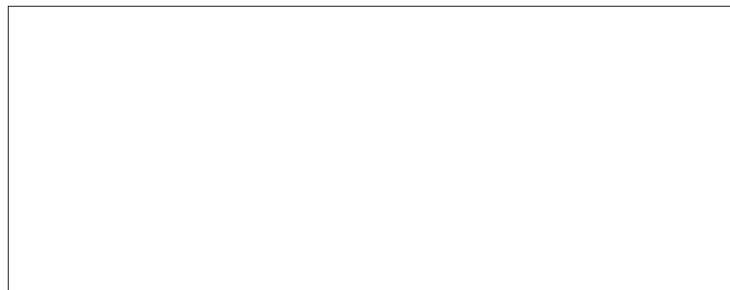


CANADIAN CONSUMER BEHAVIOUR SURVEY



Hello,

Thank you for agreeing to participate in the **Canadian Consumer Behaviour Survey**. We enclose \$5.00 as a token of our appreciation for your time and effort.

This survey covers various topics including: media usage, travel, automotive, retail shopping, and lifestyle habits.

It is very important that **you** complete this survey on the personal use of products and services and **not** someone else in your household.

Complete confidentiality of your responses is guaranteed. Please be assured that your name, address and telephone number will never be associated with your answers under any circumstances, and you will never be contacted to purchase anything as a result of your participation.

When you have completed the survey, please return the questionnaire promptly in the postage-paid envelope provided.

HOW TO COMPLETE THIS QUESTIONNAIRE

Please read the following instructions carefully. It is important to read each category. In the example below, the category on Restaurants is asking about the past month, while the category on Lotteries is asking about the past six months. Some questions require you to check **one** response only for each listed item, while others require you to check **as many responses as apply** to you.

Each page is divided into two or three columns. Always begin with the column on the left and answer the questions going **down** the page, not across the page.

After reading a category and the information that is being requested, check the box that best matches your response. For example, under RESTAURANTS—Personally Used In Past Month, checking "YES" would indicate that you have personally used a restaurant in the past month.

If you check "NO" under a heading in a black box, skip to the next black box. If you check "YES", complete the rest of the section as it applies to you.

RESTAURANTS	PERSONALLY USED	LOTTERIES	PERSONALLY	
	In Past Month		Played Past 6 Months	Bought Past 6 Months
YES	<input checked="" type="checkbox"/>	YES	<input checked="" type="checkbox"/>	
NO	<input type="checkbox"/>	NO	<input type="checkbox"/>	
RESTAURANTS	KINDS PERSONALLY USED	TICKETS BOUGHT:		
	Times Past Month	1	<input type="checkbox"/>	
	None 1-2 3-4 5+	2-5	<input type="checkbox"/>	
		6-10	<input checked="" type="checkbox"/>	
(check response on each line)		11-15	<input type="checkbox"/>	
KINDS:		16 or more	<input type="checkbox"/>	
Delivery	<input type="checkbox"/>	VACATION ACCOMMODATION	PERSONALLY STAYED AT	
Eat-In	<input type="checkbox"/>			
Take-Out	<input type="checkbox"/>		In Past 12 Months	
RESTAURANTS	PERSONALLY USED	(check all that apply)		
	In Past Month	TYPE:		
(check all that apply)		Camping Site	<input type="checkbox"/>	
DINED AT:		Motel	<input checked="" type="checkbox"/>	
Burger King	<input checked="" type="checkbox"/>	Hotel	<input checked="" type="checkbox"/>	
Harvey's	<input type="checkbox"/>	Resort	<input type="checkbox"/>	
McDonalds	<input type="checkbox"/>	None of the above	<input type="checkbox"/>	
Swiss Chalet	<input checked="" type="checkbox"/>			
Wendy's	<input type="checkbox"/>			

PRIMARY MEDIA SOURCES, TIME SPENT WITH MEDIA, INTERNET

PRIMARY MEDIA SOURCE PERSONALLY USE MOST OFTEN FOR EACH TYPE OF INFORMATION

PRIMARY MEDIA SOURCE RELIED ON

Daily Newspapers
Printed or Online Community Newspapers TV Radio Magazines Flyers/
Inserts Yellow Pages Internet

(check one response on each line)

FOR INFORMATION ON:

Economic and business news	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about your local community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International and national news	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
News about your city or town	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TO HELP MAKE PURCHASE DECISIONS ABOUT PRODUCTS SUCH AS:

