

# United States Mint

## *Quarterly Product Fulfillment Research*

*FY19 Questionnaire*

OMB Control #1525-0012

Note to reader: Bold lines in between questions signify page/screen breaks.

Welcome to the United States Mint's product satisfaction survey.

This survey is designed to help the United States Mint understand how it can improve the products and services it provides. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 1525-0012. **Your participation in this survey is ENTIRELY VOLUNTARY and should require approximately 10-15 minutes of your time.**

It is NAXION's policy to keep interviews anonymous. Consistent with this policy, NAXION will entrust other entities with respondent-identified survey data only when: 1) the participant gives explicit permission to release this data, or 2) the data is shared with an entity who agrees in writing that the data will be held strictly adequately protected and that the data will be used for research purposes only, or 3) the release of this data is required by law.

You will not be contacted for sales purposes as a result of participating in this survey.

For further information on NAXION's privacy policy, you can view our website at [www.naxionthinking.com/privacy-policy/naxion-research-participant-privacy-notice](http://www.naxionthinking.com/privacy-policy/naxion-research-participant-privacy-notice).

If you have any questions or problems while completing the survey, please call Nick Diana weekdays from 9:00 AM to 5:00 PM EDT at 1-800-342-9102, or send an e-mail to [PFQuestions@naxionthinking.com](mailto:PFQuestions@naxionthinking.com)

Please click the Forward button to begin the survey.

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To begin, we will first take a few minutes to familiarize you with our survey.

You will need to MAXIMIZE YOUR SCREEN in order to view the contents of the windows more easily (click the box in the upper right-hand corner of your screen).

The survey will NOT ALLOW YOU TO SKIP A QUESTION. If you do not know an exact answer, then please give your best estimate.

You may click on the STOP button to pause the program to take a break. When you re-enter the survey you must use the link provided; the survey will return to the screen where you clicked Stop.

Please click the FORWARD button to begin.

**SCREENING CRITERIA**

S1 Have you received a product shipment from the United States Mint in the past 30 days?

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

*Send to terminate screen if "No."*

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**SATISFACTION**

For this survey, please think about the **most recent order that you received** from the United States Mint. (Do not think about an order that you have placed but have not yet received.)

Q1 First, please indicate which items were included in this most recent order.

*Please select all that apply*

| [DO NOT SHOW THIS COLUMN] | Items included in this most recent order<br>- Please select all that apply -               |                                 |
|---------------------------|--|---------------------------------|
|                           | <b>Annual Coin Sets</b>  |                                 |
|                           | Annual <b>Clad</b> Proof Sets (Full set, Quarters[, <b>American Innovation \$1 Coin</b> ]) |                                 |
| 2                         | Full set   | <input type="checkbox"/>        |
| 3                         | Quarters set   | <input type="checkbox"/>        |
| <b>[23]</b>               | <b>American Innovation \$1 Coin set</b>  | <b><input type="checkbox"/></b> |
|                           | Annual <b>Silver Proof</b> Sets (Full set, Quarters)                                       |                                 |
| 4                         | Full set   | <input type="checkbox"/>        |
| 5                         | Quarters set   | <input type="checkbox"/>        |
|                           | Annual <b>Uncirculated</b> P & D Sets (Full set[, <b>American Innovation \$1 Coin</b> ])   |                                 |
| 6                         | Full set   | <input type="checkbox"/>        |
| <b>[24]</b>               | <b>American Innovation \$1 Coin set</b>  | <b><input type="checkbox"/></b> |
| <b>[25]</b>               | <b>Annual Reverse Proof American Innovation \$1 Coin</b>                                   | <b><input type="checkbox"/></b> |
|                           | <b>American Eagle Coins</b>  |                                 |
| 7                         | American Eagle <b>Silver</b> Coins   | <input type="checkbox"/>        |
| 8                         | American Eagle <b>Gold</b> Coins   | <input type="checkbox"/>        |
| 14                        | American Eagle <b>Platinum</b> Coins   | <input type="checkbox"/>        |
|                           | <b>American Buffalo Coins</b>  |                                 |
| 9                         | American Buffalo 24K Gold Coins  | <input type="checkbox"/>        |
|                           | <b>Commemorative Coins</b>   |                                 |
| 11                        | Gold, Silver, or Clad Commemorative Coins  | <input type="checkbox"/>        |
| 12                        | Special Commemorative Coin Sets  | <input type="checkbox"/>        |
|                           | <b>Medals</b>  |                                 |
|                           | <b>Bronze</b> Medals   |                                 |
| 15                        | Bronze Medals <b>Size 3"</b>   | <input type="checkbox"/>        |
| 16                        | Bronze Medals <b>Size 1 1/2"</b>   | <input type="checkbox"/>        |
| 17                        | Bronze Medals <b>Size 1 5/16"</b>  | <input type="checkbox"/>        |

