### Notes on Formatting and Sources

1. \* = item to include in baseline survey only; + = item to consider including in follow-up survey only, pending results from proof of concept; other items are to be included in both surveys.
2. Item labels in parentheses correspond to item source, for items taken or adapted from existing scales. ^ = item was adapted from item on existing scale (not including minor edits to wording or response scales).
	* + 1. **NFCS** = FINRA (2015). 2015 National Financial Capability Study state-by-state survey instrument. Financial Industry Regulatory Authority. *Note: Item letter-number combinations correspond to enumeration in original survey.*
			2. **CSQ8** = Attkisson, C. (2012). Client Satisfaction Questionnaire (8-item version). Tamalpais Matrix Systems.
			3. **HHB** = Hilgert, M. A., Hogarth, J. M., & Beverly, S. G. (2003). Household financial management: The connection between knowledge and behavior. Fed. Res. Bull., 89, 309.
			4. **YMYG** = CFPB (2016). Tool 2: Financial empowerment assessment. In *Your Money, Your Goals: A financial empowerment toolkit*. Consumer Financial Protection Bureau.
			5. **CFPB** = CFPB (2016). CFPB National Financial Well-Being Survey. Consumer Financial Protection Bureau.
			6. **NSAF** = National Survey of America’s Families (2002). Urban Institute. Retrieved from https://www.icpsr.umich.edu/icpsrweb/instructors/studies/4582
			7. **OECD** = OECD (2015). 2015 OECD/INFE Toolkit for measuring financial literacy and financial inclusion. Organisation for Economic co-operation and Development. Retrieved from <http://www.oecd.org/finance/financial-education/measuringfinancialliteracy.htm>
			8. **SHED =** Federal Reserve Survey of Household Economics and Decisionmakingretrieved from <https://www.federalreserve.gov/consumerscommunities/shed_data.htm>

### Introductory Script

[TO BE READ FOLLOWING INFORMED CONSENT]

**Privacy Act Statement**

**5 U.S.C. 552a(e)(3)**

The information you provide through your responses to Davis Research and the RAND Corporation will assist the study sponsor, the Consumer Financial Protection Bureau (CFPB or “Bureau”), in collecting feedback about consumers’ experiences receiving services at organizations that have been trained to use the Your Money, Your Goals (YMYG) toolkit and educational materials.

The CFPB will not obtain or access personally identifiable information. The Bureau will only obtain and access de-identified results and aggregated analyses of those results.

Information collected on behalf of the Bureau by Davis Research and the RAND Corporation will be treated in accordance with the System of Records Notice (SORN), CFPB.021 Consumer Education and Engagement Records SORN, 83 FR 23435. This information may be disclosed as outlined in the Routine Uses for the SORN. Direct identifying information will only be used by Davis Research and the RAND Corporation to facilitate the survey and will be kept private except as required by law.

This collection of information is authorized by Pub. L. No. 111-203, Title X, Sections 1013 and 1022, codified at 12 U.S.C. §§ 5493 and 5512.

Participation in this study is voluntary, you are not required to participate or share any identifying information with Davis Research or the RAND Corporation.

## **Paperwork Reduction Act Statement**

**Paperwork Reduction Act Statement**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and not withstanding any other provision of law a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 3170-0036. It expires on 10/31/2022. The time required to complete this information collection is estimated to average approximately .5 hours per response. Comments regarding this collection of information, including the estimated response time, suggestions for improving the usefulness of the information, or suggestions for reducing the burden to respond to this collection should be submitted to the Consumer Financial Protection Bureau (Attention: PRA Office), 1700 G Street NW, Washington, DC 20552, or by email to PRA\_Comments@cfpb.gov.

Thank you for agreeing to take part in this important study. Please answer each question thoughtfully and truthfully. This will allow us to provide an accurate picture of the different individual experiences. If you prefer not to answer a specific question for any reason, it can be skipped.

[RESPONSE OPTIONS THROUGHOUT, NOT READ ALOUD]

98 Don’t know

99 Prefer not to say

### Demographics (14 questions)

First, we will ask you some background questions.

