[Hello, this is {INTERVIEWER NAME} and I'm conducting an important health study for the University of Colorado. Your telephone number has been selected as part of this study.]

RESIDENTIAL. Are you a member of this household and at least 18 years old?

(RESIDE) [HOUSEHOLDS EXCLUDE PHONES IN DORMITORIES, NURSING HOMES, AND VACATION HOMES (UNLESS PRIMARY RESIDENCE)]

YES..........................................................1
NO...........................................................2 ➔ (A3)
PROBABLE BUSINESS .............................3
ANSWERING MACHINE ............................7 ➔ (READMSG)
NONWORKING,
  DISCONNECTED, CHANGED ...............9 ➔ (DISPO?)

A2a. Have I reached (VERIFY)?

(A2A)
YES.........................................1 ➔
NO ..........................................2 ➔ [A1RD]

A2b. Is this phone number used for …

(BUSINESS)
Home use only, ...............4 } (A5)
Home and business use, or. 5 } (A5)
Business use only? .............6 ➔ (THANK01)
NON-HOME / NON-BUSINESS (VACATION HOMES) ➔ (THANK01)

[HOME USE EXCLUDES PHONES IN DORMITORIES, NURSING HOMES, AND VACATION HOMES (UNLESS PRIMARY RESIDENCE)]
[IF ASKED: The study is to collect information and opinions from smokers and non-smokers.]

A3. May I speak to a household member who is at least 18 years old?

(A3)
[HOUSEHOLD (HH) MEMBERS INCLUDE PEOPLE WHO THINK OF THIS HH AS THEIR PRIMARY PLACE OF RESIDENCE, IT INCLUDES PERSONS WHO USUALLY STAY IN THE HH BUT ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR LIVING AT SCHOOL IN A DORM, FRATERNITY, OR SORORITY.]

AVAILABLE ........................................1 ➔ (A4)
NOT AVAILABLE ...............................2 ➔ (DISPO?)
THERE ARE NONE ............................3 ➔ (THANK02)

A4. Hello, this is {INTERVIEWER NAME} and I'm conducting an important health study for the University of Colorado. Your telephone number has been selected as part of this study. Are you a member of this household and at least 18 years old?

(A4)
YES.....................................................1 ➔ (A4a)
NO...................................................2 ➔ (REPEAT A3)
REFUSED ............................................7 ➔
DON'T KNOW/NOT SURE ..............8 ➔ } (CODE AS INITIAL REFUSAL)

A4a. Have I reached (VERIFY)?

(A4a)
YES..............................................1 ➔
NO ...............................................2 ➔ [SKIP TO A1RD]
A4b. Is this phone number used for...

(A4b)

- Home use, ........................................... 1
- Home and business use, or ................. 2
- Business use only? .............................. 3  ➔ (THANK01)

A5. This study will interview 13,000 smokers and non-smokers about tobacco use and attitudes in Colorado. While your participation is voluntary, your cooperation is very important to the success of this study. Your answers will be kept strictly confidential and will be used only for this research. You may choose not to answer any question or end the interview at any time. The interview takes about 10 minutes. May I continue with the study?

(A5)

- CONTINUE .................................... 1
- GENERAL CALLBACK .................. 2
- SPECIFIC CALLBACK .................. 3
- REFUSED ...................................... 7
- DON'T KNOW................................ 8  ➔ [TERMINATE DISPO]

A5L. This interview is offered in English and Spanish. Which do you prefer?

(ENGLISH)

- ENGLISH ....................................... 1
- SPANISH ....................................... 2  ➔ (SPANISH)

A5M

(ENG2) IF YOU ARE NOT A SPANISH INTERVIEWER: When would be a good time to have a Spanish speaking interviewer call you back? IF YOU ARE A SPANISH INTERVIEWER, CHANGE THE LANGUAGE TO SPANISH AND CONTINUE.

- CONTINUE ...... ............................. 1
- GENERAL CALLBACK .................. 2
- SPECIFIC CALLBACK .................. 3

A6a. First, I'll need to list each household member so the computer can pick one at random for the interview. Would you like me to list their first names, or only age and gender?

[HOUSEHOLD (HH) MEMBERS ARE PEOPLE WHO THINK OF THIS HH AS THEIR PRIMARY PLACE OF RESIDENCE. IT INCLUDES PEOPLE WHO USUALLY STAY IN THE HH BUT ARE TEMPORARILY AWAY ON BUSINESS, VACATION, IN A HOSPITAL, OR LIVING AT SCHOOL IN A DORM, FRATERNITY, OR SORORITY.]

(NAMLST)

- FIRST NAME OR INITIAL ............. 1
- AGE & GENDER ........................... 2
- EITHER, DOESN'T MATTER.......... 3  ➔ [USE FIRST NAMES]
- REFUSED................................. 7
- DON'T KNOW......................... 8 } [OMIT FIRST NAMES]

This call may be recorded for quality control purposes.
ACKNOWLEDGE A6a RESPONSE, FOR EXAMPLE: Okay. Including yourself, what is the [first name,] age and gender of the [oldest person living in the household]? What is the [first name,] age and gender of the next oldest person living in the household? The next oldest person living in the household? … The youngest person living in the household?

[ENTER AGE AS 1 FOR EVERYONE UNDER ONE YEAR.]

What is (your/his/her) first name?
(Is this person/ Are you) male or female? [M-F]
How old (are you/is he/she)?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. (P1NAME - P1SEX - P1AGE)</td>
<td>2. (P0NAME - P0SEX)</td>
<td>3. (P0AGE)</td>
</tr>
</tbody>
</table>

RENUM WAS RESPONDENT REFERRING TO HIM OR HERSELF?

(RENUM1-0)

YES................................. 1
NO ..................................... 2
DON’T KNOW......................... 8

A6VERF1. So the household member (s) is/are….

(PEDIT) SELECT A NUMBER TO EDIT OR PRESS 11 TO ADD/12 TO CONTINUE

# AGE SEX......FIRST NAME
[PROGRAMMER: DISPLAY ROSTER] (SKIP <PX NAME> THROUGH <RENUMX>)

ADD ANOTHER HH MEMBER ......11 (SKIP TO PY NAME)
DATA CORRECT .......................12 (SKIP TO NEXT PROGRAMMER NOTE)
REMOVE HH MEMBER.................13 (SKIP TO PREM)

(PREM) SELECT A PERSON TO REMOVE

# AGE SEX FIRST NAME
[PROGRAMMER DISPLAY ROSTER] (SKIP TO <REMCONF>)

11. RETURN TO <PEDIT> (SKIP TO <PEDIT>)

(REMCONF) YOU CHOSE TO REMOVE

AGE SEX FIRST NAME
[PROGRAMMER: DISPLAY ANSWER FROM <PREM>]

ARE YOU SURE?

YES ...................................................... 1 [PROGRAMMER: REMOVE PERSON FROM ROSTER SKIP TO <PEDIT>]
NO ....................................................... 2 [SKIP TO <PEDIT>]

[PROGRAMMER: IF ANSWER TO RENUM IS UNCLEAR, ASK WHOENU. ELSE SKIP TO A6VERF2]

WHOENU Could you please tell me which person you just listed is you?

(WHOENU) SELECT A NUMBER TO MARK AS R
[PROGRAMMER: DISPLAY ROSTER]
A6VERF2. Have we missed anyone else who usually lives here but is temporarily away? For example, away on business, vacation, in a hospital, or living in student housing?

(A6VERF2)

YES............................................ 1 (SKIP TO PEDIT)
NO............................................. 2
REFUSED ..................................... 7
DON'T KNOW ............................ 8

[SKIP TO A9 EXCEPT FOR ANY HH MEMBER WHERE AGE IS UNKNOWN OR REFUSED.]

A7. Going back to ages of the members of your household, is {NAME/AGE/SEX} between ages . . .

(P?AGE2)

0-11 years,................................. 1
12-14 years,............................... 2
15-17 years,............................... 3
18-24 years,............................... 4
25-29 years,............................... 5
30-44 years,............................... 6
45-55 years,............................... 7
56-64 years,............................... 8
65 years or older?....................... 9
REFUSED..................................... 97
DON'T KNOW/NOT SURE ............. 98

A8. Is {NAME/AGE/SEX} between ages . . .