|     |  |                          |
|-----|--|--------------------------|
|     | <b>Silver</b> Medals Size 1 1/2"                                     |                          |
| 21  | <b>Presidential</b> Silver Medals                                    | <input type="checkbox"/> |
| 22  | Other Silver Medals/Sets   | <input type="checkbox"/> |
|     | <b>Bagged, Rolled, and Boxed Coins</b>                               |                          |
| 26  | Native American \$1 Coins  | <input type="checkbox"/> |
| [27 | <b>American Innovation \$1 Coins</b>                                 | <input type="checkbox"/> |
| 28  | Other Bagged, Rolled, and Boxed coins                                | <input type="checkbox"/> |
|     | <b>Other Coins and Merchandise</b>                                   |                          |
| 18  | America the Beautiful Uncirculated Five Ounce Silver Coin            | <input type="checkbox"/> |
| 20  | Gift Sets (i.e., Birth Set, Congratulations Set, Happy Birthday Set) | <input type="checkbox"/> |
| 29  | Native American Coin and Currency Set                                | <input type="checkbox"/> |
| 13  | Other United States Mint Products                                    | <input type="checkbox"/> |

Q31a In the previous question, you stated that the most recent order you received contained Presidential Silver Medals. **Which Presidential Silver Medal(s) did you purchase?**

*Please select all that apply*

|   |  | Purchased                |
|---|--|--------------------------|
| 1 | <b>George Washington</b> Presidential Silver Medal | <input type="checkbox"/> |
| 2 | <b>John Adams</b> Presidential Silver Medal        | <input type="checkbox"/> |
| 3 | <b>Thomas Jefferson</b> Presidential Silver Medal  | <input type="checkbox"/> |
| 4 | <b>James Madison</b> Presidential Silver Medal     | <input type="checkbox"/> |
| 5 | <b>James Monroe</b> Presidential Silver Medal      | <input type="checkbox"/> |

**PROGRAMMING:** Ask only if Q1 Row 21 is checked. Otherwise, skip to Q2A

Q31b In the upcoming months/years, would you be **likely to purchase** any **additional** Presidential Silver Medals?

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

**PROGRAMMING:** Ask only if Q1 Row 21 is checked. Otherwise, skip to Q2A

Q31c For which President(s) would you be **likely to purchase** any additional Presidential Silver Medals?

*Please select all that apply*

|    |  | Likely to Purchase       |
|----|--|--------------------------|
| 1  | George Washington                                  | <input type="checkbox"/> |
| 2  | John Adams   | <input type="checkbox"/> |
| 3  | Thomas Jefferson                                   | <input type="checkbox"/> |
| 4  | James Madison                                      | <input type="checkbox"/> |
| 5  | James Monroe                                       | <input type="checkbox"/> |
| 6  | John Quincy Adams                                  | <input type="checkbox"/> |
| 7  | Andrew Jackson                                     | <input type="checkbox"/> |
| 8  | Martin Van Buren                                   | <input type="checkbox"/> |
| 9  | William Henry Harrison                             | <input type="checkbox"/> |
| 10 | John Tyler   | <input type="checkbox"/> |
| 11 | Other President(s) <i>Please specify:</i><br>----- | <input type="checkbox"/> |

**PROGRAMMING:**

- Ask only if "YES" is selected for Q31B. Otherwise, skip to Q2A
- Hide...
  - o Row 1 if Q31A Row 1 is checked
  - o Row 2 if Q31A Row 2 is checked
  - o Row 3 if Q31A Row 3 is checked
  - o Row 4 if Q31A Row 4 is checked
  - o Row 5 if Q31A Row 5 is checked