**AGE\*. How old are you**

1 18-24

2 25-34

3 35-44

4 45-54

5 55-64

6 65+

Insert an age range question here

**GEN\*.** What is your gender?

[CHECK ONLY ONE]

1 Female

2 Male

99 Other/prefer not to say

**MARI\_1(NFCS\_A6).** What is your marital status?

[CHECK ONLY ONE]

1 Married

2 Partnered

3 Single

4 Separated

5 Divorced

6 Widowed/widower

**LIV\_1a(NFCS\_A7a)^.** [AUTO-COMPLETE TO FILL LATER ITEMS THAT REFER TO HOUSEHOLD]

IF MARI\_1(NFCS\_A6) = 1-2 THEN LIV\_1a(NFCS\_A7a) = 1

IF MARI\_1(NFCS\_A6) = 3-6 AND LIV\_1(CFPB) = 2 THEN LIV\_1a(NFCS\_A7a) = 1

IF MARI\_1(NFCS\_A6) = 6-6 AND LIV\_1(CFPB) = 1, 3, 4, or 5 THEN LIV\_1a(NFCS\_A7a) = 2

[CHECK ONLY ONE]

1 Married or living with spouse/partner: Relevant items will be asked about household

2 Unmarried and not living with spouse/partner: Relevant items will be asked about respondent only

**LIV\_2.** Including yourself, how adults people live in your household?

[CHECK ONLY ONE]

1 1

2 2

3 3

4 4 or more

**FIN\_DEC.** Who in your household is primarily responsible for making financial decisions?

[CHECK ONLY ONE]

1 You

2 Other family member

3 Someone else

IF LIV\_1a(NFCS\_A7a) = 1 INCLUDE:

4 Your spouse/partner

5 Financial decisions are jointly made with your spouse/partner

**DEP(NFCS\_A11)^.** How many children or grandchildren do you have who are financially dependent on you [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: or your spouse/partner]? Please include children not living at home, and step children as well.

[CHECK ONLY ONE]

1 1

2 2

3 3

4 4 or more

5 No financially dependent children

6 Do not have any children

**EDUC\*.** What is the highest degree or level of school that you have completed?

[CHECK ONLY ONE]

1 Did not complete high school

2 High school diploma or equivalent (such as GED)

3 Some college or trade school, but no degree

4 Associate degree (e.g., AA, AS) or trade school certificate (such as surgical technologist or cosmetician)

5 Bachelor’s degree or equivalent (e.g., BA, AB, BS, BSN)

6 Graduate degree (e.g., MA/MS/Ph.D./MD/JD/DVM)

**WORK(NFCS)^.** Which of the following describes your primary current employment or work status?

[CHECK ONLY ONE]

1 Self-employed

2 Work full-time for an employer or the military

3 Work part-time for an employer or the military

4 Homemaker

5 Full-time student

6 Permanently sick, disabled, or unable to work

7 Unemployed or temporarily laid off

8 Retired

**INC\_1(NFCS\_A8)^.** What is your [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: household’s] approximate annual income, including wages, tips, investment income, public assistance, income from retirement plans, etc.? Would you say it is…

[CHECK ONLY ONE]

1 Less than $15,000

2 At least $15,000 but less than $25,000

3 At least $25,000 but less than $35,000

4 At least $35,000 but less than $50,000

5 At least $50,000 but less than $75,000

6 At least $75,000

**INC\_2(CFPB).** Which of the following best describes how your [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: household’s] income changes from month to month, if at all?

[CHECK ONLY ONE]

1 Roughly the same each month

2 Roughly the same most months, but some unusually high or low months during the year

3 Often varies quite a bit from one month to the next

**ASST(NSAF/CFPB)^.** In the past 3 months, did you [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: or anybody in your household] receive:

[CHECK ALL THAT APPLY]

1 Benefits from Food Stamps or SNAP (the Supplemental Nutrition Assistance Program)?

2 Benefits from Social Security, including old age retirement benefits, Disability, or Supplemental Security Income

3 Benefits from Welfare, Temporary Assistance for Needy Families (TANF), public assistance, vouchers, or emergency help from the welfare office?