(P?AGE3)

0-11 years?................................. 1
12-17 years?............................... 2
18 years or older?...................... 3
REFUSED..................................... 7
DK/NOT SURE ............................. 8

The next set of questions are about the smoking pattern of people in this household.

A9. [As far as you know], {have you/has [NAME]} smoked at least 100 cigarettes during {your/his/her} entire life?

(P?CIGS)

YES............................................... 1
NO............................................. 2
REFUSED..................................... 7
DON'T KNOW/NOT SURE ........... 8

A10. [As far as you know], {do you/does he/she} smoke cigarettes every day, some days, or not at all?

(P?DAILY)

EVERY DAY ................................. 1
SOME DAYS ................................. 2
NOT AT ALL .................................. 3
REFUSED ..................................... 7
DON'T KNOW/NOT SURE ........... 8

A11. [As far as you know], {have you/has he/she} smoked cigarettes any time in the last four years, that is, since January 1, 2002?

(P?MNTH)

YES............................................... 1
NO ................................................ 2
REFUSED..................................... 7
DON'T KNOW/NOT SURE ........... 8
[My next few questions are about the background of the people in this household.]

A13. Which one of the following categories best describes (you/NAME/AGE-GENDER)? (Are/Is) {you/he/she} …

(P?RACE)
Hispanic or Latino, ........................................... 1
white, .................................................................. 2
black, African American, .................................. 3
Asian, .................................................................. 4
Native Hawaiian, other Pacific Islander, ....... 5
American Indian, or Alaska Native? .......... 6
OTHER (Specify: ______________) ............... 7
REFUSED ........................................................ 8
DON'T KNOW/NOT SURE ...................................... 9

A13a. Which {do you/does NAME/he/she} usually say, “Hispanic” or “Latino”?

(P?HISP)
HISPANIC.......................................................... 1
LATINO .............................................................. 2
EITHER/BOTH................................................... 3
REFUSED .......................................................... 7
DON'T KNOW/NOT SURE ....................................... 8

A13b. {Do you/does NAME/he/she} consider [yourself/himself/herself] to be…

(P?MEX)
Mexican, .......................................................... 1
Mexican American, ........................................ 2
Spanish, or ....................................................... 3
Other Hispanic or Latino? (SPECIFY: ____) ... 95
REFUSED ......................................................... 97
DK/NOT SURE ................................................ 98

A16. What was the highest grade or year of regular school or college that {you/NAME he/she} completed?

(P?EDUC)
GRADE ............................................................. 1-12
POST SECONDARY SCHOOL ........................ 13
SOME COLLEGE ............................................. 14
BA/BS-LEVEL DEGREE ................................. 15
BA/BS-LEVEL DEGREE + SOME GRADUATE SCHOOL ............................................. 16
MA/MS, PHD OR HIGHER ............................... 17
NO FORMAL SCHOOLING ............................... 50
OTHER (SPECIFY: ______________) ............ 95
REFUSED ......................................................... 97
DON'T KNOW/NOT SURE ...................................... 98

A16a. Did {you/NAME/him/her} graduate from high school, or did {you/NAME/him/her} earn a GED (also called a general education diploma)?

(P?GED)
GRADUATED FROM HIGH SCHOOL............. 1
GED, GENERAL EDUCATION DIPLOMA .......... 2
NEITHER, DID NOT GRADUATE ................. 3
REFUSED ......................................................... 7
DON'T KNOW/NOT SURE ......................... 8
A20. What county do you live in?
(CNTY)
(IF ASKED: We are interested in looking at the study results by geographic area).
COUNTY CODE ......................... __|__|__
OTHER ..................................... 995
(SPECIFY: ___________________)
REFUSED .................................... 997
DON’T KNOW/NOT SURE ............ 998

A21. What city do you live in?
(CTYLST)
(IF ASKED: We are interested in looking at the study results by geographic area).
CITY CODE .............................. __|__|__
DON’T LIVE IN A CITY .............. 900
OTHER ..................................... 995
(SPECIFY: ___________________)
REFUSED .................................... 997
DON’T KNOW/NOT SURE ............ 998

A22ADD. How long have you lived at your current address?
(LIVED) (LIVUNI) [CODE NUMBER =1 IF RESPONSE IS LESS THAN ONE WEEK]
NUMBER ................................... __|__|__
UNIT ........................................... __
1   WEEKS
2   MONTHS
3   YEARS
REFUSED .................................... -2
DON’T KNOW/NOT SURE ............ -1

A22b. How long have you lived in Colorado?
(LIVEDCOL) [RECORD 1 WEEK FOR LESS THAN ONE WEEK]
NUMBER ................................... __|__|__
UNIT ........................................... __
1   WEEKS
2   MONTHS
3   YEARS
ALL MY LIFE ............................... 99 ⇒ [SKIP TO A23]
REFUSED .................................... -2
DON’T KNOW/NOT SURE ............ -1

A22c. Where did you last live before you began living in Colorado?
(LSTLIVE)
[IF NEEDED, PROBE FOR STATE OR COUNTRY]
[IF MORE THAN ONE RESPONSE, PROBE FOR MOST RECENT]
SPECIFY: ___________________ 95
REFUSED .................................... 97
DON’T KNOW ............................ 98
A23. During the past 12 months, was the total combined income of all members of this household …

(INCA-INCH) [IF NECESSARY PROBE: Include income from all sources such as: salaries and wages; social security and public assistance; dividends, interest or rent; unemployment and worker's compensation; pensions.]

<table>
<thead>
<tr>
<th>Income Range</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. less than $25,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>b. less than $20,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>c. less than $15,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>d. less than $10,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>e. less than $35,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>f. less than $50,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>g. less than $75,000?</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>h. more than $75,000?</td>
<td>1</td>
<td>97</td>
</tr>
</tbody>
</table>

A25. Do you have more than one telephone number in your household? Do not include cell phones or numbers that are used only by a computer or fax machine.

(ADDPHON)

<table>
<thead>
<tr>
<th>Telephone Numbers</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>More than one</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

A26. How many of these are residential numbers?

[6=6 OR MORE]  
NUMBER OF NUMBERS________

A27. During the past 12 months, has your household been without telephone service for 1 week or more?

(NOPHONE)  
[DO NOT INCLUDE INTERRUPTIONS OF TELEPHONE SERVICE BECAUSE OF WEATHER OR NATURAL DISASTERS]

<table>
<thead>
<tr>
<th>Telephone Service</th>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW/NOT SURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Out for 1 week</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>97</td>
</tr>
</tbody>
</table>
[SELECTION TEXT]
IF ONLY THE ENUMERATOR HAS BEEN CHOSEN TO DO THE INTERVIEW OR IF THE HOUSEHOLD IS A ONE-PERSON HOUSEHOLD, READ: You have been selected to answer more detailed questions about tobacco use and attitudes in Colorado.

IF ONLY ONE PERSON FROM THE HOUSEHOLD WHO IS NOT THE ENUMERATOR HAS BEEN CHOSEN TO DO THE INTERVIEW, READ: ________person, the ________ year-old, has been selected to answer more detailed questions about tobacco use and attitudes in Colorado.

IF THE ENUMERATOR AND ANOTHER PERSON IN THE HOUSEHOLD HAVE BEEN CHOSEN TO DO THE INTERVIEW, READ: You and _______person, the ________ year-old, have been selected to answer more detailed questions about tobacco use and attitudes in Colorado.

IF TWO HOUSEHOLD MEMBERS WHO ARE NOT THE ENUMERATOR HAVE BEEN CHOSEN TO DO THE INTERVIEW, READ: _________ person, the _________ year-old and _______ person, the ______year-old, have been selected to answer more detailed questions about tobacco use and attitudes in Colorado.

TERMINATIONS:

READMSG [PLEASE READ THE FOLLOWING MESSAGE INTO THE ANSWERING MACHINE]

[This is {INTERVIEWER'S NAME} conducting an important health study for the University of Colorado. This study will interview 13,000 smokers and non-smokers about tobacco use and attitudes in Colorado. Your participation is extremely important to the success of this study. Please call us toll free at 1-877-551-6138 to complete a brief interview, or arrange a convenient time for us to contact you. Thank you.]

THANK01 Thank you, but we are only interviewing in private residences.

A1RD. Thank you very much, but I seem to have dialed the wrong number.