Automobiles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer hardware and software	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fashion (clothing, jewellery, cosmetics)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food and groceries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home entertainment items (eg. TV, DVD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home furnishings (appliances, furniture, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home or apartment rentals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home renovations/decorating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office equipment or supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investments (stocks, bonds, RRSPs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Purchasing a dwelling or property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports and exercise equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wireless products/services (Cell Phones, Smartphones, BlackBerries.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TO HELP YOU CHOOSE SERVICES & ACTIVITIES SUCH AS:

Banking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entertainment (movies, theatre, concerts, restaurants)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacation travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TIME SPENT WITH MEDIA	IN PAST 12 MONTHS			METHOD OF INTERNET ACCESS	HOW PERSONALLY ACCESS	
	Less Time Than In Previous Year	About Same Time As In Previous Year	More Time Than In Previous Year		From Home	
Community newspapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dial-up (Telephone)	<input type="checkbox"/>	
Daily newspapers (printed version)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High Speed (Cable or Telephone)	<input type="checkbox"/>	
Daily newspapers (online version)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wireless (Cell Phone, Smartphones, BlackBerry)	<input type="checkbox"/>	
Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do not access Internet from home	<input type="checkbox"/>	
Magazines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ON-LINE PURCHASES/TRANSACTIONS	PERSONALLY MADE ON-LINE PURCHASE/TRANSACTION	
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		In Past 12 Months	
Television	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	YES	<input type="checkbox"/>	
				NO	<input type="checkbox"/>	
				PRODUCTS/SERVICES:		
				Banking (accounts, loans, mortgages, etc.)	<input type="checkbox"/>	
				Investments (RRSPs, mutual funds, GICs)	<input type="checkbox"/>	
				Books	<input type="checkbox"/>	
				Movies/theatre	<input type="checkbox"/>	
				Music (CDs, download songs, etc.)	<input type="checkbox"/>	
				Computer hardware	<input type="checkbox"/>	
				Computer software	<input type="checkbox"/>	
				Automotive products	<input type="checkbox"/>	
				Clothing	<input type="checkbox"/>	
				Home accessories (lamps, mirrors, pictures, etc.)	<input type="checkbox"/>	
				Home electronics (excl. computers)	<input type="checkbox"/>	
				Household appliances	<input type="checkbox"/>	
				Jewellery/watches	<input type="checkbox"/>	
				Other products and services	<input type="checkbox"/>	

INTERNET	PERSONALLY ACCESSED		
	Yesterday	In Past 7 Days	In Past Month
YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INTERNET ACCESS	PERSONALLY SPENT IN AVERAGE WEEK		
	At Home	At Work	Elsewhere
(check response in each column)			
TIME ON-LINE:			
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Less than 1 hr.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-2 hrs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3-5 hrs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6-15 hrs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16+ hrs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INTERNET, BOOKS, CDs, DVDs, VIDEO GAMES, CUSTOMER REWARD/LOYALTY PROGRAMS