Q2a [IF MORE THAN 1 ITEM CHECKED IN Q1, INSERT “First think about your order **overall**. (We’ll ask about the individual items in your order a little later.)”] Please rate your satisfaction with the following aspects of this order, using a scale of 1 to 6, where “1” means “extremely dissatisfied” and “6” means “extremely satisfied.”

| [DO NOT SHOW THIS COLUMN] |  | Extremely Dissatisfied |   |   |   |   |   | Extremely Satisfied |
|---------------------------|--|------------------------|---|---|---|---|---|---------------------|
|                           |  | 1                      | 2 | 3 | 4 | 5 | 6 |                     |
| 1                         | Overall satisfaction with your order   | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 2                         | Quality of the coins/medals/items  | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 3                         | Quality of finished-product packaging components as produced by the United States Mint <ul style="list-style-type: none"> <li>- blister/capsule/lens,</li> <li>- product roll, bag, box/carton or sleeve,</li> <li>- certificate of authenticity,</li> <li>- informational booklet,</li> <li>- graphics/artwork,</li> <li>- display platform/pillow</li> </ul> | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 4                         | External shipping package  | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 5                         | Timeliness/speed of receiving the order  | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 6                         | Security of the delivery method  | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 7                         | Packing material   | 0                      | 0 | 0 | 0 | 0 | 0 |                     |
| 8                         | Packing slip   | 0                      | 0 | 0 | 0 | 0 | 0 |                     |



Q2b We'd like to understand more about the relative value you place on each of these aspects of your order.

Please distribute 100 "importance points" across the options below to indicate how important each would be to you. You can give each option as many, or as few importance points as you like – as long as the total sums to 100. If you do not think an item is important at all, give that item "0" points.

| [DO NOT SHOW THIS COLUMN] |  | # of importance points |
|---------------------------|--|------------------------|
| 1                         | Quality of the coins/medals/items  | _____                  |
| 2                         | Quality of finished-product packaging components as produced by the United States Mint <ul style="list-style-type: none"> <li>- blister/capsule/lens,</li> <li>- product roll, bag, box/carton or sleeve,</li> <li>- certificate of authenticity,</li> <li>- informational booklet,</li> <li>- graphics/artwork,</li> <li>- display platform/pillow</li> </ul> | _____                  |
| 3                         | External shipping package  | _____                  |
| 4                         | Timeliness/speed of receiving the order  | _____                  |
| 5                         | Security of the delivery method  | _____                  |
| 6                         | Packing material   | _____                  |
| 7                         | Packing slip   | _____                  |
|                           |  | <b>MUST SUM TO 100</b> |

Q2e Earlier you rated your satisfaction with the quality of the coins/medals/items a [insert rating from Q2a2]. Why are you not fully satisfied with the quality of the coins/medals/items?

*Please select all that apply*

| [DO NOT SHOW THIS COLUMN] |  |                          |
|---------------------------|--|--------------------------|
| 1                         | Coin/Medal Orientation / Alignment                 | <input type="checkbox"/> |
| 2                         | Coin/Medal Unseated (not properly seated in place) | <input type="checkbox"/> |
| 3                         | Coin/Medal Missing                                 | <input type="checkbox"/> |
| 4                         | Shiny Spots  | <input type="checkbox"/> |
| 5                         | Water Spots  | <input type="checkbox"/> |
| 6                         | White Spots  | <input type="checkbox"/> |
| 7                         | Brown Spots  | <input type="checkbox"/> |
| 8                         | Missing or Minimal Detail in Letters               | <input type="checkbox"/> |
| 9                         | Missing or Minimal Detail in Design of Coin/Medal  | <input type="checkbox"/> |
| 10                        | Border Damage (to the coin rim/edge)               | <input type="checkbox"/> |
| 11                        | Nick/Ding/Scratches/Gouge                          | <input type="checkbox"/> |
| 12                        | Hazy, Oily, Dirty, or Tarnished                    | <input type="checkbox"/> |
| 13                        | Fingerprint  | <input type="checkbox"/> |
| 14                        | Other (Please Specify): _____                      | <input type="checkbox"/> |
| 15                        | None of the Above                                  | <input type="checkbox"/> |

**PROGRAMMING:**

- Only ask if Q2a row 2 (satisfaction rating on Quality of Coins/Medals/Items) is <6.
- Randomize order of rows, keeping in mind the following:
  - o Group Rows 1-3
  - o Group Rows 4-7
  - o Group Rows 8-9
  - o Group Rows 10-11
  - o "Other (Please Specify)" and "None of the Above" should always be shown last

Q2j Please use the space below for any additional feedback on the quality of the coins/medals/items.

