

Measuring America's
Spending Since 1888

U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU



Acting as a collecting agent for
U.S. Department of Labor
Bureau of Labor Statistics

Your Daily Expenses

Help us learn about the buying habits of people in the United States



When you write down what you purchase in this diary, you will help provide a bigger picture of how U.S. consumers spend their money.

By law (Title 13, U.S. Code), we must keep your information confidential; we use it for statistical purposes only.

Please record your expenses and purchases for the following period		
	Day	Date
1		
2		
3		
4		
5		
6		
7		

I will return on: _____

If you have any questions, please call:

Field representative's name:	Telephone:
Field representative supervisor's name:	Telephone:

General Instructions

- Fill out this diary for an entire week, writing down everything you and the people on your list spend money on each day – the products you buy, the services you use, the household expenses you have during the week – no matter how large or small they are.
- We recommend that you record your expenses each day. Think about where you went and what you did.
- Talk to the people on your list every day to find out how they spent their money.
- Include payments by:

**Cash
Check
SNAP Card
Credit/Debit Card
Money Order
Venmo
Paypal**

**WIC Voucher
Automatic Withdrawal
Payroll Deduction
Store Charge Card
Gift Card
Cash App**

- Keep receipts and other records so that you will remember to record what you bought or paid for. Use the pocket at the back of the diary to store them.

Some record types include:

**Receipts
Bills
Pay Stubs
Bank Statements
Internet/Catalog Purchases
Credit Card Statements**

- Include items that you bought for people who are not on your list, such as gifts.
- Please use a blue or black pen when filling out the diary.

Do NOT record

- Expenses of people on your list while they were away from home overnight
- Business or farm operating expenses
- Sales tax, *except* for Meals, Snacks, and Drinks Away from Home

How to Fill Out Your Diary

The diary is divided into 7 days and each day is divided into 4 parts.

Enter each item in the appropriate part for each day.

1. Food and Drinks for Home Consumption

- Describe the item.
- Mark whether the item was fresh, frozen, bottled/canned, or other.
- Enter the cost **without tax** and deduct any discounts or coupons.
- Enter the name of the store, business, or website where the item was purchased.

2. Meals, Snacks, and Drinks Away from Home

- Enter the name of the restaurant, vendor, or cafeteria where you made this purchase.
- Mark one of the four choices that best describes where you made the purchase.
- Enter the total cost **with tax, tip, and fees**. Include any **delivery fees** in the total cost.
- Check whether alcoholic beverages were included or not, and if yes, enter the cost of the alcoholic beverages.

3. Clothing, Shoes, Jewelry, and Accessories

- Describe the item and enter the cost **without tax**.
- Mark the appropriate sex and age range of the person for whom the item was bought.
- Enter the name of the store, business, or website where the item was purchased.

4. All Other Products, Services, and Expenses

- Describe the item and enter the total cost **without tax**.
- Enter the name of the store, business, or website where the item was purchased.

**See back flap for answers to
Frequently Asked Questions**

There is an Additional Pages section on pages 18–23 in case you run out of lines on any particular day.

If you are unsure about whether to include an item or where to record an item, write it down wherever it seems best or make a note and ask your field representative.

Record Your Daily Expenses

The people on your list:

Record the purchases and expenses made by ALL of these people.

Notes

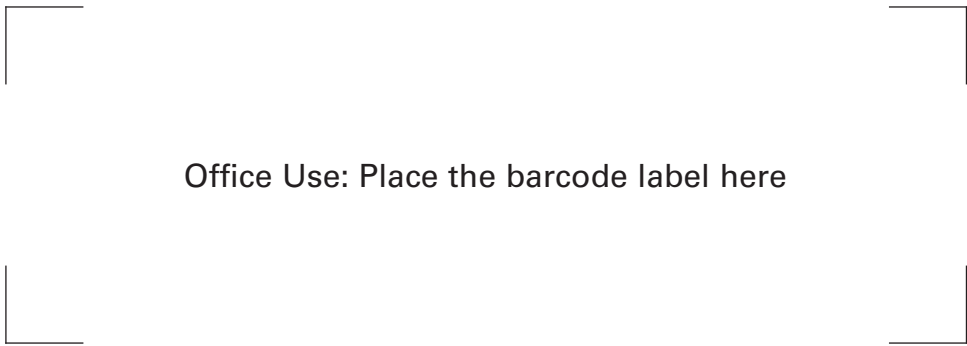
Thank you for agreeing to fill out this diary.