ON-LINE PURCHASES/TRANSACTIONS	PERSONALLY MADE ON-LINE PURCHASE/TRANSACTION	CDs, DVDs, Video Games	PERSONALLY BOUGHT	PERSONALLY RENTED
	In Past 12 Months		In Past 12 Months	In Past 12 Months
CANADIAN WEBSITES BOUGHT FROM: amazon.ca <input type="checkbox"/> canadiantire.ca <input type="checkbox"/> chapters.indigo.ca <input type="checkbox"/> expedia.ca <input type="checkbox"/> futureshop.ca <input type="checkbox"/> hbc.com <input type="checkbox"/> sears.ca <input type="checkbox"/> Any other Canadian website <input type="checkbox"/>		CDs <input type="checkbox"/> DVDs <input type="checkbox"/> <input type="checkbox"/> Video Games <input type="checkbox"/> <input type="checkbox"/>		
		NUMBER BOUGHT/RENTED	PERSONALLY BOUGHT/RENTED	
			CDs	DVDs
				Video Games
WEBSITES ACCESSED — PAST MONTH —	Did Not Access	HOW OFTEN PERSONALLY ACCESSED		
		Daily	Weekly	Monthly
(check one response on each line)				
Banking (accounts, mortgages, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Investments (RRSPs, online trading)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real estate purchase or rental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Airlines, other transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel destinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Books	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Movies/theatre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Music (CDs, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restaurant listings/reviews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automobiles/auto. prod./services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clothing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer hardware/software	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Instant Messaging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online auction (eBay, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online daily newspaper classifieds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online classifieds (eg. Craigslist, Kijiji, any non-newspaper)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social networks (eg. Facebook)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment/careers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other products & services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Media Sites:				
Local daily newspapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Magazine sites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of town daily newspapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV network/stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BOOKS —Hard Cover Or Paperback—		PERSONALLY BOUGHT		
		In Past 12 Months		
YES <input type="checkbox"/>				
NO <input type="checkbox"/>				
NUMBER BOUGHT IN PAST 12 MONTHS				
1-2 <input type="checkbox"/>				
3-4 <input type="checkbox"/>				
5-9 <input type="checkbox"/>				
10-19 <input type="checkbox"/>				
20+ <input type="checkbox"/>				
		CUSTOMER REWARD/LOYALTY PROGRAMS		
		PERSONALLY BELONG		
		Currently		
YES <input type="checkbox"/>				
NO <input type="checkbox"/>				
		PERSONALLY IN PAST 6 MONTHS		
		Collected Redeemed		
TYPES:				
Airlines (eg. Aeroplan, Air Miles) <input type="checkbox"/>				
Financial institutions/credit cards (eg. RBC Rewards, American Express Membership Rewards) <input type="checkbox"/>				
Gasoline (eg. Petro Points, Esso Extra Program) <input type="checkbox"/>				
Major department stores (eg. HBC Rewards, Sears Club) <input type="checkbox"/>				
Other retail stores (eg. Canadian Tire Money, Shoppers/ Pharmaprix Optimum) <input type="checkbox"/>				
Other <input type="checkbox"/>				

NEWSPAPER CLASSIFIED ADS, FLYERS & INSERTS, TV PROGRAMMES

DAILY NEWSPAPER CLASSIFIED ADS	PERSONALLY READ OR LOOKED INTO PRINTED CLASSIFIED ADS		PERSONALLY ACCESSED ONLINE NEWSPAPER CLASSIFIED ADS	
	In Past 7 Days	In Past 12 Months	In Past 7 Days	In Past 12 Months
PERSONALLY READ:				
Careers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dwelling/property for sale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment/help wanted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Merchandise for sale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional services (eg. computer, legal, accounting services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rental accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for your home (eg. lawn care, housekeeping, plumbers, painters)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicles for sale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did none of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DAILY NEWSPAPER CLASSIFIED ADS	ACTIONS TAKEN PERSONALLY AFTER SEEING			
	PRINTED CLASSIFIED ADS		ONLINE NEWSPAPER CLASSIFIED ADS	
	In Past 7 Days	In Past 12 Months	In Past 7 Days	In Past 12 Months
Apply for a job or send resume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about a professional service (eg. computer, legal, accounting services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about purchasing a dwelling or property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about renting a dwelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about a service for your home (eg. lawn care, housekeeping, plumbers, painters)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about a vehicle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inquire about other products or services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did none of the above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLACED AN AD IN DAILY NEWSPAPER CLASSIFIEDS	PERSONALLY PLACED AN AD IN:			
	PRINTED CLASSIFIED SECTION		ONLINE NEWSPAPER CLASSIFIED SECTION	
	In Past 7 Days	In Past 12 Months	In Past 7 Days	In Past 12 Months
YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

USE OF FLYERS/INSERTS	PERSONALLY USED FLYERS/INSERTS IN PAST 12 MONTHS			TV VIEWING	PERSONALLY WATCHED
	Frequently	Sometimes	Never		In Past 7 Days

<p>(check response on each line)</p> <p>TO PLAN OR MAKE PURCHASES OF:</p> <p>Appliances or furniture</p> <p>Clothing and accessories</p> <p>Computer hardware/software</p> <p>Entertainment/restaurants</p> <p>Fitness clubs</p> <p>Groceries</p> <p>Health care or personal care items</p> <p>Home entertainment items</p> <p>Home furnishings</p> <p>Home improvement products and services</p> <p>Investments or banking services</p> <p>Sports equipment</p> <p>Wireless products (Cell Phones, Smartphones, BlackBerries)</p> <p>Other products or services</p>	<p>(check all that apply)</p> <p>TYPES:</p> <p>Children's shows</p> <p>Documentaries</p> <p>Dramas</p> <p>Entertainment news programmes (eg. Extra, ET)</p> <p>Mini-series</p> <p>Movies</p> <p>Music video programmes</p> <p>Nature shows</p> <p>Newscasts (eg. national, local news)</p> <p>News programmes (eg. W5, 60 Minutes)</p> <p>Reality shows (eg. Survivor)</p> <p>Religious programmes</p> <p>Science fiction</p> <p>Situation comedies (eg. Being Erica)</p> <p>Soap operas</p> <p>Sports</p> <p>Talk shows</p> <p>Variety specials</p>
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LOTTERY TICKETS, PHOTOGRAPHY, FILM & PHOTOFINISHING, HOBBIES, OUTDOOR/INDOOR ACTIVITIES, SPORTING EVENTS, LEISURE ACTIVITIES