*Please provide comments only on the actual product; do not include comments related to the external shipping package, packing material, handling or product security.*

**PROGRAMMING: Only ask if Q2e is asked; Do not force entry. Ask for confirmation if open-end is blank.**

Q2f Earlier, you rated your satisfaction with the quality of the finished-product packaging components a [insert rating from Q2a row 3]. Which of the following factored into your decision regarding the quality of the finished-product packaging components?

*Please select all that apply*

| [DO NOT SHOW THIS COLUMN] |  |                          |
|---------------------------|--|--------------------------|
|                           | <b>Plastic Protective Enclosure</b>  |                          |
| 1                         | Blister (example product: Uncirculated Set)<br><i>Pre-formed with a pocket for the item, usually built into a set</i>                        | <input type="checkbox"/> |
| 2                         | Capsule (example product: American Eagle Silver 1oz. Proof)<br><i>Encloses individual item and allows removal and viewing from all sides</i> | <input type="checkbox"/> |
| 3                         | Lens (example product: Proof Set)<br><i>Rectangular case that houses multiple items</i>  | <input type="checkbox"/> |
|                           | <b>Additional Components</b>   |                          |
| 4                         | Product Roll, Bag, Box/Carton or Sleeve  | <input type="checkbox"/> |
| 5                         | Certificate of Authenticity  | <input type="checkbox"/> |
| 6                         | Informational Booklet  | <input type="checkbox"/> |
| 7                         | Graphics/Artwork   | <input type="checkbox"/> |
| 8                         | Display Platform/Pillow  | <input type="checkbox"/> |
| 9                         | Other (Please Specify): _____  | <input type="checkbox"/> |

**PROGRAMMING:**

- Only ask if Q2a row 3 (satisfaction rating on Quality of finished-product packaging components) is <6.
- Randomize rows 4-8

Q2g In the previous question, you stated that the [INSERT Q2f ROWS 1-3 SELECTION(S) SEPARATED BY COMMAS IF MORE THAN TWO SELECTIONS AND INSERT THE WORD

**“and” BEFORE THE FINAL SELECTION IF MORE THAN ONE SELECTION]** factored into your decision regarding the quality of the finished-product packaging components. Please select the **[INSERT Q2f ROWS 1-3 SELECTION(S) SEPARATED BY COMMAS IF MORE THAN TWO SELECTIONS AND INSERT THE WORD “and” BEFORE THE FINAL SELECTION IF MORE THAN ONE SELECTION]** defects that affected the quality of the finished-product packaging components.

*Please select all that apply*

| [DO NOT SHOW THIS COLUMN] |                                     |                          |
|---------------------------|-------------------------------------|--------------------------|
|                           | <b>Blister:</b>                     |                          |
| 1                         | Scratched                           | <input type="checkbox"/> |
| 2                         | Cracked, Gash, or Chipped           | <input type="checkbox"/> |
| 3                         | Marks or Blemishes                  | <input type="checkbox"/> |
| 4                         | Fingerprints                        | <input type="checkbox"/> |
| 5                         | Unsealed                            | <input type="checkbox"/> |
| 6                         | Debris                              | <input type="checkbox"/> |
| 7                         | Missing, Misaligned, or Loose Coins | <input type="checkbox"/> |
| 8                         | Moisture-like Appearance            | <input type="checkbox"/> |
| 9                         | Other (Please Specify): _____       | <input type="checkbox"/> |
|                           | <b>Capsule:</b>                     |                          |
| 10                        | Scratched                           | <input type="checkbox"/> |
| 11                        | Cracked, Gash, or Chipped           | <input type="checkbox"/> |
| 12                        | Marks or Blemishes                  | <input type="checkbox"/> |
| 13                        | Fingerprints                        | <input type="checkbox"/> |
| 14                        | Unsealed                            | <input type="checkbox"/> |
| 15                        | Debris                              | <input type="checkbox"/> |
| 16                        | Missing, Misaligned, or Loose Coins | <input type="checkbox"/> |
| 17                        | Moisture-like Appearance            | <input type="checkbox"/> |
| 18                        | Other (Please Specify): _____       | <input type="checkbox"/> |
|                           | <b>Lens:</b>                        |                          |
| 19                        | Scratched                           | <input type="checkbox"/> |
| 20                        | Cracked, Gash, or Chipped           | <input type="checkbox"/> |
| 21                        | Marks or Blemishes                  | <input type="checkbox"/> |
| 22                        | Fingerprints                        | <input type="checkbox"/> |
| 23                        | Unsealed                            | <input type="checkbox"/> |
| 24                        | Debris                              | <input type="checkbox"/> |
| 25                        | Missing, Misaligned, or Loose Coins | <input type="checkbox"/> |
| 26                        | Moisture-like Appearance            | <input type="checkbox"/> |
| 27                        | Other (Please Specify): _____       | <input type="checkbox"/> |