5 Other cash payment (please describe)

**SAV(CFPB)^.** How much money do you have in savings today (in cash, checking, and savings account or pre-paid card balances)?

[CHECK ONLY ONE]

1 $0

2 $1-99

3 $100-499

4 $500-999

5 $1,000-1,999

6 $2,000-4,999

7 $5,000-9,999

8 $10,000 or more

**ETHNICITY\*.** Are you of Hispanic or Latino origin or descent?

[CHECK ONLY ONE]

1 Yes

2 No

**RACE\*.** What is your race?

[CHECK ALL THAT APPLY]

1 White

2 Black or African American

3 Asian

4 Native Hawaiian or Pacific Islander

5 American Indian or Alaskan Native

6 Other (Specify) [FREE TEXT ENTRY]

### Experience with service provider (11 questions)

In this section, we will ask some questions about your experiences with [INSERT SERVICE PROVIDER NAME]. Remember, your responses to these questions are private and your name will not be associated with any responses that you provide.

**SVC\_1\*.** How long have you been coming to [SVC\_PROV] for services?

[CHECK ONLY ONE]

1 This is my first time

2 Less than one month

3 Between one and six months

4 More than six months

**IF SVC\_1 = 2,3,4 THEN SVC\_2:**

**SVC\_2\*.** How often do you meet with someone from [SVC\_PROV] for services?

[CHECK ONLY ONE]

1 Every day

2 Several times a week

3 Several times a month

4 About once a month

5 Several times a year

6 About once a year

**SVC\_3(CSQ8).** Generally, how satisfied are you with the service you have received from [SVC\_PROV]?

[CHECK ONLY ONE]

5 Very satisfied

4 Mostly satisfied

3 Indifferent

2 Mostly dissatisfied

1 Very dissatisfied

**SVC\_4.** How many times would you estimate that someone from [SVC\_PROV] has talked with you about your personal finances?

[CHECK ONLY ONE]

0 Never

1 1 time

2 2 times

3 3 or 4 times

4 5 or more times

**IF SVC\_4 = 0 (Never), THEN SVC\_5:**

**SVC\_5.** How comfortable would you feel talking to someone from [SVC\_PROV] for information, assistance, or resources regarding your personal finances?

[CHECK ONLY ONE]

1 Very comfortable

2 Somewhat comfortable

3 Somewhat uncomfortable

4 Very uncomfortable

**IF SVC\_4 = 1, 2, 3, or 4 (YES) THEN CONTINUE, OTHERWISE GO TO NEXT SECTION (CFPB\_1):**

**SVC\_6.** How comfortable do you feel talking to someone from [SVC\_PROV] for information, assistance, or resources regarding your personal finances?

[CHECK ONLY ONE]

1 Very comfortable

2 Somewhat comfortable

3 Somewhat uncomfortable

4 Very uncomfortable

**SVC\_7.** Has anyone from [SVC\_PROV] used worksheets, tools, or informational sheets to help discuss your personal finances?

[CHECK ONLY ONE]

1 Yes

2 No

**SVC\_8.** Has anyone from [SVC\_PROV] ever used the "Your Money Your Goals" toolkit with you?

[CHECK ONLY ONE]

1 Yes

2 No

**SVC\_9.** Which of the following topics has your caseworker talked about with you?

[CHECK ALL THAT APPLY]

1 Saving and planning ahead

2 Credit and debt

3 Budgeting and managing income and expenses

4 Paying bills

5 Protecting your money, identity, and rights as a consumer

11 Other (Specify) [TEXT ENTRY]

**SVC\_10.** Has anyone from [SVC\_PROV] ever referred you to additional financial support or resources?

[CHECK ONLY ONE]

1 Yes

2 No

**SVC\_11(CSQ8)^.** Generally, how satisfied are you with the support with your personal finances you have received from [SVC\_PROV]?