LOTTERY TICKETS	PERSONALLY BOUGHT		OUTDOOR/INDOOR ACTIVITIES	PERSONALLY PARTICIPATE (IN SEASON WHERE APPLICABLE)			
	In Typical Month			Times Per Month			
			Never	1 Or Less	2-3	4+	
AMOUNT SPENT: None/Do not buy lottery tickets <input type="checkbox"/> \$10 or less <input type="checkbox"/> \$11 to \$25 <input type="checkbox"/> \$26 to \$50 <input type="checkbox"/> \$51 to \$99 <input type="checkbox"/> \$100+ <input type="checkbox"/>			(check response on each line) Bicycling <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Boating or sailing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Camping <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Canoeing/Kayaking <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Cross-country skiing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Downhill skiing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fishing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Hiking/Backpacking <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Hunting <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Ice skating <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> In-line skating <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rock climbing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Snowboarding <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Snowmobiling/ATVing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Swimming <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other outdoor activities <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
TYPES OF TICKETS BOUGHT: Charities (eg. Hospitals) <input type="checkbox"/> Draws (eg. 649) <input type="checkbox"/> Instant Wins (eg. Scratch Tickets) <input type="checkbox"/> Sports (eg. Proline) <input type="checkbox"/>							
PHOTOGRAPHY	PERSONALLY		INDIVIDUAL & TEAM SPORTS	PERSONALLY PARTICIPATE (IN SEASON WHERE APPLICABLE)			
	Currently Own	Intend To Purchase Next 12 Months		Times Per Month			
			Never	1 Or Less	2-3	4+	
(check all that apply in each column) 35mm camera (Point and shoot/SLR) <input type="checkbox"/> <input type="checkbox"/> Accessories (lenses, flashes, etc.) <input type="checkbox"/> <input type="checkbox"/> Digital point and shoot camera <input type="checkbox"/> <input type="checkbox"/> Digital single lens reflex camera (SLR) <input type="checkbox"/> <input type="checkbox"/> Disposable camera <input type="checkbox"/> <input type="checkbox"/> Memory card <input type="checkbox"/> <input type="checkbox"/> Printer <input type="checkbox"/> <input type="checkbox"/> Video camera <input type="checkbox"/> <input type="checkbox"/>			(check response on each line) Bowling <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Curling <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing baseball <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing basketball <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing football <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing golf <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing hockey <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing soccer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing squash/other racquet sports <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing tennis <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Playing volleyball <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Practicing martial arts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other sports <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
FILM & PHOTO FINISHING	PERSONALLY DEVELOPED/PROCESSED		PROFESSIONAL SPORTING EVENTS	PERSONALLY ATTENDED			
	In Past 6 Months			Number Of Times Past 12 Months			
			None	1-2	3-9	10+	
NUMBER OF ROLLS OF FILM: None <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+ <input type="checkbox"/>			(check response on each line) Auto Racing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Baseball (major or pro. minor league) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Basketball (NBA) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Football (CFL/NFL) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Hockey (NHL/AHL) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Horse racing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Soccer <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other professional sporting events <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
NUMBER OF DIGITAL PRINTS: None <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+ <input type="checkbox"/>							
WHERE PURCHASED/ PROCESSED: Camera store <input type="checkbox"/> Electronics store <input type="checkbox"/> Pharmacy <input type="checkbox"/> Supermarket/SuperCentre (Wal-Mart, etc.) <input type="checkbox"/> Via the Internet <input type="checkbox"/> Other <input type="checkbox"/>							
HOBBIES	PERSONALLY PARTICIPATE		LEISURE ACTIVITIES	PERSONALLY ATTENDED			
	Past 12 months			Number Of Times Past 12 Months			
			None	1-2	3-9	10+	
(check all that apply) Bird watching <input type="checkbox"/> Dancing <input type="checkbox"/> Gardening <input type="checkbox"/> Gourmet cooking <input type="checkbox"/> Photography <input type="checkbox"/> Playing an instrument <input type="checkbox"/> Reading books <input type="checkbox"/> Sewing/needlework/knitting <input type="checkbox"/> Video gaming <input type="checkbox"/> Woodworking <input type="checkbox"/> Other handicrafts <input type="checkbox"/> Other hobbies <input type="checkbox"/>			(check response on each line) Ballet or dance performances <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Beauty Salon/Spa <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Casinos <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Clubs/night clubs <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Country and Western concerts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Folk concerts and festivals <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Jazz concerts and festivals <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Live theatre <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Museums and art galleries <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Pop/rock concerts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Pubs/bars <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Symphony or classical concerts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				