**PROGRAMMING:**

- *Only ask if any of Q2f's Rows 1-3 are selected.*
  - o *Only display "Blister" rows if Q2f row 1 selected.*
  - o *Only display "Capsule" rows if Q2f row 2 selected.*
  - o *Only display "Lens" rows if Q2f row 3 selected.*
- *Randomize order of rows within each category of "Blister," "Capsule," or "Lens."*
  - o *Maintain this order for all categories shown*
  - o *"Other (Please Specify)" should always be shown last in a category*

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Q2h Earlier, you stated that [INSERT Q2f ROWS 4-8 SELECTION(S) SEPARATED BY COMMAS  
IF MORE THAN TWO SELECTIONS AND INSERT THE WORD "and" BEFORE THE FINAL

**SELECTION IF MORE THAN ONE SELECTION]** factored into your decision regarding the quality of the finished-product packaging components. Please select the **[INSERT Q2f ROWS 4-8 SELECTION(S) SEPARATED BY COMMAS IF MORE THAN TWO SELECTIONS AND INSERT THE WORD “and” BEFORE THE FINAL SELECTION IF MORE THAN ONE SELECTION]** defects that affected the quality of the finished-product packaging components.

*Please select all that apply*

|                                  |  |                          |
|----------------------------------|--|--------------------------|
| <b>[DO NOT SHOW THIS COLUMN]</b> |  |                          |
|                                  | <b>Product Roll, Bag, Box/Carton or Sleeve</b>                     |                          |
| 1                                | Damaged  | <input type="checkbox"/> |
| 2                                | Inconsistent Flow of Ink Color                                     | <input type="checkbox"/> |
| 3                                | Improper Folding of Paper Product                                  | <input type="checkbox"/> |
| 4                                | Other (Please Specify): _____                                      | <input type="checkbox"/> |
|                                  | <b>Certificate of Authenticity</b>                                 |                          |
| 5                                | Damaged  | <input type="checkbox"/> |
| 6                                | Incorrect  | <input type="checkbox"/> |
| 7                                | Missing  | <input type="checkbox"/> |
| 8                                | Other (Please Specify): _____                                      | <input type="checkbox"/> |
|                                  | <b>Informational Booklet</b>                                       |                          |
| 9                                | Damaged  | <input type="checkbox"/> |
| 10                               | Incorrect  | <input type="checkbox"/> |
| 11                               | Missing  | <input type="checkbox"/> |
| 12                               | Other (Please Specify): _____                                      | <input type="checkbox"/> |
|                                  | <b>Graphics/Artwork of Product Roll, Bag, Box/Carton or Sleeve</b> |                          |
| 13                               | Unappealing  | <input type="checkbox"/> |
| 14                               | Other (Please Specify): _____                                      | <input type="checkbox"/> |
|                                  | <b>Display Platform/Pillow</b>                                     |                          |
| 15                               | Damaged  | <input type="checkbox"/> |
| 16                               | Other (Please Specify): _____                                      | <input type="checkbox"/> |

**PROGRAMMING:**

- Only ask if any of Q2f’s Rows 4-8 are selected.
- Only display “Product Roll, Bag, Box/Carton or Sleeve” rows if Q2f row 4 selected.
- Only display “Certificate of Authenticity” rows if Q2f row 5 selected.
- Only display “Informational Booklet” rows if Q2f row 6 selected.
- Only display “Graphics/Artwork of Product Roll, Bag, Box/Carton or Sleeve” rows if Q2f row 7 selected.
- Only display “Display Platform/Pillow” rows if Q2f row 8 selected.
- Randomize order of categories (in bold) (use same order of randomization in Q2f) – ex: Product Roll, Bag, Box/Carton or Sleeve and Rows 1-4 may be shown last, while Display

**Platform/Pillow and Rows 15-16 may be shown first. These categories and their subordinate rows should be kept together.**

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Q2k Please use the space below for any additional feedback on the quality of the finished-product packaging components.