(A1RD2)

REDIAL............................................ RT ➔ (DIAL SCREEN)
NON-WORKING NUMBER
(IF NUMBER HAS BEEN DIALED TWICE).........................NW

THANK02 Thank you very much. Those are all the questions I have at this time.
### SECTION B: CURRENT SMOKING STATUS

#### SMOKING STATUS DEFINITION BOX

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. Smoke 100 cigs in life?</td>
<td>yes</td>
</tr>
<tr>
<td>B7. Smoke every day, some days, or not at all?</td>
<td>every day</td>
</tr>
<tr>
<td>B9. Smoke any cigs in last 30 days?</td>
<td>yes</td>
</tr>
<tr>
<td>B28 or B28a. How long since smoked?</td>
<td>less than 1 year</td>
</tr>
<tr>
<td></td>
<td>1 year or longer</td>
</tr>
</tbody>
</table>

#### SMOKING STATUS

<table>
<thead>
<tr>
<th>Daily</th>
<th>Nondaily</th>
<th>Recent Former</th>
<th>Established Former</th>
<th>Nonsmoker</th>
</tr>
</thead>
</table>

**B1.** Have you smoked at least 100 cigarettes in your entire life?  
(CIGS100)

- YES............................................... 1 ➔ [SKIP TO B7]
- NO ................................................ 2
- YES BECAUSE B2=100............. 3
- REFUSED................................. 7
- DON'T KNOW/NOT SURE............. 8

**B2.** What would you say is the total number of cigarettes that you have ever smoked?  
(TOTLEVER)

- NUMBER OF CIGARETTES ........ | [SKIP TO D] |
- NONE ....................................... 0
- REFUSED .................................. -2 ➔ [SKIP TO E]
- DON'T KNOW/NOT SURE............ -1
- VALID SKIP (CIGS100=1)........ -3

**B7.** Do you now smoke cigarettes every day, some days or not at all?  
(DAILY)

- EVERY DAY ................................. 1 ➔ [SKIP TO B18]
- SOME DAYS ............................... 2
- NOT AT ALL ............................... 3
- REFUSED................................. 7
- DON'T KNOW/NOT SURE............. 8

**B9.** Did you smoke any cigarettes during the past 30 days?  
(PAST30)

[IF NEEDED: When people say they now smoke “some days” or “not at all,” I’m still supposed to ask whether they smoked any cigarettes during the past 30 days.]

- YES............................................... 1
- NO ................................................ 2
- REFUSED................................. 7 ➔ [SKIP TO B28]
- DON'T KNOW/NOT SURE............. 8
B10. On how many of the past 30 days did you smoke cigarettes?
(NUMDYS)
NUMBER OF DAYS ..................... |_|_|
REFUSED .................................... -2
DON'T KNOW/NOT SURE ........... -1

B11. During the past 30 days, on the days that you did smoke, about how many cigarettes a day did you usually smoke?
(PERDAY)
[100 = 100 OR MORE CIGARETTES]
NUMBER OF CIGARETTES ..................... |_|_|
REFUSED .................................... -2
DON'T KNOW/NOT SURE ........... -1

B16. Have you ever smoked daily for 6 months or more?
(SMOK6MOS)
YES ............................................ 1
NO ............................................ 2
REFUSED .................................... 7
DON'T KNOW/NOT SURE ......... 8

B17. How long has it been since you smoked on a daily basis?
(LASTDLY) (LASTUNI1)
NUMBER ......................... |__|
UNIT .............................. |
  1   DAYS
  2   WEEKS
  3   MONTHS
  4   YEARS
REFUSED .................................... -2
DON'T KNOW/NOT SURE ........... -1

B18. How many cigarettes on average do you smoke per day?
(SMKPERDY)
[100 = 100 OR MORE CIGARETTES]
NUMBER OF CIGARETTES ........ |_|_|
REFUSED .................................... -2
DON'T KNOW/NOT SURE ........... -1

B19. How soon after you awake in the morning do you usually smoke your first cigarette?
(MORNNUM) (MORNUNIT)
[0 = IMMEDIATELY]
NUMBER ......................... |__|
UNIT .............................. |
  0   IMMEDIATELY
  1   MINUTES
  2   HOURS
REFUSED .................................... -2
DON'T KNOW/NOT SURE ........... -1
B20. Are you worried about how much money you spend on cigarettes?
(SMKSPEND)
YES ...................................................................  1
NO ....................................................................  2
NEVER PURCHASE CIGARETTES ............  3 [SKIP TO B21]
REFUSED .........................................................  7
DON'T KNOW/NOT SURE .......................  8

B20a. Has the price of cigarettes influenced …
(MUCHSMK)
(WHERBUY)
(BRNDBUY)
(DESRQUIT)

B21b. Do you usually buy cigarettes by the carton or by the pack, or do you roll your own?
(CIGCARTN)
CARTON .......................................  1
PACK ............................................  2
ROLL OWN ...................................  3
DON'T BUY THEM / BUM FROM OTHERS .  4
PACK AND CARTON EQUALLY ................  5
OTHER: ________________ ..................  95
REFUSED .....................................  97 [SKIP TO B26a]
DON'T KNOW/NOT SURE ...........  98

B21c. How much do you usually pay for a carton of cigarettes?
(PAYCARTN)

B21d. How much do you usually pay for a pack of cigarettes?
(PAYPACK)

B21e. Do you usually buy your cigarettes in Colorado, out of state, or over the Internet?
(BUYCOLO)
IN COLORADO ..................................................  1
OUT OF STATE ..............................................  2
OVER THE INTERNET ......................................  3
REFUSED .....................................................  7
DON'T KNOW/NOT SURE .........................  8

B21f. Around this time __12__ months ago, did you usually buy your cigarettes in Colorado, out of state, or over the Internet?
(BUYRAGO)
IN COLORADO ..................................................  1
OUT OF STATE ..............................................  2
OVER THE INTERNET ......................................  3
REFUSED .....................................................  7
DON'T KNOW/NOT SURE .........................  8 [SKIP TO B21]
**B21ee.** What type of store do you usually buy your cigarettes from? Do you buy them ....

(WHEREBUY)

- from convenience stores or gas stations, ......................... 1
- from supermarkets or grocery stores, .......................... 2
- from liquor stores or drug stores, .............................. 3
- from tobacco discount stores, .................................. 4
- from other discount stores such as Wal-Mart, ................ 5
- on Indian reservations, or ....................................... 6
- in military commissaries? ........................................ 7
- OTHER: _____________________________________________ 95
- REFUSED .................................................................... 97
- DON'T KNOW/NOT SURE .......................................... 98

**B21.** What brand do you usually smoke?

(SMKBRAND)

- BENSON & HEDGES ........ 1
- CAMEL ................... 2
- CARLTON ................ 3
- GENERIC ................ 4
- KENT .................... 5
- KOOL ..................... 6
- MARLBORO ............. 7
- MERIT .................... 8
- MORE ..................... 9
- NEWPORT .............. 10
- PALL MALL ............. 11
- SALEM .................. 12
- VANTAGE ............... 13
- VIRGINIA SLIMS ........ 14
- WINSTON ............... 15
- PARLIAMENTS .......... 16
- CAPRI ................... 17
- LIGGITT GROUP .......... 18
- AMERICAN SPIRIT ....... 19
- SUNDANCE .............. 20
- BASIC ................... 22
- DORAL .................. 23
- GPC ...................... 24
- OTHER .................... 95
  (Specify: ______________) 95
- REFUSED ................ 97
- DON'T KNOW/NOT SURE ... 98

**B26a.** What best describes your intentions regarding quitting? Would you say you . . .

(QUITINT)

- Never expect to quit, ................................................ 1 ❯ [SKIP TO B27]
- Might quit in the future, but not in the next 6 months, ...... 2
- Will quit in the next 6 months, or ................................ 3
- Will quit in the next month? ...................................... 4
- OTHER (Specify) _______________________________________
- REFUSED .................................................................. 7 ❯ [SKIP TO B27]
- DON'T KNOW/NOT SURE .......................................... 8
B26a1. The next time you decide to quit smoking, what method do you think you'll try?