FITNESS & EXERCISE, LOCAL ATTRACTIONS, ANNUAL EVENTS, MOVIES, RESTAURANTS, GIFT CARDS, VACATION/LEISURE TRAVEL

FITNESS & EXERCISE	PERSONALLY PARTICIPATE		VACATION/LEISURE TRAVEL
	Times Per Week		-OVERNIGHT MEANS AT LEAST ONE NIGHT AWAY FROM HOME-
	Never 1 Or Less 2-3 4+		OVERNIGHT PERSONAL VACATION TRIPS TAKEN
(check response on each line) Exercising at health or fitness club <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Exercising at home <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Running or jogging <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Walking for exercise <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yoga or Pilates <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other health or fitness program <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other fitness/exercise activities <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			In Past 12 Months In Past 3 Years YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> NUMBER TAKEN: 1 <input type="checkbox"/> <input type="checkbox"/> 2 <input type="checkbox"/> <input type="checkbox"/> 3 <input type="checkbox"/> <input type="checkbox"/> 4-5 <input type="checkbox"/> <input type="checkbox"/> 6-11 <input type="checkbox"/> <input type="checkbox"/> 12 or more <input type="checkbox"/> <input type="checkbox"/>
LOCAL ATTRACTIONS	PERSONALLY ATTENDED		
	Number Of Times Past 12 Months		
	None 1-2 3-9 10+		
(check response on each line) xxxxx <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			OVERNIGHT PERSONAL VACATION TRIPS TAKEN Longest Vacation/Leisure Trip Taken In Past 3 Years 1 to 3 nights <input type="checkbox"/> 4 to 7 nights <input type="checkbox"/> 8 to 14 nights <input type="checkbox"/> 15 to 21 nights <input type="checkbox"/> More than 21 nights <input type="checkbox"/>
ANNUAL EVENTS	PERSONALLY ATTENDED IN PAST 3 YEARS		
	Yes No		
(check response on each line) xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/>			OVERNIGHT PERSONAL VACATION TRIPS TAKEN All Trips In Past 3 Years ACCOMMODATION USED (check all that apply) Campground/RV park <input type="checkbox"/> Hotel <input type="checkbox"/> Motel <input type="checkbox"/> Resort/lodge <input type="checkbox"/> Cottage (owned or rented) <input type="checkbox"/> Stayed with family/friends <input type="checkbox"/> Other accommodation <input type="checkbox"/>
MOVIES AT MOVIE THEATRE	PERSONALLY ATTENDED		
	In Past Month In Past 12 Months		
YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> NUMBER OF TIMES ATTENDED: 1 <input type="checkbox"/> <input type="checkbox"/> 2 <input type="checkbox"/> <input type="checkbox"/> 3 <input type="checkbox"/> <input type="checkbox"/> 4 <input type="checkbox"/> <input type="checkbox"/> 5-9 <input type="checkbox"/> <input type="checkbox"/> 10-19 <input type="checkbox"/> <input type="checkbox"/> 20+ <input type="checkbox"/> <input type="checkbox"/>			AMOUNT SPENT AMOUNT SPENT FOR SELF AND ALL OTHER HOUSEHOLD MEMBERS Maximum Amount Spent On Single Vacation/Leisure Trip In Past 3 Years Less than \$500 <input type="checkbox"/> \$500-\$1,000 <input type="checkbox"/> \$1,001-\$3,000 <input type="checkbox"/> \$3,001-\$7,000 <input type="checkbox"/> \$7,001-\$10,000 <input type="checkbox"/> Over \$10,000 <input type="checkbox"/>
RESTAURANTS	PERSONALLY EAT AT OR ORDER TAKE OUT/DELIVERY		
	Times Per Month		
	Never 1 Or Less 2-3 4+		
(check response on each line) Family restaurants <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fast food restaurants <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fine dining <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			OVERNIGHT PERSONAL VACATION TRIPS TAKEN All Trips In Past 3 Years VACATION/ LEISURE TRAVEL (check all that apply) DESTINATION: Canada: Newfoundland & Labrador <input type="checkbox"/> Nova Scotia <input type="checkbox"/> New Brunswick <input type="checkbox"/> Prince Edward Island <input type="checkbox"/> Montréal <input type="checkbox"/> Other Québec <input type="checkbox"/> Toronto <input type="checkbox"/> Ottawa <input type="checkbox"/> Other Ontario <input type="checkbox"/>
GIFT CARDS	PERSONALLY		
	In Past 6 Months		
	Purchased Used		
TYPES OF MERCHANTS: Entertainment (incl. cinema, restaurants) <input type="checkbox"/> <input type="checkbox"/> Major department stores <input type="checkbox"/> <input type="checkbox"/> Other retail stores <input type="checkbox"/> <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> None <input type="checkbox"/> <input type="checkbox"/>			