*Please provide comments only on the finished-product packaging components; do not include comments related to the external shipping package, packing material, handling or product security.*

**PROGRAMMING: Only ask if Q2f is asked; Do not force entry. Ask for confirmation if open-end is blank.**

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Q2l Earlier, you rated your satisfaction with the external shipping package a [INSERT RATING FROM Q2A ROW 4]. Why are you not fully satisfied with the external shipping package?

**PROGRAMMING: Only ask if Q2a Row 4 (satisfaction rating on external shipping package) is <6; Do not force entry. Ask for confirmation if open-end is blank.**

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Q3. Earlier, you rated your satisfaction with the [ITEM BEING ASKED ABOUT FROM Q2A] a [INSERT RATING FROM Q2A]. Why are you not fully satisfied with the [ITEM BEING ASKED ABOUT FROM Q2A]?

*[If a respondent was already asked Q2j, Q2k, and Q2l, do not ask Q3.]*

*If a respondent was asked two of the three (Q2j, Q2k, or Q2l), randomly select one row that is a "1" or a "2" (Rows 5-8) from Q2a to ask about in Q3 that's not rows 1-4.*

*If a respondent was only asked one of the three (Q2j, Q2k, or Q2l) randomly select two rows that are a "1" or a "2" (Rows 5-8) from Q2a to ask about in Q3 that are not rows 1-4.*

*If a customer was not asked any of the three (Q2j, Q2k, or Q2l), and has 2 rows, excluding rows 1-4, that are a "1" or "2," then ask Q3 for both. If a customer has 3+ rows, excluding rows 1-4, that are a "1" or "2" then randomly select 3 of these rows to ask for Q3.*

*Skip Q3 if they answered 3 or higher for all other rows, that are not rows 1-4, in Q2a.]*

**Programming:**

- **Do not force entry. Ask for confirmation if open-end is blank.**



Q3b (Skip if they answered 6 for Quality of the coins/medals/items in Q2a row 2)

Would you say that the reason you were not fully satisfied with the **quality of the coins/medals/items** was due to...

*Please select all that apply*

|   |                          |
|---|--------------------------|
| Production by the United States Mint  | <input type="checkbox"/> |
| Issues that occurred while the coins/medals/items were in transit (i.e., shipping problems) | <input type="checkbox"/> |
| Insufficient/inadequate external shipping package and/or packing material                   | <input type="checkbox"/> |
| Not sure  | <input type="radio"/>    |

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Q3c (Skip if they answered 6 for Quality of the finished-product packaging components in Q2a row 3)

Would you say that the reason you were not fully satisfied with the **quality of the finished-product packaging components** (e.g., blister/capsule/lens, product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow) was due to...

*Please select all that apply*

|   |                          |
|---|--------------------------|
| Production by the United States Mint  | <input type="checkbox"/> |
| Issues that occurred while the coins/medals/items were in transit (i.e., shipping problems) | <input type="checkbox"/> |
| Insufficient/inadequate external shipping package and/or packing material                   | <input type="checkbox"/> |
| Not sure  | <input type="radio"/>    |

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If only 1 row checked in Q1, skip Q4 and Q4b

Q4 Now please rate your **satisfaction with each of the individual types of items** you received in your order.