[IF NECESSARY, READ RESPONSES:]
- COLD TURKEY, SELF-HELP .............................................. 1
- NICOTINE SUBSTITUTE [patch, gum, inhaler, spray, lozenges] ................................................. 2
- ZYBAN [Wellbutrin, bupropion, anti-depressant]... 3
- HYPNOSIS ................................................................. 4
- QUITLINE .................................................................... 5
- GRADUALLY REDUCE NUMBER OF CIGS ........... 6
- OTHER (Specify) ________________________________ 7
- REFUSED ................................................................. 8
- DON'T KNOW/NOT SURE ........................................ 8

B27. How sure are you that you could stop smoking and stay off cigarettes for at least one month? Would you say . . .

(QUITSURE)
- Very sure, ......................................................... 1
- Somewhat sure, .............................................. 2
- Somewhat unsure, or ................................... 3
- Very unsure? .................................................. 4
- REFUSED ........................................................... 7
- DON'T KNOW/NOT SURE ......................... 8

B28. How long has it been since you last smoked regularly?

(LASTSMO) (LASTUNI2)

[IF NEEDED: Regularly is at least a few cigarettes every few days.]
[IF ASKED: A few is 4 or 5.]
[NEVER SMOKED REGULARLY = 0]

NUMBER .......................................................... |1|1| | | [SKIP TO B29]

- 1 DAYS
- 2 WEEKS
- 3 MONTHS
- 4 YEARS
- REFUSED ......................................................... -2
- DON'T KNOW/NOT SURE .................. -1

B28a. Was it more than 5 years ago?

(LSTMRYR)

YES .......................................................... 1 ➔ SKIP TO B29
NO .............................................................. 2

B28b. Was it more than 1 year ago?

(LSTMRSX)

YES .......................................................... 1
NO .............................................................. 2
B29. How long has it been since you smoked any cigarettes at all, even one puff on a cigarette?

(LASTPUF) (LASTUNI3)

NUMBER ............................................. ||
UNIT .................................................. ||
1 DAYS
2 WEEKS
3 MONTHS
4 YEARS
REFUSED .......................................... -2
DON'T KNOW/NOT SURE ......................... -1

B33. Do you think it is likely, or do you think it is unlikely, that you will return to smoking in the next 12 months?

(RETNSMK)

LIKELY ............................................. 1
UNLIKELY .......................................... 2
REFUSED ........................................... 7
DON'T KNOW/NOT SURE ....................... 8
SECTION C: RECENT SMOKING HISTORY

C1. During the past 12 months, have you quit smoking for one day or longer?

(QUITONE)

YES ............................................... 1
NO .................................................. 2
REFUSED ........................................... 7
DK/NOT SURE .................................... 8

C1a. During the past 12 months, when you quit smoking for one day or longer, was this because you were trying to quit permanently?

YES ............................................... 1
NO .................................................. 2
REFUSED ........................................... 7
DK/NOT SURE .................................... 8

C2. During the past 12 months how long ago was the start of your most recent attempt to quit smoking that lasted for one day or longer?

(LASTQUIT) (LASTUNI4)

NUMBER ...................................... [__][__]

UNIT ............................................. [__]

1 DAYS
2 WEEKS
3 MONTHS

REFUSED ........................................ -2
DON'T KNOW/NOT SURE ......................... -1

C3. For this most recent attempt, did you use counseling to adjust to life without cigarettes?

(QUITHELP)

YES ............................................... 1
NO .................................................. 2
REFUSED ........................................... 7

C4. What did you use? Was it . . .

(YES NO R DK)

HELPGRP a. Group counseling? ............................................. 1 2 7 8
HELPONE b. One-on-one counseling? ..................................... 1 2 7 8
HELPSELF c. Self-help materials? ......................................... 1 2 7 8
HELPTele d. Telephone counseling? ....................................... 1 2 7 8
HELPINET e. a site on the internet? ..................................... 1 2 7 8

C5. For this most recent attempt to quit smoking, did you use a nicotine substitute such as . . .

(NICPATCH) a. A Nicotine patch? ........................................... 1
(NICGUM)  b. Nicotine gum? ................................................. 1
NICINHA c. A Nicotine inhaler or spray? ............................. 1
NICLOZ d. Nicotine lozenges? ............................................ 1
C6. How long did you use the nicotine substitute(s) for this most recent attempt?

(NICNUM) (NICUNIT)
[TOTAL TIME USING ONE OR MORE NICOTINE SUBSTITUTES]
NUMBER ...................................... |_|_|_|_|
UNIT .............................................  |_|
[INTERVIEWER, IF NEEDED: WOULD THAT BE IN…?]
1  DAYS
2  WEEKS
3  MONTHS
4  YEARS
REFUSED........................................... -2
DON’T KNOW/NOT SURE ..................... -1

C6a. Why did you stop using the nicotine substitute?
QUIT SMOKING, DIDN’T NEED THE SUBSTITUTE ANYMORE, ..................  1
SUBSTITUTE MADE ME FEEL BAD, Didn’T LIKE EFFECTS, ....................  2
SUBSTITUTE Didn’T HELP ME QUIT SMOKING, .................................  3
AFRAID OF SUBSTITUTE – ADDICTION, HEART ATTACK, CANCER, ..........  4
STARTED SMOKING AGAIN....................................................................  5
OTHER (Specify:___________________)
REFUSED.................................................................................................  7
DON’T KNOW/NOT SURE...........................................................................  8

C7. Would you recommend a nicotine substitute to a friend who wanted to quit smoking?
(RECNR)
YES...............................................  1
NO .................................................  2
REFUSED..........................................  7
DK/NOT SURE.................................  8

C8. Who paid for your nicotine replacement therapy? Was it…
(PAYNR)
You completely, ..............................................................................................  1
You partially, and partially paid by health insurance or medical benefits, or ....................................................................................  2
Completely paid by health insurance or medical benefits? .....................  3
FREE FROM A RELATIVE OR FRIEND.........................................................  4
OTHER (Specify:___________________)
REFUSED.................................................................................................  7
DON’T KNOW/NOT SURE...........................................................................  8

C9. For this last attempt to quit smoking, did you use a prescription medication called . . .
(ZYBAN)
a. Zyban (or bupropion)? .................................................................  1
(OTHERAD)
b. Any other medication to help you quit smoking besides nicotine?(Specify:____)  1

→ [SKIP TO C13]
C10. How long did you use a prescription medication other than nicotine for this last attempt?

(ANTINUM) (ANTIUNIT)

NUMBER ...................................... |_|_|_|
UNIT .............................................  |_| |

[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN …]

1   DAYS
2   MONTHS
3   YEARS

REFUSED ..................................... -2
DON'T KNOW/NOT SURE ........... -1

C11. Would you recommend that a friend seek a prescription for this medication from their physician to help them quit?

(RECANTI)

YES ...............................................  1
NO ................................................  2
REFUSED .....................................  7
DON'T KNOW/NOT SURE ...........  8

C12. Who paid for your prescription? Was it….

(PAYANTI)

You completely, ..............................................................................................  1
You partially, and partially paid by health insurance or medical benefits, or ....................................................................................  2
Completely paid by health insurance or medical benefits? .......................  3
OTHER (Specify:___________________)

REFUSED ..................................  7
DON'T KNOW/NOT SURE ..................  8

C13. For this last attempt to quit smoking, did you use an alternative therapy to adjust to life without cigarettes? [IF NEEDED: Alternative therapies to quit smoking include herbal medicine, chiropractic, acupuncture, massage, hypnosis, and other things.]

(ALTTHPY)

YES ...............................................  1
NO ................................................  2
REFUSED .....................................  7
DON'T KNOW/NOT SURE ...........  8

C14. How long did you stay off cigarettes during that attempt to quit smoking?

(QUITOFFN) (QUITOFFU)

NUMBER ...................................... |_|_|_|
UNIT .............................................  |_| |

[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN …?]

1   DAYS
2   WEEKS
3   MONTHS

REFUSED ..................................... -2
DON'T KNOW/NOT SURE ........... -1
C15. Have you heard of the Colorado QuitLine?

(QUITLINE)
[IF ASKED: It’s a free telephone counseling service to help people quit smoking.]
[IF ASKED: The Colorado Department of Health can give you the QuitLine telephone number.]

YES ............................................... 1
NO ................................................... 2
REFUSED ........................................ 7
DK/NOT SURE ............................. 8
[SKIP TO C16]

C15a. Please tell me the telephone number.