VACATION/LEISURE TRAVEL

-OVERNIGHT MEANS AT LEAST ONE NIGHT AWAY FROM HOME-		-OVERNIGHT MEANS AT LEAST ONE NIGHT AWAY FROM HOME-	
VACATION/ LEISURE TRAVEL	OVERNIGHT PERSONAL VACATION TRIPS TAKEN	VACATION / LEISURE TRAVEL	OVERNIGHT PERSONAL VACATION TRIPS TAKEN
	All Trips In Past 3 Years		All Trips In Past 3 Years
(check all that apply) DESTINATION: (CONTINUED) Canada Continued: Manitoba <input type="checkbox"/> Saskatchewan <input type="checkbox"/> Calgary <input type="checkbox"/> Edmonton <input type="checkbox"/> Other Alberta <input type="checkbox"/> Vancouver <input type="checkbox"/> Victoria <input type="checkbox"/> Other British Columbia <input type="checkbox"/> Yukon, Northwest Territories, Nunavut <input type="checkbox"/> USA: New England: Boston <input type="checkbox"/> Other Massachusetts <input type="checkbox"/> Other New England (Maine, New Hampshire, Vermont, Connecticut, Rhode Island) <input type="checkbox"/> Middle Atlantic: New York City <input type="checkbox"/> Other New York State <input type="checkbox"/> Pennsylvania <input type="checkbox"/> New Jersey <input type="checkbox"/> South Atlantic: Washington, D.C. <input type="checkbox"/> North Carolina <input type="checkbox"/> South Carolina <input type="checkbox"/> Georgia <input type="checkbox"/> Orlando <input type="checkbox"/> Other Florida <input type="checkbox"/> Other South Atlantic (Maryland, Delaware, West Virginia, Virginia) <input type="checkbox"/> East/North Central: Detroit <input type="checkbox"/> Other Michigan <input type="checkbox"/> Chicago <input type="checkbox"/> Other Illinois <input type="checkbox"/> Indiana <input type="checkbox"/> Ohio <input type="checkbox"/> West/North Central: (North Dakota, South Dakota, Minnesota, Iowa, Nebraska, Kansas, Missouri) <input type="checkbox"/> East/South Central: (Kentucky, Tennessee, Mississippi, Alabama) <input type="checkbox"/> West/South Central: New Orleans <input type="checkbox"/> Other Louisiana <input type="checkbox"/> Dallas/Fort Worth <input type="checkbox"/> Houston <input type="checkbox"/> Other Texas <input type="checkbox"/> Other West/South Central States (Oklahoma, Arkansas) <input type="checkbox"/>		DESTINATION: (CONTINUED) Mountain: Arizona <input type="checkbox"/> Colorado <input type="checkbox"/> Nevada, including Las Vegas <input type="checkbox"/> Other Mountain States (Montana, Idaho, Wyoming, Utah, New Mexico) <input type="checkbox"/> Pacific: San Francisco <input type="checkbox"/> Los Angeles <input type="checkbox"/> Other California <input type="checkbox"/> Oregon <input type="checkbox"/> Washington <input type="checkbox"/> Hawaii <input type="checkbox"/> Alaska <input type="checkbox"/> INTERNATIONAL: France <input type="checkbox"/> United Kingdom <input type="checkbox"/> Germany <input type="checkbox"/> Italy <input type="checkbox"/> Spain <input type="checkbox"/> Greece <input type="checkbox"/> Other Western Europe <input type="checkbox"/> Eastern Europe <input type="checkbox"/> Africa <input type="checkbox"/> Middle East <input type="checkbox"/> Japan <input type="checkbox"/> China/Hong Kong <input type="checkbox"/> Other Asia <input type="checkbox"/> Mexico <input type="checkbox"/> Cuba <input type="checkbox"/> Dominican Republic <input type="checkbox"/> Other Caribbean/Bermuda <input type="checkbox"/> Other Central/South America <input type="checkbox"/> Australia/New Zealand <input type="checkbox"/> Other international destinations <input type="checkbox"/>	
		MODE(S) OF TRANSPORTATION USED	OVERNIGHT PERSONAL VACATION TRIPS TAKEN
			All Trips In Past 3 Years
		(check all that apply) Airplane <input type="checkbox"/> Boat/ship <input type="checkbox"/> Bus <input type="checkbox"/> Private automobile/truck, van <input type="checkbox"/> Rented automobile/truck, van <input type="checkbox"/> Train <input type="checkbox"/>	