5 Very satisfied

4 Mostly satisfied

3 Indifferent

2 Mostly dissatisfied

1 Very dissatisfied

### CFPB (1 question)

**CFPB\_1.** Have you heard of the Consumer Financial Protection Bureau, or the CFPB?

[CHECK ONLY ONE]

1 Yes

2 No

### Financial knowledge (4 questions)

Next we will ask a series of questions about financial topics. Please provide the best answer that you can for these questions, and don’t worry if you don’t know the correct answer! We are trying to understand what sorts of knowledge and beliefs individuals have about financial topics, so just do your best in responding to each question based on what you know.

Please indicate whether the following are true, false, or you are not sure.

**KNOW\_1(YMYG)^.** A negative credit history may keep you from getting an apartment or even some jobs.

[CHECK ONLY ONE]

1 True [CORRECT]

2 False

98 Not sure

**KNOW\_2(YMYG).** Making payments late on your bills can make it more difficult to take out a loan.

[CHECK ONLY ONE]

1 True [CORRECT]

2 False

98 Not sure

**KNOW\_3(YMYG).** Your total monthly debt payments could affect your ability to borrow more money.

[CHECK ONLY ONE]

1 True [CORRECT]

2 False

98 Not sure

**KNOW\_4(NSAF 1999).** Workers with low incomes can sometimes get benefits from the government in a tax refund or added to their paycheck. The program is called the Earned Income Tax Credit. Have you heard about the program?

[CHECK ONLY ONE]

1 Yes

2 No

98 Not sure

### Financial confidence (2 questions)

Next, we will ask you questions about how confident you feel dealing with financial matters. How strongly do you agree or disagree with the following statements?

**CONF\_1(NFCS\_M1).** How strongly do you agree or disagree with the following statement? I am good at dealing with day-to-day financial matters, such as checking accounts, credit and debit cards, and tracking expenses.

[CHECK ONLY ONE]

1 Strongly disagree

2 Somewhat disagree

3 Neither agree no disagree

4 Somewhat agree

5 Strongly agree

**CONF\_2(NFCS\_M4).** On a scale from 1 to 7, where 1 means very low and 7 means very high, how would you assess your overall financial knowledge?

[CHECK ONLY ONE]

1 Very low

2

3

4

5

6

7 Very high

### Financial behavior (10 question equivalents)

Next, we will ask you questions about your behavior for financial matters.

**BEHAV\_1(NFCS\_J31)^.** [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: Does your household have a budget? A household budget is used to decide what share of your household income will be used for spending, saving or paying bills.]

[IF LIV\_1a(NFCS\_A7a) = 2 INSERT: Do you have a budget? A budget is used to decide what share of your income will be used for spending, saving or paying bills.]

[CHECK ONLY ONE]

1 Yes

2 No

**BEHAV\_2(SHED)^. S**uppose that you have an emergency expenses that costs $400. Based on your current financial situation, how would you pay for this expense? [RESPONSE OPTIONS PRESENTED FOR EACH STATEMENT, BEHAV\_2a THROUGH BEHAV\_8i]

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| **BEHAV\_2a.** Put it on my credit card and pay it off in full at the next statement | 1 | 2 |
| **BEHAV\_2b.** Put it on my credit card and pay it off over time | 1 | 2 |
| **BEHAV\_2c.** With the money currently in my checking/savings account or with cash | 1 | 2 |
| **BEHAV\_2d.** Using money from a bank loan or line of credit | 1 | 2 |
| **BEHAV\_2e.** By borrowing from a friend or family member | 1 | 2 |
| **BEHAV\_2f.** Using a payday loan, deposit advance, or overdraft | 1 | 2 |
| **BEHAV\_2g.** By selling something | 1 | 2 |
| **BEHAV\_2h.** I wouldn't be able to pay for the expense right now | 1 | 2 |
| **BEHAV\_2i.** Other (please specify): | 1 | 2 |

**BEHAV\_3(NFCS\_B1).** Which of the following types of accounts [IF LIV\_1a(NFCS\_A7a) = 2 INSERT: Do you] [IF LIV\_1a(NFCS\_A7a) = 1 INSERT: Does your household] have? [Select all that apply]

1 A checking account

2 A savings account

3 A money market account

4 A prepaid card

5 A mobile account (such as Venmo, Paypal, the Cashapp)

**BEHAV\_4(SHED).** Do you have at least one credit card? Please include store credit cards but NOT debit cards. (A debit card is a card where the money comes directly out of your bank account, instead of sending you a bill later.)