(QUITNUM)

(1-)800-639-QUIT ......................... 1
(1-)800-639-7848 .......................... 2
OTHER NUMBER ............. |_|_|_|-|_|_|_|- |_|_|_|_| |
REFUSED ..................................... 7
DK/NOT SURE ............................. 8

C15b. Have you ever called the Colorado QuitLine?

(CALLQUIT)

YES .................................................. 1
NO ................................................... 2
REFUSED ........................................ 7
DON’T KNOW/NOT SURE .............. 8

C16. Have you heard of the Colorado QuitNet?

(QUITNET)
[IF ASKED: It’s an internet Web site to help people quit smoking.]
[IF NEEDED: The Colorado Department of Health can give you the internet address.]

YES ............................................... 1
NO ................................................... 2
REFUSED ........................................ 7
DK/NOT SURE ............................. 8
[SKIP TO D1]

C16a. Please tell me the internet address.

(WWWQUI)

URL ................................................ www.co.quitnet.com
OTHER URL .................................. www.______________.____
REFUSED ...................................... 7
DK/NOT SURE .............................. 8

C16b. Have you ever visited the Colorado QuitNet internet Web site?

(VSTNET)

YES .................................................. 1
NO ................................................... 2
REFUSED ........................................ 7
DON’T KNOW ................................. 8
SECTION D: LIFETIME SMOKING HISTORY

D1. How old were you when you smoked your first whole cigarette?
(SMK1AGE)

NEVER SMOKED WHOLE CIGARETTE........ 0 →[SKIP TO SECTION E]
YEARS OLD.................................... [___]
REFUSED......................................... -1
DON’T KNOW/NOT SURE..................... -2

D2. How old were you when you inhaled smoke for the first time from a cigarette you were smoking?
(INHALE)

YEARS OLD.................................... [___]
NEVER INHALED............................ 0 → [SKIP TO SECTION E]
REFUSED......................................... -2
DON’T KNOW/NOT SURE..................... -1

D3. How old were you when you first began to smoke cigarettes regularly?
(SMKAGE)

[IF ASKED: Regularly is at least a few cigarettes every few days.]
[IF ASKED: A few means at least every 4 or 5 days.]
YEARS OLD.................................... [___]
NEVER SMOKED REGULARLY............ 0 → [SKIP TO SECTION E]
REFUSED......................................... -2
DON’T KNOW/NOT SURE..................... -1

(PROGRAMMER: FORMER SMOKERS SKIP TO D5.)

D4. Have you ever smoked more cigarettes per day than you do now?
(DAYMORE)

YES................................................ 1
NO.................................................. 2
REFUSED......................................... 7
DON’T KNOW/NOT SURE..................... 8 → [SKIP TO SECTION E]

D5. At your peak level, how many cigarettes did you generally smoke per day?
(PEAKSMOK)

[IF NEEDED: Peak level means the most cigarettes per day you ever smoked on a regular basis.]
NUMBER OF CIGARETTES.................. [___]}
REFUSED......................................... -2
DON’T KNOW/NOT SURE..................... -1
[Now I would like to ask about other tobacco use.]

**E1.** Other than cigarettes, have you ever used any tobacco products such as chewing tobacco, snuff, cigars or pipes?

!(TOBPROD)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

→ [SKIP TO SECTION F]

**E2.** Have you ever smoked a tobacco pipe?

!(SMKPIPE)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

[SKIP TO E4]

**E3.** Do you now smoke a tobacco pipe every day, some days or not at all?

!(PIPEDAY)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>EVERY DAY</td>
<td>1</td>
</tr>
<tr>
<td>SOME DAYS</td>
<td>2</td>
</tr>
<tr>
<td>NOT AT ALL</td>
<td>3</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

**E4.** Have you ever smoked cigars, cigarillos, or little cigars?

!(SMKCIGAR)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

[SKIP TO E7]

**E5.** Have you smoked at least 50 cigars in your entire life?

!(CIGAR50)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

[SKIP TO E7]

**E6.** Do you now smoke cigars every day, some days or not at all?

!(CIGARDAY)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>EVERY DAY</td>
<td>1</td>
</tr>
<tr>
<td>SOME DAYS</td>
<td>2</td>
</tr>
<tr>
<td>NOT AT ALL</td>
<td>3</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

**E7.** Have you ever used chewing tobacco or snuff?

!(TOBUSE)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

[SKIP TO SECTION F]
**E8.** Have you used chewing tobacco or snuff at least 20 times in your entire life?  
*(TOB20)*

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>2</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>

**E9.** Do you now use chewing tobacco or snuff every day, some days, or not at all?  
*(TOBNOW)*

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>EVERY DAY</td>
<td>1</td>
</tr>
<tr>
<td>SOME DAYS</td>
<td>2</td>
</tr>
<tr>
<td>NOT AT ALL</td>
<td>3</td>
</tr>
<tr>
<td>REFUSED</td>
<td>7</td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE</td>
<td>8</td>
</tr>
</tbody>
</table>
SECTION F: SMOKING RESTRICTIONS

[Now I’d like to ask about smoking in your home and your workplace.]

F1. Which statement best describes the rules about smoking inside your home? Would you say …

(HOMERULE)
smoking is not allowed anywhere inside your home, ........................................ 1
smoking is allowed in some places inside your home, .................................... 2
smoking is allowed sometimes or for some people inside your home, .................. 3
smoking is allowed everywhere inside your home? ..................................... 4
NO RULES .................................................................................................. 5
OTHER (Specify): ______________________________________________________ 6
REFUSED ........................................................................................................ 7
DON’T KNOW/NOT SURE .............................................................................. 8

[PROGRAMMER: PROVIDE F2 IF NUMBER OF HOUSEHOLD MEMBERS >1, F2ALT IF HH MEMBERS = 1]

F2. I’m going to read you some possible reasons why people do not allow smoking anywhere inside their homes. For each reason, please indicate whether it is very important, somewhat important or not important to you for your household.

<table>
<thead>
<tr>
<th>Reason Description</th>
<th>Very Important</th>
<th>Somewhat Important</th>
<th>Not Important</th>
<th>RF</th>
<th>DK</th>
</tr>
</thead>
<tbody>
<tr>
<td>(SMKSENSI) a. To protect a household member who is sensitive to smoke, would you say it is …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>(SMKPRTCT) b. To protect the family from tobacco smoke would you say it is …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>(SMKYOUNG) c. To discourage young people from starting to smoke …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>(SMKQUIT) d. To encourage smokers to quit …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>(SMKODOR) e. To avoid unpleasant odor of smoking …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>(SMKANNOY) f. Because it annoys others …</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>
I'm going to read you some possible reasons why people do not allow smoking anywhere inside their homes. For each reason, please indicate whether it is very important, somewhat important or not important to you.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Very Important</th>
<th>Somewhat Important</th>
<th>Not Important</th>
<th>Refuse</th>
<th>Does Not Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. To protect you because you are sensitive to smoke in general, would you say it is ...............</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>b. To protect.. you in particular would you say it is1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>c. To discourage young people from starting to smoke.....................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>d. To encourage smokers to quit. ..................................................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>e. To avoid unpleasant odor of smoking. ........................................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>f. Because it annoys others. ......................................................</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

F3. Who decided that (read answer from F1 in your house), one or more smokers, one or more nonsmokers, or smokers and nonsmokers together?

<table>
<thead>
<tr>
<th>Decision</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>SMOKER(S) ............................................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NONSMOKER(S) ......................................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOTH (SMOKER[S] &amp; NONSMOKER[S]) ..................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED .........................................................................................</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE ...........................................................................</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

F4. In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars or pipes anywhere inside your home?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ..........................</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO .........................</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED ..........</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE.....</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

F5. Which statement best describes the rules about smoking in your personal vehicle? Would you say

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>smoking is never allowed in your personal vehicle, ...........................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>smoking is allowed sometimes in your vehicle, ...................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>smoking is allowed with the windows open, or ....................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>there are no rules about smoking inside the vehicle? ........................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T HAVE A VEHICLE ...........................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER (Specify): .............................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED .........................................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW/NOT SURE ...........................................................................</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

F6. In the last 12 months, have you ever asked someone not to smoke around you or your family?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES .....................</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO .....................</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED ..........</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>DON'T KNOW/NOT SURE.....</td>
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</tbody>
</table>
F7a. While working at your job, do you drive a taxi, truck or other vehicle most of the time? (WRKDRV)

[IF NEEDED: Most of the time means more than half the time that you are working.]