VACATION/LEISURE TRAVEL, BUSINESS TRAVEL

-OVERNIGHT MEANS AT LEAST ONE NIGHT AWAY FROM HOME-		-OVERNIGHT MEANS AT LEAST ONE NIGHT AWAY FROM HOME-			
TYPE(S) OF TRAVEL PACKAGES/TOURS PURCHASED	OVERNIGHT PERSONAL VACATION TRIPS TAKEN	VACATION/LEISURE TRAVEL IN NEXT 6 MONTHS		NUMBER OF OVERNIGHT PERSONAL VACATION TRIPS LIKELY TO TAKE IN NEXT 6 MONTHS	
	All Trips In Past 3 Years	None	1-2	3-5	6+
(check all that apply) Beach/resort package <input type="checkbox"/> Casino/gambling (overnight) <input type="checkbox"/> Cruise (overnight) <input type="checkbox"/> Golf package (overnight) <input type="checkbox"/> Outdoor adventure/Eco tourism (eg. hiking) <input type="checkbox"/> Sightseeing tour—in Canada <input type="checkbox"/> Sightseeing tour—in U.S.A. <input type="checkbox"/> Sightseeing tour—any other country <input type="checkbox"/> Ski holiday (overnight) <input type="checkbox"/> Other <input type="checkbox"/> Did not purchase a package/tour <input type="checkbox"/>		(check response on each line) Within my own province <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To other provinces/territories <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To the United States <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To Mexico/Caribbean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> To Europe/other countries <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
TOUR OPERATORS (companies that provide travel packages)		PERSONALLY USED FOR VACATION/LEISURE TRAVEL OUTSIDE OF CANADA		BUSINESS TRIPS TAKEN	
		All Trips In Past 3 Years		In Past 12 Months	
(check all that apply) Air Canada Vacations <input type="checkbox"/> Club Med <input type="checkbox"/> Fun Sun Vacations <input type="checkbox"/> GoTravel Direct <input type="checkbox"/> HolaSun/CaribeSol <input type="checkbox"/> Nolitours <input type="checkbox"/> Porter Airlines <input type="checkbox"/> Signature Vacations <input type="checkbox"/> Sunquest & Holiday House <input type="checkbox"/> Sunwing <input type="checkbox"/> Tours Mont-Royal <input type="checkbox"/> Transat Holidays <input type="checkbox"/> Other <input type="checkbox"/>		BUSINESS TRAVEL (OUT OF TOWN) (includes day trips and/or overnight)		BUSINESS TRIPS TAKEN	
		All Trips In Past 3 Years		In Past 12 Months	
TRAVEL AGENT		OVERNIGHT PERSONAL VACATION TRIPS TAKEN IN PAST 3 YEARS		BUSINESS TRIPS TAKEN	
		Yes		In Past 12 Months	
(check all that apply) HOW USED: To arrange for car rental <input type="checkbox"/> To book airline tickets <input type="checkbox"/> To book cruise ship tickets <input type="checkbox"/> To book hotel rooms <input type="checkbox"/> To book a package <input type="checkbox"/> To book train tickets <input type="checkbox"/> Other services <input type="checkbox"/>		BUSINESS TRAVEL (OUT OF TOWN)		BUSINESS TRIPS TAKEN	
		All Trips In Past 3 Years		In Past 12 Months	
		Past 3 Years		Past 12 months	
(check all that apply) HOW USED: To arrange for car rental <input type="checkbox"/> <input type="checkbox"/> To book airline tickets <input type="checkbox"/> <input type="checkbox"/> To book cruise ship tickets <input type="checkbox"/> <input type="checkbox"/> To book hotel rooms <input type="checkbox"/> <input type="checkbox"/> To book a package <input type="checkbox"/> <input type="checkbox"/> To book train tickets <input type="checkbox"/> <input type="checkbox"/> Other services <input type="checkbox"/> <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/> IF NO BUSINESS TRAVEL, GO TO PAGE 9 "DRIVER'S LICENSE". ALL OTHERS CONTINUE.			
		All Trips In Past 3 Years		In Past 12 Months	
		Past 3 Years		Past 12 months	
		All Trips In Past 3 Years		In Past 12 Months	
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		Past 3 Years		Past 12 months	
		All Trips In Past 3 Years		In Past 12 Months	