[CHECK ONLY ONE]

1 Yes

2 No

**BEHAV\_5^.** In the past 3 months, were you charged a late fee on a loan or bill?

[CHECK ONLY ONE]

1 Yes

2 No

**BEHAV\_6(NFCS\_J32).** How would you rate your current credit record?

[CHECK ONLY ONE]

1 Very bad

2 Bad

3 About average

4 Good

5 Very good

**BEHAV\_7(YMYG)^.** Have you requested and reviewed your credit report in the past three months?

[CHECK ONLY ONE]

1 Yes

2 No

**BEHAV\_8(NFCS\_G25)^.** In the past 3 months, have you… [RESPONSE OPTIONS PRESENTED FOR EACH STATEMENT, BEHAV\_8a THROUGH BEHAV\_8e]

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| **BEHAV\_8a.** Taken out an auto title loan? Auto title loans are loans where a car title is used to borrow money for a short period of time. They are NOT loans used to *purchase* an automobile. | 1 | 2 |
| **BEHAV\_8b.** Taken out a short term “payday” loan? | 1 | 2 |
| **BEHAV\_8c.** Used a pawn shop? | 1 | 2 |
| **BEHAV\_8d.** Used a rent-to-own store? | 1 | 2 |
| **BEHAV\_8e(YMYG)^.** Used a check cashing business? | 1 | 2 |

### Financial well-being (5 questions)

Finally, we will ask you questions about your overall financial situation.

**WELL\_1(CFPB).** Because of my money situation, I feel like I will never have the things I want in life.

[CHECK ONLY ONE]

1 Not at all

2 Very little

3 Somewhat

4 Very well

5 Completely

**WELL\_2(CFPB).** I am just getting by financially.

[CHECK ONLY ONE]

1 Not at all

2 Very little

3 Somewhat

4 Very well

5 Completely

**WELL\_3(CFPB).** I am concerned that the money I have or will save won’t last.

[CHECK ONLY ONE]

1 Not at all

2 Very little

3 Somewhat

4 Very well

5 Completely

**WELL\_4(CFPB).** I have money left over at the end of the month.

[CHECK ONLY ONE]

1 Not at all

2 Very little

3 Somewhat

4 Very well

5 Completely

**WELL\_5(CFPB).** My finances control my life.

[CHECK ONLY ONE]

1 Not at all

2 Very little

3 Somewhat

4 Very well

5 Completely

### Goal Setting (7 questions)

Next we’d like to ask you some questions about financial goals.

**GOAL\_1.** Is there a specific financial goal that you are working towards?

1 Yes

2 No

IF **GOAL\_1**= 2 THEN END, if IF **GOAL\_1**= 1 THEN Continue

**GOAL\_2.** What are three financial goals that you have for you and/or your family? If you have more than 3 list the 3 most important to you. [if we provide a list, follow up with *check up to three options*]

**GOAL\_3.** Of these goals, which is most important to you?

Going forward we’d like you to think about this most important goal. For the following questions we’d like to know how much you agree or disagree with each statement.

**GOAL\_4.** I have developed a plan to make progress toward my goal.

1 Strongly disagree

2 Somewhat disagree

3 Neither agree nor disagree

4 Somewhat agree

5 Strongly agree

**GOAL\_5.** I feel confident in my ability to attain my goal.

1 Strongly disagree

2 Somewhat disagree

3 Neither agree nor disagree

4 Somewhat agree

5 Strongly agree

**GOAL\_6.**How much progress have you made toward your goal?

* 1. A lot, some, a little, none (these seem to be the response categories from Urban)

**GOAL\_7.** How long do you think it will take you to achieve this goal?

1 Less than 3 months

2 3-6 months

3 6-12 months

4 1-3 years

5 3-5 years

6 More than 5 years

7 I will always be working towards this goal