YES .............................................. 1
NO ............................................... 2 → [SKIP TO F7]
DON'T WORK .................................. 3 → [SKIP TO F11]
REFUSED .................................... 7 → [SKIP TO F7]
DON'T KNOW .............................. 8 → [SKIP TO F7]

F7b. Which of the following best describes the official policy about smoking in the vehicle? Would you say smoking is … (DRVPLCY)

not allowed at all, .......................................................... 1
not allowed for you but allowed for your passengers, or ...... 2
allowed for anyone? ...................................................... 3
NO POLICY .................................................................. 4
REFUSED .................................................................... 7
DON'T KNOW/NOT SURE ........................................... 8

F7. While working at your job, are you indoors most of the time? (INDRJOB)

YES .............................................. 1
NO / DON'T WORK .......................... 2
REFUSED .................................... 7 → [SKIP TO F11]
DON'T KNOW/NOT SURE ............ 8

F8. Which of the following best describes your place of work's official smoking policy for indoor public or common areas, such as lobbies, rest rooms, and lunch rooms? Would you say smoking is … (WRKPOLCY)

not allowed in any public areas, .............................. 1
allowed in some public areas, or ............................ 2
allowed in all public areas? .................................... 3
REFUSED ................................................................ 7
DON'T KNOW/NOT SURE ................................. 8

F9. Which of the following best describes your place of work's official smoking policy for work areas? Would you say smoking is … (OFFPOLCY)

not allowed in any work areas, ................................. 1
allowed in some work areas, or ............................. 2
allowed in all work areas? ...................................... 3
REFUSED ................................................................ 7
DON'T KNOW/NOT SURE ................................. 8

F10. In the past 30 days, has anyone, including yourself, smoked cigarettes, cigars, or pipes anywhere inside your workplace? (WORK30)

YES .............................................. 1
NO ............................................... 2
REFUSED .................................... 7
DON'T KNOW/NOT SURE ............ 8
F11. When you go out to dine, what section do you usually request to be seated in? Do you request …

(SMKDINE)

the smoking section, ........................................  1 → [SKIP TO SECTION G]
the nonsmoking section, or ...........................  2 → [SKIP TO F12]
the soonest available seating? ......................  3 → [SKIP TO SECTION G]
IT DEPENDS/VARIES/DIFFERENT ............  4
IT DOESN'T MATTER ........................................  5
R DOESN'T MAKE THE DECISION ..........  6
OTHER (Specify) _______________ → [SKIP TO SECTION G]
REFUSED .....................................................  7
DON'T KNOW/NOT SURE ............................  8

F11a. What does it depend on?

(DPNDINE)

DEPENDS ON WHO I AM DINING WITH ....... 1
DEPENDS ON HOW HUNGRY I AM ..........  2
DEPENDS ON THE RESTAURANT ..........  3
SOONEST AVAILABLE ..................  4
DEPENDS ON THE LENGTH OF THE WAIT .... 5
SPECIFY .................................................. 95
REFUSED .................................................. 97
DON'T KNOW .............................................. 98
[RECORD VERBATIM]

F12. If seating is not available in the nonsmoking section, about how long are you usually willing to wait for a nonsmoking table to become available? IF THE RESPONDENT SAYS “AS LONG AS IT TAKES” PROBE FOR AN AMOUNT OF TIME

(DINEWAIT) (DINEUNIT)

NUMBER .................................................. ___ | ___ | ___
UNIT | | |
   1 MINUTES
   2 HOURS
IT DEPENDS/VARIES/DIFFERENT ............  0
REFUSED .................................................. -1
DK/NOT SURE ........................................ -2
WON'T STAY, WILL LEAVE .................. -3
WILL SIT IN SMOKING SECTION .......... -4
AS LONG AS IT TAKES ....................... → [PROBE FOR AMOUNT OF TIME]

F12a. What does it depend on?

(DINEWHY)

DEPENDS ON HOW GOOD RESTAURANT IS/QUALITY .......... 1
DEPENDS ON HOW HUNGRY I AM ........................................ 2
DEPENDS ON WHO I AM DINING WITH ..................  3
AS LONG AS IT TAKES ...........................................  4
DEPENDS ON HOW MUCH TIME I HAVE .....................  5
DEPENDS ON THE LENGTH OF THE WAIT ....................  6
AFTER WAITING FOR A WHILE I WILL TAKE A TABLE IN THE
SMOKING SECTION ............................................  7
DEPENDS IF GOING OUT FOR SPECIAL OCCASION ..........  8
NOT WILING TO WAIT/WILL LEAVE/WILL GO TO ANOTHER
RESTAURANT ..................................................  9
ONLY GO TO NONSMOKING RESTAURANTS/ AROUND MY AREA
ALL RESTAURANTS ARE NONSMOKING .................. 10
NEVER HAD TO WAIT FOR A NONSMOKING TABLE .................. 11
DEPENDS ON THE LAYOUT OF THE RESTAURANT ............. 12
DEPENDS ON HOW CROWDED THE RESTAURANT IS ............ 13
WILL TAKE SMOKING TABLE ........................................... 14
WILL TAKE SOONEST AVAILABLE .................................... 15
SPECIFY [RECORD VERBATIM] ........................................ 95
REFUSED ......................................................................... 97
DON'T KNOW .................................................................... 98
[Now I'd like to ask you a few questions about your health, your health insurance and your health care.]

**G1. What health insurance do you have?**

**(INSTYPE) [IF MORE THAN ONE, ASK FOR THE PRIMARY HEALTH INSURANCE.]**

- NO HEALTH INSURANCE ...................................................... 1
- PACIFICARE ............................................................................ 2
- ANTHEM/BLUE CROSS & BLUE SHIELD/HMO COLORADO 3
- AETNA ..................................................................................... 4
- KAISER .................................................................................... 5
- CIGNA HEALTHCARE OF COLORADO ................................. 6
- UNITED HEALTHCARE .......................................................... 7
- HUMANA................................................................................. 8
- ROCKY MOUNTAIN HMO ....................................................... 9
- ONE HEALTH PLAN OF CO ................................................... 10
- ACCESS/COLORADO ACCESS ............................................. 11
- DENVER HEALTH .................................................................... 12
- VA OR MILITARY .................................................................... 13
- TRI-CARE ................................................................................ 14
- MEDICARE .............................................................................. 15
- MEDICAID................................................................................ 16
- SECURE HORIZON................................................................. 17
- SLOANS LAKE ......................................................................... 18
- STATE FARMS........................................................................ 19
- COMMUNITY HEALTH PLAN OF THE ROCKIES.................. 20
- FORTIS.................................................................................... 21
- ALLIANCE ............................................................................... 22
- FIRST HEALTH ....................................................................... 23
- GOLDEN RULE ....................................................................... 24
- METLIFE .................................................................................. 25
- MUTUAL OF OMAHA .............................................................. 26
- PREDENTIAL .......................................................................... 27
- UNICARE ............................................................................... 28
- PACIFIC LIFE ......................................................................... 29
- INTERCARE ........................................................................... 31
- GREAT-WEST HEALTHCARE OF COLORADO .................... 32
- OTHER (SPECIFY).................................................................. 95
- REFUSED ................................................................................ 97
- DON'T KNOW/NOT SURE ...................................................... 98

**G2. Would you say your health is . . .**

**(GOODHLTH)**

- Excellent,......................................................... 1
- Very good,....................................................... 2
- Good, ............................................................. 3
- Fair, or ......................................................... 4
- Poor?.............................................................. 5
- REFUSED .................................................... 7
- DON'T KNOW/NOT SURE ............... 8

**G3. Is there a place that you usually go when you are sick or need advice about your health?**

**(SICKPLAC)**

- YES / YES, MORE THAN ONE ... 1
- NO.............................................................. 2
- REFUSED .................................................... 7

SKIP TO G6
DON'T KNOW/NOT SURE ..........  8

**G4.** What kind of place is it? Is it a …

(PLACKIND)

[IF MORE THAN ONE, ASK FOR THE PRIMARY PLACE.]