We understand that this task takes time; however, your information is very important to us and will be used for many purposes that affect all households in the U.S. Among the most important, it is used to help calculate the Consumer Price Index, or CPI. The CPI is *one of the most important tools* used to measure how fast consumer prices are rising or declining.

Here are some of the uses of the Consumer Price Index:

- ◆ Provide cost-of-living wage adjustments for millions of American workers
- ◆ Adjust Social Security payments
- ◆ Adjust Federal income-tax brackets

For more information about the survey, visit: www.bls.gov/cex and www.census.gov/programs-surveys/ce.html



Office Use: Place the barcode label here

Questions?

Some Frequently Asked Questions are answered on the flap attached to the back cover. If you still have questions after reviewing these, please call your field representative.



Examples

Food and Drinks for Home Consumption									
What did you buy or pay for?		Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased	
		fresh	frozen	bottled/ canned	other				
101	bread	1 X	2	3	4	1	49	Foodway Grocery Store	
102	eggs	1 X	2	3	4	1	50		
103	chicken wings	1	2 X	3	4	6	78		
104	apples	1 X	2	3	4	2	80		
105	beer	1	2	3 X	4	4	29		
106	milk	1 X	2	3	4	2	99		
107	orange juice	1	2	3 X	4	3	99		
108	candy	1	2	3	4 X	2	50		
109	vegetable oil	1	2	3 X	4	2	99		
110	baby food	1	2	3 X	4	4	95		
111	potato chips	1	2	3	4 X	2	79		
112	frozen meals	1	2 X	3	4	8	97		
113	ketchup	1	2	3 X	4	1	59		
114	soup	1	2	3 X	4	4	96		
115	soda	1	2	3 X	4	1	98		
116	pork chops	1 X	2	3	4	6	36		
117	shrimp	1	2 X	3	4	11	20		
118	cookies	1	2	3	4 X	3	50		
119	ground beef	1 X	2	3	4	5	87		
120	carbonated water	1	2	3 X	4		89		
121	apple pie	1 X	2	3	4	4	99		
122	ground coffee	1	2	3	4 X	2	79	NY Bagel Bakery	
123	bagels	1 X	2	3	4	5	25	"	
124	wine	1	2	3 X	4	42	00	Total Wine	
125	juice boxes	1	2	3	4 X	20	85	Amazon.com	
126	dog food	1	2	3	4 X	21	45	Pets&More.com	
127		1	2	3	4				
128		1	2	3	4				
129									
130									
131		1	2	3	4				
132		1	2	3	4				
133		1	2	3	4				
134		1	2	3	4				
135		1	2	3	4				
136		1	2	3	4				

Use the pocket on the inside of the back cover to store your receipts until you're ready to record your purchases.



Examples

Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees		Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria			Yes	No		
201 McDonald's	1 X	2	3	4	7	25	1	2 X		
202 DoorDash	1 X	2	3	4	62	23	1	2 X		
203 Mister Days sports bar	1	2 X	3	4	15	00	1 X	2	15	00
204 YMCA vending machine	1	2	3 X	4	1	50	1	2 X		
205 Millbrook school cafeteria	1	2	3	4 X	45	00	1	2 X		
206 Starbucks	1 X	2	3	4	2	09	1	2 X		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301 dress shirts	75 00	1	2	3	4	5 X	Dillards.com ↓
302 running shoes	69 00	1	2	3	4	5 X	
303 wallet	29 00	1	2	3	4 X	5	
304 baseball cap	14 99	1	2 X	3	4	5	Target
305 bib	3 50	1 X	2	3	4	5	Sweet Dreams boutique
306 necklace	250 00	1	2	3	4	5 X	Olde Towne jewelry
307 non-prescription sunglasses	59 00	1	2	3	4	5 X	Walmart.com
308 child's costume (returned for refund)	15 00	1 X	2	3	4	5	Partysupply.com

