALREADY DETERMINED, ASK FOR THAT HOUSEHOLD MEMBER; OTHERWISE, GO TO 'YES' OR 'NO/DK' BELOW]

[IF YES: It asked questions about weather, outdoor recreational activities like hiking, and questions about fishing. We'd like to ask a few questions that will help NOAA improve their surveys. May I speak with the person who most likely completed the survey? (LIST HHM AGE AND GENDER AS NEEDED; ASK ONLY FOR THOSE 18 YRS OF AGE & OLDER: The survey listed a (AGE) year old (GENDER), ETC.)

(IF OTHER HHM COMES TO PHONE: GO TO INTRO2, PAGE 2;

IF NO OTHER HHM 18 OR OLDER: THANK & CLOSE; CODE OO)

[IF NO]: VERIFY PH#: I'm sorry, I apparently have dialed the wrong phone number. Thank you for your time. Good-by. (CODE NW)

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

INTRO2: Hi, I'm (DC NAME) Recently you or someone in your household completed a short paper survey about outdoor recreation and fishing activities for the National Oceanic and Atmospheric Administration, NOAA. Was that you?

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Rob Andrews, NOAA Fisheries Service, 1315 East-West Hwy., Silver Spring, MD 20910.

IF YES: Great! Thank you for completing the NOAA survey. The information you provided was very important. It will be even more valuable if you could answer a few follow-up questions. (GO TO INTRO3 BELOW)

IF NO: The survey asked questions about weather, outdoor recreational activities like hiking, and questions about fishing. We'd like to ask a few questions that will help NOAA improve their surveys. May I speak with the person 18 years of age or older who most likely completed the survey? (GO BACK TO INTRO 2 IF OTHER HHM COMES TO PHONE)

AS NEEDED: ASK ABOUT AGE & GENDER OF HHM'S 18 & OLDER: The survey listed a (AGE) year old (GENDER), ETC.)

APPOINTMENTS: MESSAGES MADE AFTER APPOINTMENTS MUST INCLUDE THE DEFINITE SUBJECT 1ST NAME OR AGE & GENDER OR HHM#. IF UNKNOWN, THE MESSAGE SHOULD STATE WHICH HHM# IS NOT THE SUBJECT.

This is a voluntary survey, and responses are kept confidential as required by section 402(b) of the Magnuson-Stevens Act and NOAA Administrative Order 216-100, Confidentiality of Fisheries Statistics, and will not be released for public use except in aggregate statistical form without identification as to its source. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

INTRO 2: This is a voluntary survey, which will take about 10 minutes, and your responses will be kept confidential to the full extent of the law.

Fisheries Statistics, and will not be released for public use except in aggregate statistical form without identification as to its source. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

INTRO 3a: This interview will be recorded for quality control purposes.

[IF R OBJECTS]: Ok, that's fine. We'll continue without the interview being recorded.

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

1. Did you do any fishing in North Carolina during January or February of 2014? [IF YES, GO TO Q'S IN CHART BELOW; IF NO, GO TO Q2.]

<p>THINK! IF DID NOT SALTWATER FISH, SKIP c-f, & Q2. IF DIDN'T SHORE FISH, SKIP d, ETC.</p>	<p>a. How many days did you go <u>saltwater</u> fishing this <u>Jan. & Feb. of 2014</u>?</p>	<p>b. How many days did you go <u>fresh</u> water fishing <u>this Jan. & Feb.</u>? [VERIFY IF KNOWN]</p>	<p>c. How many of those (#DAYS a) <u>saltwater</u> fishing days were from the <u>shore</u>? [VERIFY IF KNOWN]</p>	<p>d. What type body of water were you fishing in when you were <u>shore</u> fishing those days? . . . And, what was the name of that place? [VERIFY ANY KNOWN] [PROBE: Anywhere else?] [PROBE IF MAYBE FRESH]</p>	<p>e. How many of those <u>saltwater</u> fishing days were from a private or rental <u>boat</u>, not a charter or commercial boat? [VERIFY IF KNOWN]</p>	<p>f. When saltwater fishing from a boat, where were you, for example, a sound, marsh, bay, estuary, ocean? . . . And, where was that location? [VERIFY ANY KNOWN] [PROBE: Anywhere else?]</p>
<p>JAN. - FEB. 2014</p>	<p> _ _ DAYS</p>	<p> _ _ DAYS [IF a=00, GO TO Q2]</p>	<p> _ _ DAYS [IF 00, GO TO e]</p>	<p>_____ _____</p>	<p> _ _ DAYS [IF 00, GO TO Q2]</p>	<p>_____ _____</p>

2. Did anyone else in your household do any fishing in North Carolina during January or February of 2014? [IF YES, GO TO Q'S IN CHART BELOW; IF NO, GO TO Q3, PG 4.]