- clinic or health center, ...................... 1
- doctor’s office or HMO, .................... 2
- hospital emergency room, ............... 3
- hospital outpatient department, or ... 4
- some other place? (specify) ............ 95

REFUSED ........................................ 97
DON'T KNOW/NOT SURE .............. 98

**G5.** Is that {full name from G4} the same place you USUALLY go when you need routine or preventive care, such as a physical examination or check up?

(WELKIND)

- YES ..............................................  1  → [SKIP TO G7]
- NO................................................     2
- REFUSED ....................................  7
- DON'T KNOW/NOT SURE ..........  8

**G6.** What kind of place do you USUALLY go to when you need routine preventive care, such as a physical examination or check-up?

(WELKIND2)

- clinic or health center, ..........  1
- doctor’s office or HMO, ..........  2
- hospital emergency room, ..........  3
- hospital outpatient department, or 4
- or some other place? ..............  5
- NO PLACE ...................................  6
- REFUSED ....................................  7
- DON'T KNOW/NOT SURE ..........  8

**G7.** During the past 12 months, how many times have you seen a doctor or other health care professional about your own health? Do not count times in the hospital overnight, emergencies, home health visits, or telephone calls to a doctor or other health professional.

[100 = 100 OR MORE VISITS]

(SEEDOCTR)

- TIMES .......................................... |_|_|_|
- REFUSED .................................... -2
- DON'T KNOW/NOT SURE .......... -1

**G8.** About how long has it been since you last saw or talked to a doctor or other health care professional about your own health? Include doctors seen while a patient in a hospital.

(LASTSAW) (LASTUNI)  ENTER ZERO FOR “NEVER SEEN A DOCTOR”

- NUMBER.................................. |_|_|_|
- UNIT........................................ ..

[INTERVIEWER, READ IF NEEDED: WOULD THAT BE IN…]

1   DAYS
2   MONTHS
3   YEARS
- REFUSED .................................... -2
- DON'T KNOW/NOT SURE .......... -1
G9. {In the last 12 months/In the last 12 months before you quit} did a doctor advise you to stop smoking?

(1) YES .............................................. 1

(2) NO ................................................ 2

(3) REFUSED .................................... 7

[SKIP TO G12]

(4) DON'T KNOW/NOT SURE ........ 8

G10. {In the last 12 months/In the last 12 months before you quit}, did a doctor refer you to, or give you information on a smoking cessation program?

(1) YES .............................................. 1

(2) NO ................................................ 2

(3) REFUSED .................................... 7

[SKIP TO G11]

(4) DON'T KNOW/NOT SURE ........ 8

G10a. What smoking cessation program was it?

(1) COLORADO QUITLINE ............... 1

(2) QUITNET ..................................... 2

(3) A CLASS OR A GROUP .............. 3

(4) OTHER (Specify) ________________

(5) REFUSED .................................... 7

(6) DON'T KNOW / NOT SURE ........ 8

G11. Did you try to quit when your doctor advised you to stop smoking?

(1) YES .............................................. 1

(2) NO ................................................ 2

(3) REFUSED .................................... 7

(4) DON'T KNOW / NOT SURE ........ 8

G12. Does your health insurance pay for help to quit smoking, such as counseling, prescriptions, or nicotine substitutes like gum or patches?

(1) YES ................................................ 1

(2) NO .................................................. 2

(3) REFUSED .................................... 7

(4) DON'T KNOW/NOT SURE ............ 8

G13. Do you think your family would prefer that you quit smoking for good?

(1) YES .............................................. 1

(2) NO ................................................ 2

(3) REFUSED .................................... 7

(4) DK/NOT SURE ............................. 8
SECTION H: ATTITUDES AND OPINIONS

[Now I’m going to ask some questions about your opinion on public policy and smoking.]

[PROGRAMMER: RANDOMIZE INTERVIEW ORDER OF QUESTIONS H1-H4]

H1. Do you think the laws banning the sale of tobacco products to minors are adequately enforced, or are not adequately enforced?

(MINORS)

YES, ENFORCEMENT ADEQUATE ....................................... 1
NO, ENFORCEMENT NOT ADEQUATE ................................ 2
REFUSED ............................................................................... 7
DON’T KNOW/NOT SURE ...................................................... 8

H4. Do you think that store owners should need a license to sell tobacco?

/LICENSE

YES .............................................. 1
NO ................................................ 2
REFUSED .................................... 7
DON’T KNOW/NOT SURE .......... 8

H5. Do you think that inhaling smoke from someone else’s cigarette harms the health of babies and children?

(KIDHELTH)

YES ...................................................... 1
NO ........................................................................... 2
REFUSED ....................................................................... 7
DON’T KNOW/NOT SURE ........ 8

H7. In the United States today, cigarettes must have warning labels on the package and may not be sold to people under 18. In your opinion, should the rules for advertising and selling cigarettes be more strict, less strict, or stay the same?

(ADRULE)

[PROGRAMMER NOTE: RANDOMIZE TEXT ORDER OF OPTIONS "more strict", ‘less strict”, “stay the same”.

LESS STRICT ........................................................................................................... 1
STAY THE SAME .................................................................................................... 2
MORE STRICT ......................................................................................................... 3
OTHER (Specify) ..................................................................................................... 95
REFUSED ............................................................................................................... 97
DON’T KNOW ......................................................................................................... 98

H8. For each of the following locations, do you think smoking should be allowed in all areas, some areas, or not allowed at all?

(RESTAREA)

a. In restaurants, would you say..........................1 2 3 7 8

(SCHLAREA)

b. In schools, would you say..............................1 2 3 7 8

(WORKAREA)

c. In indoor work areas, would you say .............1 2 3 7 8

(PUBLAREA)
d. In public places, would you say......................1 2 3 7 8
H9. During the last 12 months, have you heard of any activities in your community to reduce exposure to secondhand smoke?  

(CMNTYACT)  

YES ..............................................  1  
NO ................................................  2  
REFUSED ....................................  7  
DON'T KNOW/NOT SURE ..........  8  

H10. Would you favor or oppose a law to ban smoking in all workplaces, including restaurants and bars?  

SUPPORT ......................................................... 1  
OPPOSE ............................................................ 2  
REFUSED ............................................................ 7  
DON'T KNOW / NOT SURE ................................. 8  

H11. In the elections for President and Congress last November, did things come up that kept you from voting, or did you happen to vote?  

VOTED ............................................................. 1  
DID NOT VOTE, THINGS CAME UP .................  2  
REFUSED ............................................................ 7  
DON'T KNOW .................................................... 8
SECTION I: MEDIA EXPOSURE

[Now I’m going to ask a few questions about ads you might have seen or heard about smoking.]

I1. In the last month, would you say you saw...

(TVAGANST)

A lot of TV commercials against smoking, ..................................... 1
A few TV commercials against smoking, ....................................... 2
No TV commercials against smoking, but did see something
in a TV program, or ................................................................. 3
Did not see anything on TV against smoking? .......................... 4
NEVER/RARELY WATCH TV ................................................... 5
REFUSED ................................................................................. 7
DON’T KNOW/NOT SURE ....................................................... 8

I2. In the last month, would you say you heard . . .

(RDAGANST)

A lot of radio commercials against smoking, ................................. 1
A few radio commercials against smoking, .................................... 2
No radio commercials against smoking, but did hear something
in a radio program, or ................................................................ 3
Did not hear anything on the radio against smoking? ................. 4
NEVER/RARELY LISTEN TO THE RADIO .............................. 5
REFUSED ................................................................................. 7
DON’T KNOW/NOT SURE ....................................................... 8

I3. In the last month, how many billboards, bus ads, or posters did you see with messages against
smoking? Would you say you saw . . .

(BDAGANST)

A lot of these types of signs against smoking, ............................... 1
A few of these types of signs against smoking, or ....................... 2
None of these types of signs against smoking? ......................... 3
REFUSED ................................................................................. 7
DON’T KNOW/NOT SURE ....................................................... 8
Finally, I have some background questions.

Research has found that some health characteristics and behaviors, like smoking, differ by things like age, race, sexual orientation and so on. One purpose of this study is to help learn more about these factors.

I want to reassure you that all your answers are completely confidential. If we come to any question you’d prefer not to answer, just let me know and we’ll go on.