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401 cold medicine (non-prescription)	6 95	Walmart
402 gasoline	12 86	Liberty
403 highway tolls	2 00	Tri-River bridge
404 music	10 99	Spotify
405 cigarettes	8 99	Jim's Mart
406 dry cleaning (clothes)	15 50	Green cleaners
407 lottery tickets	1 00	Jim's Mart
408 bus fare	1 50	MetroCounty transit
409 piano lessons	150 00	Private Individual
410 electric drill	65 00	Village Hardware
411 Netflix subscription	15 49	Netflix
412 veterinarian fees	85 00	Bay County Vets

DAY 1

ENTER
DAY AND
DATE

See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
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124		1	2	3	4			
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127		1	2	3	4			
128		1	2	3	4			
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130		1	2	3	4			
131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



DAY 1

FR USE:
☐ None
☐ VC

Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No		
201	1	2	3	4		1	2		
202	1	2	3	4		1	2		
203	1	2	3	4		1	2		
204	1	2	3	4		1	2		
205	1	2	3	4		1	2		
206	1	2	3	4		1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
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DAY 2

ENTER
DAY AND
DATE

See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
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122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
130		1	2	3	4			
131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol		
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No			
201	1	2	3	4			1	2		
202	1	2	3	4			1	2		
203	1	2	3	4			1	2		
204	1	2	3	4			1	2		
205	1	2	3	4			1	2		
206	1	2	3	4			1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
402		
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See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
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131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No		
201	1	2	3	4		1	2		
202	1	2	3	4		1	2		
203	1	2	3	4		1	2		
204	1	2	3	4		1	2		
205	1	2	3	4		1	2		
206	1	2	3	4		1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
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See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
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134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No		
	1	2	3	4		1	2		
201									
	1	2	3	4		1	2		
202									
	1	2	3	4		1	2		
203									
	1	2	3	4		1	2		
204									
	1	2	3	4		1	2		
205									
	1	2	3	4		1	2		
206									

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
		1	2	3	4	5	
301							
		1	2	3	4	5	
302							
		1	2	3	4	5	
303							
		1	2	3	4	5	
304							
		1	2	3	4	5	
305							
		1	2	3	4	5	
306							
		1	2	3	4	5	
307							
		1	2	3	4	5	
308							

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
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See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
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125		1	2	3	4			
126		1	2	3	4			
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128		1	2	3	4			
129		1	2	3	4			
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133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No		
201	1	2	3	4		1	2		
202	1	2	3	4		1	2		
203	1	2	3	4		1	2		
204	1	2	3	4		1	2		
205	1	2	3	4		1	2		
206	1	2	3	4		1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
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412		
413		

See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
130		1	2	3	4			
131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No		
	1	2	3	4		1	2		
201									
	1	2	3	4		1	2		
202									
	1	2	3	4		1	2		
203									
	1	2	3	4		1	2		
204									
	1	2	3	4		1	2		
205									
	1	2	3	4		1	2		
206									

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
		1	2	3	4	5	
301							
		1	2	3	4	5	
302							
		1	2	3	4	5	
303							
		1	2	3	4	5	
304							
		1	2	3	4	5	
305							
		1	2	3	4	5	
306							
		1	2	3	4	5	
307							
		1	2	3	4	5	
308							

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
402		
403		
404		
405		
406		
407		
408		
409		
410		
411		
412		
413		



DAY 7

ENTER
DAY AND
DATE

See pages 2-3 for examples. If you need additional space, use pages 18-23.
Please PRINT in blue or black ink.

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
130		1	2	3	4			
131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			



Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No	
201	1	2	3	4		1	2	
202	1	2	3	4		1	2	
203	1	2	3	4		1	2	
204	1	2	3	4		1	2	
205	1	2	3	4		1	2	
206	1	2	3	4		1	2	

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
402		
403		
404		
405		
406		
407		
408		
409		
410		
411		
412		
413		



Additional Pages

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
101		1	2	3	4			
102		1	2	3	4			
103		1	2	3	4			
104		1	2	3	4			
105		1	2	3	4			
106		1	2	3	4			
107		1	2	3	4			
108		1	2	3	4			
109		1	2	3	4			
110		1	2	3	4			
111		1	2	3	4			
112		1	2	3	4			
113		1	2	3	4			
114		1	2	3	4			
115		1	2	3	4			
116		1	2	3	4			
117		1	2	3	4			
118		1	2	3	4			
119		1	2	3	4			
120		1	2	3	4			
121		1	2	3	4			
122		1	2	3	4			
123		1	2	3	4			
124		1	2	3	4			
125		1	2	3	4			
126		1	2	3	4			
127		1	2	3	4			
128		1	2	3	4			
129		1	2	3	4			
130		1	2	3	4			
131		1	2	3	4			
132		1	2	3	4			
133		1	2	3	4			
134		1	2	3	4			
135		1	2	3	4			
136		1	2	3	4			
137		1	2	3	4			