<p>THINK!</p>	<p>a. How many days did the (AGE/ GENDER) go <u>saltwater</u> fishing in Jan.-Feb. 2014?</p>	<p>b. How many days did (AGE/ GENDER) go <u>fresh</u> water fishing <u>Jan.- Feb. 2014</u>? [VERIFY IF KNOWN]</p>	<p>c. How many of (his/her) <u>saltwater</u> fishing days were from the <u>shore</u>? [VERIFY IF KNOWN]</p>	<p>d. What type body of water was (he/she) fishing in when <u>shore</u> fishing? . . . And, where was that located? [PROBE: Anywhere else?]</p>	<p>e. How many of those saltwater fishing days were from a private or rental <u>boat</u>, not a charter or commercial boat? [IF CAN, VERIFY]</p>	<p>f. When saltwater fishing from a boat, where was (he/she), for example, a sound, marsh, bay, estuary, ocean? . . . And, where was that located? [Anywhere else?]</p>
<p>[FOR JAN.- FEB. 2014]</p>	<p> _ _ DAYS</p>	<p> _ _ [IF a=00→ Q3]</p>	<p> _ _ [IF 00→ e]</p>	<p>_____ _____</p>	<p> _ _ [IF 00→ Q3]</p>	<p>_____ _____</p>
<p>HHM# _ </p>	<p> _ _ DAYS</p>	<p> _ _ [IF a=00→ Q3]</p>	<p> _ _ [IF 00→ e]</p>	<p>_____ _____</p>	<p> _ _ [IF 00→ Q3]</p>	<p>_____ _____</p>

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

HHM# __	__ __ DAYS	__ __ [IF a=00→ Q3	__ __ [IF 00→ e		__ __ [IF 00→ Q3	
HHM# __	__ __ DAYS	__ __ [IF a=00→ Q3	__ __ [IF 00→ e		__ __ [IF 00→ Q3	

3. Did you do any fishing in North Carolina during the last year? [IF YES, GO TO Q'S IN CHART BELOW; IF NO, GO TO Q4, PG4.]

a. What months did you go fishing during the <u>last</u> year? [CONFIRM MO., YR. AS CIRCLE]	b. How many days did you go <u>saltwater</u> fishing in (MONTHS)? [IF NEEDED: Did you go 1 week in that month? How many days in (that/a) week? ETC.] __ __ DAYS	c. How many days did you go <u>fresh</u> water fishing in (MONTHS)? [VERIFY IF KNOWN] __ __ DAYS [IF b=00, GO TO Q4]	d. When you were <u>saltwater</u> fishing in the last year, how many of those days were from <u>shore</u> ? [VERIFY IF KNOWN] __ __ DAYS [IF 00, GO TO f]	e. When you were <u>shore</u> fishing in saltwater in the last year, where were you fishing? (type water?/ location?) [ANY PLACE ELSE?]	f. When you were saltwater fishing in the last year, how many of those days were from a private or rental <u>boat</u> , not a charter or commercial boat? __ __ DAYS [IF 00, GO TO Q4]	g. When you were saltwater fishing from a private or rental boat in the last year, where were you? (What type body of water? ... Where located?) [ANY PLACE ELSE?]
JANUARY						
FEBRUARY						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUGUST						

ANSWERS FOR MO. TOTALS
ABOVE FOR SHADED COLUMNS.

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

SEPTEMBER						
OCTOBER						
NOVEMBER						
DECEMBER						

4. Did anyone else in your household do any fishing in North Carolina the last year? [IF YES, GO TO Q'S IN CHART BELOW; IF NO, GO TO Q5.]

[FOR LAST YR.]	a. What months did the (AGE/ GENDER) go fishing during the <u>last year</u> ? [CONFIRM MO., YR. AS CIRCLED]	b. How many days did the (AGE/GENDER) go <u>saltwater</u> fishing in (MONTHS)? [IF NEEDED: Did they go 1 week in that month? How many days in (that/a) week? ETC.]	d. How many days did (he/she) go <u>fresh</u> water fishing in (MONTHS)? [VERIFY IF KNOWN]	d. When they were <u>saltwater</u> fishing in (MONTHS), how many of those days were from <u>shore</u> ? [VERIFY IF KNOWN] [IF 00→f]	e. When (he/she) was <u>shore</u> fishing in saltwater in (MONTHS), where was (he/she) fishing? (type water?/ location?) [ANY PLACE ELSE?]	f. When they were saltwater fishing in (MONTHS), how many of those days were from a private or rental <u>boat</u> , not a charter or commercial boat? [IF 00→Q6]	g. When (he/she) was saltwater fishing from a private or rental boat in (MONTHS), where were they? (What type body of water? ... Where located?) [ANY PLACE ELSE?]
HHM# __ __	JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC	__ __ DAYS	__ __ DAYS	__ __ DAYS		__ __ DAYS	
HHM# __ __	JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC	__ __ DAYS	__ __ DAYS	__ __ DAYS		__ __ DAYS	
HHM# __ __	JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC	__ __ DAYS	__ __ DAYS	__ __ DAYS		__ __ DAYS	

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

HHM# __ __	JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC	__ __ DAYS	__ __ DAYS	__ __ DAYS		__ __ DAYS	
-----------------	---	-------------	-------------	-------------	--	-------------	--

[ASK FOLLOWING Q'S ONLY IF SOMEONE IN HOUSEHOLD FISHED IN JAN.-FEB 2014 AND/OR IN LAST YEAR; OTHERWISE, CLOSE]

5. How did you choose your answers or figure out the number of days fishing last year? We want to know how people arrive at their responses, so we'd appreciate your talking us through the process. [IF NEEDED: How do you know, for example, vacation, certain # days in a wk. or mo.?]

6. How did you remember the type water being fished in? [VERIFY IF KNOWN] [IF NEEDED: How do you know it was salt or fresh water?]

7. When you filled out the mail survey, did you . . .

- | | | | |
|--|-----|------------|-------|
| a. ask others about some of the answers? | YES | NO | |
| b. have them write in some of the answers? | YES | NO | |
| c. use a calendar or planner? | YES | NO | |
| d. anything else? | YES | (SPECIFY): | _____ |

NC Fishing Validation Study

OMB Control No. 0648-0652

Expiration Date: 10/31/2016

CLOSING: Thank you very much for your time. This is important information for NOAA. Have a good day.