|   | Extremely Dissatisfied |          |          |          |          | Extremely Satisfied |
|---|------------------------|----------|----------|----------|----------|---------------------|
|   | 1                      | 2        | 3        | 4        | 5        | 6                   |
| <b>INSERT ITEM #1 FROM Q1</b>   |                        |          |          |          |          |                     |
| Quality of the coins/medals/items   | 0                      | 0        | 0        | 0        | 0        | 0                   |
| Quality of the finished-product packaging components (e.g., blister/capsule/lens, product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow) | 0                      | 0        | 0        | 0        | 0        | 0                   |
| <b>INSERT ITEM #2 FROM Q1</b>   | <b>1</b>               | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> | <b>6</b>            |
| Quality of the coins/medals/items   | 0                      | 0        | 0        | 0        | 0        | 0                   |
| Quality of the finished-product packaging components (e.g., blister/capsule/lens, product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow) | 0                      | 0        | 0        | 0        | 0        | 0                   |
| <b>ETC. [SHOW FOR EACH ITEM SELECTED IN Q1]</b>   | <b>1</b>               | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> | <b>6</b>            |
| Quality of the coins/medals/items   | 0                      | 0        | 0        | 0        | 0        | 0                   |
| Quality of the finished-product packaging components (e.g., blister/capsule/lens, product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow) | 0                      | 0        | 0        | 0        | 0        | 0                   |

Q4b In the previous question, you rated your satisfaction with the quality of the [INSERT PRODUCT NAME]:

- a [INSERT RATING FROM Q4 ON "Quality of the coins/medals/items"] and
- a [INSERT RATING FROM Q4 ON "Quality of the finished-product packaging components (e.g., blister/capsule/lens, product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow)"]].

Why are you not fully satisfied with the quality of the [INSERT PRODUCT NAME]?

**PROGRAMMING:**

- Ask Q4b for each specific product that is rated <6 on either quality of the coins/medals/items OR quality of the finished-product packaging components in Q4. If more than 3 products are rated <6 on either quality of the coins/medals/items or quality of the finished-product packaging components, cap the number of products asked about in Q4b at 3, showing the products that so far have been asked about least.
  - Only show bullet with Rating from Q4 if <6. So, if "Quality of the coins/medals/items" is 6 and "Quality of the finished-product packaging components..." is 3, only display bullet for "Quality of the finished-product packaging components..." If the reverse is true ("Quality of coins/medals items" is 3 and "Quality of the finished-product packaging components..." is 6), do the same AND remove the word "and" at the end of the first bullet.
  - Cap the number of Open Ends that a respondent sees for Q4b at 3. If multiple to be asked, show each open-end on a different screen.
  - Do not force entry. Ask for confirmation if open-end is blank.
- 

Q29a On a scale of 1-6, how satisfied or dissatisfied are you with the **plastic protective enclosure** (blister, capsule, or lens) around the coins/medals/items.

| Extremely Dissatisfied |   |   |   |   | Extremely Satisfied |  | N/A |
|------------------------|---|---|---|---|---------------------|--|-----|
| 1                      | 2 | 3 | 4 | 5 | 6                   |  |     |
| 0                      | 0 | 0 | 0 | 0 | 0                   |  | 0   |

**PROGRAMMING:** If respondent selects "N/A," skip Q29b and Q29c.

Q29b Considering the cost of the products you purchased, do you find that the **plastic protective enclosure** (blister, capsule, or lens) provides an appropriate level of protection for the coins/medals/items against wear and the elements?

|     |   |
|-----|---|
| Yes | 0 |
| No  | 0 |

**PROGRAMMING:** Only ask if rating given for Q29a.

Q29c Please use the space below to provide additional feedback about the **plastic protective enclosure** (blister, capsule, or lens).

**PROGRAMMING:**

- Only ask if rating given for Q29a.
- Do not force entry. Ask for confirmation if open-end is blank.

Q30a On a scale of 1-6, how satisfied or dissatisfied are you with the **additional components** packaged with the coins/medals/items (e.g., product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow).

| Extremely Dissatisfied |   |   |   |   | Extremely Satisfied |  |
|------------------------|---|---|---|---|---------------------|--|
| 1                      | 2 | 3 | 4 | 5 | 6                   |  |
| 0                      | 0 | 0 | 0 | 0 | 0                   |  |

Q30b Considering the cost of the products you purchased, do you find the **additional components** (e.g., product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow) to be an appropriate value?

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

Q30c Please use the space below to provide feedback about the **additional components** (e.g., product roll, bag, box/carton or sleeve, certificate of authenticity, informational booklet, graphics/artwork, display platform/pillow).

**PROGRAMMING: Do not force entry. Ask for confirmation if open-end is blank.**

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Q52. Was this the first order you ever placed with the United States Mint?