Additional Pages

Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol		
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No			
201	1	2	3	4			1	2		
202	1	2	3	4			1	2		
203	1	2	3	4			1	2		
204	1	2	3	4			1	2		
205	1	2	3	4			1	2		
206	1	2	3	4			1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax	Was the item for:					Name of Store or Website where purchased
		Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
301		1	2	3	4	5	
302		1	2	3	4	5	
303		1	2	3	4	5	
304		1	2	3	4	5	
305		1	2	3	4	5	
306		1	2	3	4	5	
307		1	2	3	4	5	
308		1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
401		
402		
403		
404		
405		
406		
407		
408		
409		
410		
411		
412		
413		

Additional Pages

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
138		1	2	3	4			
139		1	2	3	4			
140		1	2	3	4			
141		1	2	3	4			
142		1	2	3	4			
143		1	2	3	4			
144		1	2	3	4			
145		1	2	3	4			
146		1	2	3	4			
147		1	2	3	4			
148		1	2	3	4			
149		1	2	3	4			
150		1	2	3	4			
151		1	2	3	4			
152		1	2	3	4			
153		1	2	3	4			
154		1	2	3	4			
155		1	2	3	4			
156		1	2	3	4			
157		1	2	3	4			
158		1	2	3	4			
159		1	2	3	4			
160		1	2	3	4			
161		1	2	3	4			
162		1	2	3	4			
163		1	2	3	4			
164		1	2	3	4			
165		1	2	3	4			
166		1	2	3	4			
167		1	2	3	4			
168		1	2	3	4			
169		1	2	3	4			
170		1	2	3	4			
171		1	2	3	4			
172		1	2	3	4			
173		1	2	3	4			
174		1	2	3	4			



Additional Pages

Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees		Were alcoholic beverages included?		Enter the total cost of the alcohol	
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria			Yes	No		
207	1	2	3	4			1	2		
208	1	2	3	4			1	2		
209	1	2	3	4			1	2		
210	1	2	3	4			1	2		
211	1	2	3	4			1	2		
212	1	2	3	4			1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax		Was the item for:					Name of Store or Website where purchased
			Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
309			1	2	3	4	5	
310			1	2	3	4	5	
311			1	2	3	4	5	
312			1	2	3	4	5	
313			1	2	3	4	5	
314			1	2	3	4	5	
315			1	2	3	4	5	
316			1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
414		
415		
416		
417		
418		
419		
420		
421		
422		
423		
424		
425		
426		



Additional Pages

Food and Drinks for Home Consumption

	What did you buy or pay for?	Is this item: Mark (X) one				Cost without tax		Name of Store or Website where purchased
		fresh	frozen	bottled/ canned	other			
175		1	2	3	4			
176		1	2	3	4			
177		1	2	3	4			
178		1	2	3	4			
179		1	2	3	4			
180		1	2	3	4			
181		1	2	3	4			
182		1	2	3	4			
183		1	2	3	4			
184		1	2	3	4			
185		1	2	3	4			
186		1	2	3	4			
187		1	2	3	4			
188		1	2	3	4			
189		1	2	3	4			
190		1	2	3	4			
191		1	2	3	4			
192		1	2	3	4			
193		1	2	3	4			
194		1	2	3	4			
195		1	2	3	4			
196		1	2	3	4			
197		1	2	3	4			
198		1	2	3	4			
199		1	2	3	4			



Additional Pages

Meals, Snacks, and Drinks Away from Home

Name of Restaurant or Vendor	Mark (X) one that best describes where you made this purchase				Total Cost with tax, tip & fees	Were alcoholic beverages included?		Enter the total cost of the alcohol		
	Fast Food Take-out Delivery Concession	Full Service Places	Vending Machines or Mobile Vendors / Food Trucks	Employer or School Cafeteria		Yes	No			
213	1	2	3	4			1	2		
214	1	2	3	4			1	2		
215	1	2	3	4			1	2		
216	1	2	3	4			1	2		
217	1	2	3	4			1	2		
218	1	2	3	4			1	2		

