

ATTACHMENT 13: NOTIFICATIONS RELATED TO THE EVALUATION OF THE PUBLIC EDUCATION CAMPAIGN ON TEEN TOBACCO COHORT II (ExPECTT II)

Thank You Letter to Accompany Physical Gift Card Incentive for Follow Up 5

Hello,

Thank you very much for [YOUTH FNAME]'s participation in the Food and Drug Administration's research study.

To thank [YOUTH FNAME] for their time, we have enclosed a [FILL: \$25 or \$30} VISA gift card for the completion of the online questionnaire.

If you have any questions, please call us at 1-800-608-2955 between 9am and 5pm, Eastern Time, Monday through Friday, or email us at expectt2@rti.org.

Thank you for making this study a success!

Thank You,

Melissa Joyner ExPECTT Field Director RTI International

Form Approved
OMB No. 0910-0753
Exp. Date 01/31/2023

Reminder Post card 1



RTI International
ATTN: Data Capture
(0215534.001.001.004.00
5.001)
5265 Capital Blvd.
Raleigh, NC 27616
ADDRESS SERVICE
REQUESTED

[Parent_FName] [Parent_LName]
[Address1], [Address2]
<CITY>, <STATE> <ZIP>

<caseid>

Dear [Parent_FName] [Parent_LName],
Recently, I mailed you a letter asking your child [Child First Name] to complete an online questionnaire to for the final round of the Evaluation of the Public Education Campaign on Teen Tobacco (ExPECTT), an important study sponsored by the U.S. Food and Drug Administration.

If your child already completed the online questionnaire, please accept my sincere thanks. If not, we hope they will please do so today.

They will receive a \$25 Visa gift card by mail if they complete the questionnaire and a bonus \$5 (\$30 total) if they do so on or before [ADD DATE].

If you have any questions, please call us at 1-800-608-2955 between 9 am and 5 pm, Eastern Time, Monday through Friday or email us at expectt2@rti.org.

Many thanks,

A handwritten signature in cursive script that reads 'Jennifer Duke'.

Dr. Jennifer Duke, ExPECTT Study Director, RTI International

1. In your web browser type the study website address: <https://expectt.rti.org> OR scan this QR code:

2. On the login screen, type the username and password exactly as shown below:

Username: [Case ID]

IMPORTANT: This Username and Password is unique

Password: [Password]

3. Once you've typed in your username and password, you will see instructions for completing this round of the study. If your child is not yet [IF NE OR AL FILL 19/ALL OTHER STATES FILL 18] years old, a parent or legal guardian must follow the steps to provide permission for her or him to complete the survey. If your child is [IF NE OR AL FILL 19/ALL OTHER STATES FILL 18] years old, parental permission is not required. Your child can enter the username and password and begin.

Your child will receive a \$25 Visa gift card by mail if they complete the questionnaire and a bonus \$5 (\$30 total) if they do so on or before [ADD DATE].

Reminder Post card 2



RTI International
ATTN: Data Capture
(0215534.001.001.004.00
5.001)
5265 Capital Blvd.
Raleigh, NC 27616
ADDRESS SERVICE
REQUESTED

[Parent_FName] [Parent_LName]
[Address1], [Address2]
<CITY>, <STATE> <ZIP>

<caseid>

Dear [Parent_FName] [Parent_LName],

A few weeks ago, I mailed you a letter asking your child [Child First Name] to complete an online questionnaire to for the final round of the Evaluation of the Public Education Campaign on Teen Tobacco (ExPECTT), an important study sponsored by the U.S. Food and Drug Administration.

If your child already completed the online questionnaire, please accept my sincere thanks. If not, we hope they will please do so today.

They will receive a \$25 VISA gift card by mail if they complete the questionnaire [FILL IF BEFORE EARLY BIRD END DATE: and a bonus \$5 (\$30 total) if they do so on or before [ADD DATE]].

If you have any questions, please call us at 1-800-608-2955 between 9 am and 5 pm, Eastern Time, Monday through Friday or email us at expectt2@rti.org.

Sincerely,

A handwritten signature in cursive script that reads 'Jennifer Duke'.

Dr. Jennifer Duke, ExPECTT Study Director, RTI International

1. In your web browser type the study website address: <https://expectt.rti.org> OR scan this QR code:

2. On the login screen, type the username and password exactly as shown below:

Username: [Case ID]

Password: [Password]

3. Once you've typed in your username and password, you will see instructions for completing this round of the study. If your child is not yet [IF NE OR AL FILL 19/ALL OTHER STATES FILL 18] years old, a parent or legal guardian must follow the steps to provide permission for her or him to complete the survey. If your child is [IF NE OR AL FILL 19/ALL OTHER STATES FILL 18] years old, parental permission is not required. Your child can enter the username and password and begin.

Your child will receive a \$25 Visa gift card by mail if they complete the questionnaire and a bonus \$5 (\$30 total) if they do so on or before [ADD DATE]

Reminder Text Messages

Initial Text Reminder for Parents

Please remind your child to complete the ExPECTT survey by [DATE] for \$30. For instructions refer to the letter/email you received.

Questions: Contact us via email at expectt2@rti.org or via phone at 1-800-608-2955.

Second Text Reminder for Parents

Please remind your child to complete the ExPECTT survey by [DATE] for \$30. For instructions refer to the letter/email you received.

Questions: Contact us via email at expectt2@rti.org or via phone at 1-800-608-2955.

Third Text Reminder for Parents

The ExPECTT survey ends on [DATE]. Please remind your child to complete the survey for \$25. For instructions refer to the letter/email you received.

Questions: Contact us via email at expectt2@rti.org or via phone at 1-800-608-2955.

Final Text Reminder for Parents

Final Reminder: The ExPECTT survey ends [DATE]. Please remind your child to complete for \$25. For instructions refer to the letter/email you received.

Questions: Contact us via email at expectt2@rti.org or via phone at 1-800-608-2955.

OMB No: 0910-0753

Expiration Date: 01/31/2023

Paperwork Reduction Act Statement: The public reporting burden for this collection of information has been estimated to average 3 minutes per response. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing burden to PRASStaff@fda.hhs.gov.

Form Approved

OMB No. 0910-0753

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