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

Q7 Was this **most recent order** delivered **within the time frame you expected when you placed the order?**

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

*[If Q7= Yes, skip to Q11]*

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Q8 Were you informed that there would be a delay in receiving the order **after you placed your order?**

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

*[If Q8 = No, skip to Q11]*

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Q9 Were you given a **new estimated timeframe for expecting the order** when you were notified of the delay?

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

*[If Q9 = No, skip to Q11]*

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Q10 Was the order delivered **within the new expected time frame that you were told?**

|     |                       |
|-----|-----------------------|
| Yes | <input type="radio"/> |
| No  | <input type="radio"/> |

Q11 Prior to receiving this order, did you receive a **notification from the United States Mint informing you that this order had shipped?**

|           | Yes                   | No                    |
|-----------|-----------------------|-----------------------|
| By E-mail | <input type="radio"/> | <input type="radio"/> |
| By Phone  | <input type="radio"/> | <input type="radio"/> |

Q13 Please explain in detail any other issues you experienced with the fulfillment of your order.

**PROGRAMMING: Do not force entry. Ask for confirmation if open-end is blank.**

Q14 Now, please rate your satisfaction with these United States Mint product and service areas.

|                                  | Extremely Dissatisfied |   |   |   |   | Extremely Satisfied |
|----------------------------------|------------------------|---|---|---|---|---------------------|
|                                  | 1                      | 2 | 3 | 4 | 5 | 6                   |
| Breadth of product types offered | 0                      | 0 | 0 | 0 | 0 | 0                   |
| Product availability / access    | 0                      | 0 | 0 | 0 | 0 | 0                   |
| Communications overall           | 0                      | 0 | 0 | 0 | 0 | 0                   |
| Overall customer service         | 0                      | 0 | 0 | 0 | 0 | 0                   |

Q35. How likely are you to recommend United States Mint collectible products to someone else?

|   | Not At All Likely |   |   |   |   |   |   |   | Extremely Likely |    |
|---|-------------------|---|---|---|---|---|---|---|------------------|----|
|   | 1                 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9                | 10 |
| Likelihood to recommend to someone else | 0                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                | 0  |

Q35b. Please tell us your reasons for giving this rating.

**PROGRAMMING: Do not force entry. Ask for confirmation if open-end is blank.**

### FUTURE PURCHASING BEHAVIOR

Next, we'd like to understand what types of purchases, if any, you expect to make from the United States Mint in the future.

Q18 How likely are you to purchase products directly from the United States Mint in the next 12 months?

|   | Not At All Likely |   |   |   |   | Extremely Likely |
|---|-------------------|---|---|---|---|------------------|
|   | 1                 | 2 | 3 | 4 | 5 | 6                |
| Likelihood to purchase products directly from the United States Mint in the <u>next 12 months</u> | 0                 | 0 | 0 | 0 | 0 | 0                |

Q19 Are you more likely to purchase products directly from the United States Mint in the next 12 months...?

|                                 |                       |
|---------------------------------|-----------------------|
| For yourself                    | <input type="radio"/> |
| As a gift                       | <input type="radio"/> |
| Both for yourself and as a gift | <input type="radio"/> |

**PROGRAMMING: Only ask if Q18 is greater than or equal to 2 (or, do not ask if Q18 = 1)**

Q20 You rated your likelihood to purchase products directly from the United States Mint in the next 12 months a [INSERT RATING FROM Q18]. Why did you provide this rating?

**PROGRAMMING: Only ask if Q18 is less than or equal to 3; Do not force entry. Ask for confirmation if open-end is blank.**

Q16 Based on what you know today, over the next 12 months would you say you are most likely to...?

*Please select one.*



| Future Purchasing with the United States Mint <i>(Next 12 Months)</i>                        |                       |
|--|-----------------------|
| 1. <b><u>Increase</u></b> the amount of merchandise you purchase from the United States Mint | <input type="radio"/> |
| 2. <b><i>Purchase about the same amount</i></b> from the United States Mint                  | <input type="radio"/> |
| 3. <b><u>Decrease</u></b> the amount of merchandise you purchase from the United States Mint | <input type="radio"/> |
| 4. <b><i>Stop purchasing from the United States Mint altogether</i></b>                      | <input type="radio"/> |

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Thank you for taking the time to complete our survey!