Clothing, Shoes, Jewelry, and Accessories

What did you buy or pay for?	Cost without tax		Was the item for:					Name of Store or Website where purchased
			Child Under 2	Boy 2-15	Girl 2-15	Man 16 & over	Woman 16 & over	
317			1	2	3	4	5	
318			1	2	3	4	5	
319			1	2	3	4	5	
320			1	2	3	4	5	
321			1	2	3	4	5	
322			1	2	3	4	5	
323			1	2	3	4	5	
324			1	2	3	4	5	

All Other Products, Services, and Expenses

What did you buy or pay for?	Cost without tax	Name of Store or Website where purchased
427		
428		
429		
430		
431		
432		
433		
434		
435		
436		
437		
438		
439		

Keep your records in this pocket.

(These records are only for your reference; we will not keep them.)

- Receipts
- Bills
- Pay Stubs
- Bank Statements
- Catalog/Internet Purchases
- Credit Card Statements

Frequently Asked Questions

(continued on other side)

1. How detailed should my descriptions be?

Refer to pages 2–3 for examples of the level of detail needed in each part. Do not rely solely on brand names.

2. How should I record multiple quantities?

You may group identical items on the same line and enter a total cost of all the items, or you may write each item on a separate line with the individual cost.

3. How should I record pre-payments such as a subway fare card?

Record the expense when you pay for it, not when you use it.

4. How should I record credit card purchases?

Record the purchase on the day that you use your credit card to pay for it, not on the day you receive or pay your credit card bill.

5. Should I record automatic deductions taken from my paycheck or bank account?

Yes, record automatic deductions (such as health insurance premiums taken out of your account or paycheck) only if they are deducted that week.

6. Should I record typical monthly bills?

Yes, record typical monthly bills only if you pay them during the week that you have the diary. Write them in the section called *All Other Products, Services, and Expenses*.

7. What should I do when I use coupons, discount cards, or loyalty cards?

Subtract the discount from the original price and write the amount that you paid.

8. Can I just give you receipts instead of writing the information down?

No, we need you to write the information in the diary. We encourage you to save your receipts to review them with your field representative at the end of the week. You can use the pocket on the inside of the back cover to store your receipts until you're ready to record your purchases.

9. How should I record an item if I don't know if it includes tax?

Write down the amount paid.

10. What if I make a contribution or charitable donation?

Record money contributions or donations in the section called *All Other Products, Services, and Expenses*.

(continued on other side)

Frequently Asked Questions

(continued on other side)

11. What about gift cards or gift certificates?

If you buy a gift card or gift certificate to give to someone, write down the cost of it in *All Other Products, Services, and Expenses*. If you use a gift card, write down the full amount for your purchase as if paid with cash.

12. What do I do about returns & exchanges?

If an item is bought and returned during the diary week, it can be erased or crossed out. If it was bought outside the week and returned during the week, do not make an entry. If an item is exchanged during the week, erase or cross out the item that was returned and enter the new item and its cost on the day the exchange was made.

13. How do I categorize the establishment for Meals, Snacks, and Drinks Away from Home?

- **Fast Food, Take-out, Delivery, Concession**
You pay BEFORE you eat/drink
- **Full Service Places**
You pay AFTER you eat/drink if you eat/drink at the establishment
- **Vending Machines or Mobile Vendors / Food Trucks**
Include vending machines, carts, and food trucks that move from place to place
- **Employer and School Cafeterias**
Include school meal plans and pre-payments, and school lunch bills

14. What's the difference between a concession stand and a mobile vendor?

A concession stand has to stay in a permanent location and a mobile vendor does not. Some mobile vendors may seem permanent because they are usually in the same location, but they are still considered mobile vendors because they have the option to change locations.

15. Should I record subsidized/reimbursed expenses?

Yes, but only record the portion that you or someone on your list has paid.

16. What should I do about shipping & handling costs?

Include the shipping & handling cost in the total price of the item. If the shipping & handling covered multiple items, include the shipping & handling in the total price of one item from the order.



Did you or anyone on your list pay for . . .

- FR USE: Use the example below to transcribe the Control Number:**

[illegible]