[PROGRAMMER:
IF RESPONDENT ANSWERED SECTION A, AUTOCODE J1, J1a, J1b, J2, J4, & SKIP TO J3.]

J1. Which one of the following categories best describes you? Are you…

(RACEGRP)

Hispanic or Latino, .......................................... 1  
white, .................................................................. 2  
black, African American, ................................... 3  
Asian, ............................................................... 4  
Native Hawaiian, other Pacific Islander, .......... 5  
American Indian, or Alaska Native? ............... 6  
OTHER [SPECIFY] _____________________________ 95  
REFUSED ....................................................... 7  
DON’T KNOW/NOT SURE ............................... 8  

J1a. Which do you usually say, "Hispanic" or "Latino"?

(HISPLAT)

HISPANIC .................................................. 1  
LATINO ...................................................... 2  
BOTH .......................................................... 3  
REFUSED .................................................. 7  
DON’T KNOW/NOT SURE ............................ 8  

J1b. Do you consider yourself to be…

(VERRACE)

Mexican, ....................................................... 1  
Mexican American, ....................................... 2  
Spanish, or ................................................... 3  
other Hispanic or Latino? [SPECIFY] _________ 95  
REFUSED .................................................. 7  
DK/NOT SURE ............................................ 8  

J3. What language do you usually speak at home?

(LANGHOME)

ENGLISH ................................................. 1  
SPANISH .................................................. 2  
BOTH ENGLISH AND SPANISH .................. 3  
FRENCH ..................................................... 4  
GERMAN .................................................... 5  
CHINESE ................................................... 6  
KOREAN .................................................... 7  
CANTONESE ............................................. 8  
OTHER (SPECIFY) _________________________ 95  
REFUSED .................................................. 7  
J#a. During the past 12 months, have you had a flu shot?

YES .............................................. 1
NO ................................................... 2
REFUSED ...................................... 7
DON’T KNOW ............................... 8

J#b. How long has it been since you last visited a dentist or a dental clinic for any reason?

Within the past year (< 12 months ago) ...................... 1
Within the past 2 years (1 year but < 2 years ago) ....... 2
Within the past 5 years (2 years but < 5 years ago) ... 3
5 or more years ago ......................................... 4
Never .................................................................. 5
REFUSED .................................................. 7
DON’T KNOW ............................................. 8

PROGRAMMER: ASK A RANDOM HALF OF THE RESPONDENTS J#c AND ASK THE OTHER HALF J#d.

J#c. Now I'll read a list of terms people sometimes use to describe themselves. The terms are heterosexual or straight; homosexual or (to MALES, read “gay”; to FEMALES, read “lesbian”); and bisexual. As I read the list again, please stop me when I get to the term that best describes how you think of yourself:

heterosexual or straight ......................... 1
homosexual or (gay / lesbian) .............. 2
bisexual ............................................ 3
OTHER ........................................... 5
REFUSED ....................................... 7
DON’T KNOW ................................. 8

J#d. Do you consider yourself to be: Heterosexual, that is, straight; Homosexual, that is gay or lesbian; Bisexual, or something else?

Heterosexual, that is, straight......... 1
Homosexual, that is gay or lesbian .. 2
bisexual .......................................... 3
OTHER (Specify) .............................. 5
REFUSED ....................................... 7
DON’T KNOW ................................. 8
J4. What is the highest grade or year of regular school or college that you completed?

(VEREDUC)

GRADE ............................................................. 1-12
POST SECONDARY SCHOOL .............................................. 13
SOME COLLEGE ..................................................... 14
BA/BS-LEVEL DEGREE ................................................. 15
BA/BS-LEVEL DEGREE + SOME GRADUATE SCHOOL .......... 16
MA/MS, PHD OR HIGHER ............................................... 17
NO FORMAL SCHOOLING ................................................ 50
OTHER (SPECIFY) ....................................................... 95
REFUSED .................................................................. 97
DON'T KNOW ........................................................... 98

J4a. Did you graduate from high school, or did you earn a GED (also called a general education diploma)?

(VERGED)

GRADUATED FROM HIGH SCHOOL ................ 1
GED, GENERAL EDUCATION DIPLOMA ........ 2
NEITHER, DID NOT GRADUATE ................. 3
REFUSED .............................................................. 7
DON'T KNOW/NOT SURE ................................. 8

J14b. Are you currently . . .

(CURRWORK)

Working for money .............................................. 1
A homemaker .................................................... 2  ➔ [SKIP TO J14bb]
Self-employed .................................................. 3
A student ............................................................ 4  ➔ [SKIP TO J14b2]
A student and working for money .............. 8  ➔ [AUTOCODE J14b2a=1, SKIP TO J14b2]
Retired ............................................................. 5
Unemployed, or .................................................. 6
Unable to work/DISABLED? ....................... 7  ➔ [SKIP TO J14bb]
REFUSED ........................................................... 97
DON'T KNOW/UNSURE ......................................... 98

J14b1. What kind of business or industry are you working in?

SPECIFY .................................................................... 7
DON'T KNOW/UNSURE ........................................... 8

J14b1a. What kind of work are you doing? (For example: sales clerk, computer specialist, farming)?

SPECIFY .................................................................... 7
DON'T KNOW/UNSURE ........................................... 8

J14b2. Are you a full time student or a part time student?

FULL TIME .......................................................... 1
PART TIME .......................................................... 2
REFUSED ............................................................. 7
DON'T KNOW/UNSURE ........................................... 8
J14b2a. Are you also working at a job for money?

YES .............................................. 1
NO ................................................ 2
REFUSED .................................... 7 [SKIP TO J14bb]
DON'T KNOW/UNSURE .......... 8

J14b2a1. What kind of business or industry are you working in?

SPECIFY ______________________
REFUSED .................................... 7
DON'T KNOW/NOT SURE .............. 8

J14b2b. What kind of work are you doing? (For example: sales clerk, computer specialist)?

YES .............................................. 1
NO ................................................ 2
REFUSED .................................... 7
DON'T KNOW/UNSURE .............. 8

J14a. Are you … (COUPLE)

Married, ........................................ 1
Divorced, ...................................... 2
Widowed, ..................................... 3
Separated, .................................... 4
Never been married, or .......... 5
A member of an unmarried
Couple/living as married? ............ 6
REFUSED .................................... 7
DON'T KNOW/NOT SURE .............. 8

J14bb. Do you have a computer in your home that is connected to the Internet? (INTRNET)

YES .............................................. 1
NO ................................................ 2
REFUSED .................................... 7
DON'T KNOW/UNSURE .............. 8

[ASK PREGNOW IF RESPONDENT IS FEMALE < 45 YEARS OF AGE]

J14c. To your knowledge, are you now pregnant? (PREGNOW)

YES .............................................. 1
NO ................................................ 2
REFUSED .................................... 7
DON'T KNOW .............................. 8
[The University of Colorado often creates new studies about smoking. Some studies invite smokers or nonsmokers from the general public to participate. In the future, would you like to hear about new studies that you could join?]

**K1.** May I have your full name, please?

[ENTNAME]

YES .............................................. 1
NO ................................................  2
REFUSED ....................................  7 [SKIP TO CLOSE]
DON’T KNOW/UNSURE..............  8

[IF RESPONDENT REFUSES TO GIVE LAST NAME, CODE SHIFT 7.]

FIRST NAME ______________________________________
(RESPFNAM)
MIDDLE INITIAL ______________________________________
(RESPMINT)
LAST NAME ______________________________________
(RESPLNAM)

**K2.** May I have your mailing address?

[PROBE FOR APARTMENT NUMBER]

STREET _______________________________________________
(RESPADDR)
CITY __________________
(RESPCITY)
ZIP __________________
(RESPZIP)

**K3.** In case you move, would you please give me the name and phone number of someone who does not live with you who would know your current telephone number? I will also need the town and state in which he/she lives.

CONTACT PERSON:

NAME ___________________ ________________________
(CON1FNAM) (CON1LNAM)
FIRST LAST

PHONE (         ) - (         ) - (            )
(CON1PHN)
CITY ____________________  STATE __________________
(CON1CITY) (CON1STAT)
ZIP _____________________
(CON1ZIP)

[Thank you very much for your cooperation. Your assistance has been very helpful.]