BUSINESS TRAVEL

BUSINESS TRAVEL (OUT OF TOWN)	BUSINESS TRIPS TAKEN	BUSINESS TRAVEL BY AIRPLANE	BUSINESS TRIPS BY AIR																
	In Past 12 Months		In Past 12 Months																
DESTINATION: (CONTINUED) CANADA (CONTINUED): Vancouver <input type="checkbox"/> Victoria <input type="checkbox"/> Other British Columbia <input type="checkbox"/> Yukon, Northwest Territories, Nunavut <input type="checkbox"/> U.S.A.: Atlanta <input type="checkbox"/> Boston <input type="checkbox"/> Chicago <input type="checkbox"/> Dallas/Fort Worth <input type="checkbox"/> Detroit <input type="checkbox"/> Houston <input type="checkbox"/> Las Vegas <input type="checkbox"/> Los Angeles <input type="checkbox"/> New Orleans <input type="checkbox"/> New York City <input type="checkbox"/> Orlando <input type="checkbox"/> San Francisco <input type="checkbox"/> Washington, D.C. <input type="checkbox"/> Other U.S. Cities <input type="checkbox"/> INTERNATIONAL: France <input type="checkbox"/> United Kingdom <input type="checkbox"/> Germany <input type="checkbox"/> Italy <input type="checkbox"/> Spain <input type="checkbox"/> Greece <input type="checkbox"/> Other Western Europe <input type="checkbox"/> Eastern Europe <input type="checkbox"/> Africa <input type="checkbox"/> Middle East <input type="checkbox"/> Japan <input type="checkbox"/> China/Hong Kong <input type="checkbox"/> Other Asia <input type="checkbox"/> Mexico <input type="checkbox"/> Cuba <input type="checkbox"/> Dominican Republic <input type="checkbox"/> Other Caribbean/Bermuda <input type="checkbox"/> Other Central/South America <input type="checkbox"/> Australia/New Zealand <input type="checkbox"/> Other international destinations <input type="checkbox"/>		NUMBER OF ROUND TRIPS: None <input type="checkbox"/> 1 <input type="checkbox"/> 2-5 <input type="checkbox"/> 6-11 <input type="checkbox"/> 12-19 <input type="checkbox"/> 20-29 <input type="checkbox"/> 30 or more <input type="checkbox"/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">TRAVEL AGENT</th> <th style="width: 50%; text-align: center;">TRAVEL AGENT USED TO BOOK BUSINESS TRAVEL</th> </tr> <tr> <td></td> <td style="text-align: center;">In Past 12 Months</td> </tr> <tr> <td>YES <input type="checkbox"/></td> <td></td> </tr> <tr> <td>NO <input type="checkbox"/></td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">INTERNET TRAVEL SITES</th> <th style="width: 50%; text-align: center;">USED INTERNET SITES FOR BUSINESS TRAVEL IN PAST 12 MONTHS</th> </tr> <tr> <td></td> <td style="text-align: center;">Yes</td> </tr> </table> <p>(check all that apply)</p> HOW USED: To arrange for car rental <input type="checkbox"/> To book airline tickets <input type="checkbox"/> To book hotel rooms <input type="checkbox"/> To book train tickets <input type="checkbox"/> Other services <input type="checkbox"/> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">AIRLINE CARRIERS (Vacation/Leisure or Business Travel)</th> <th style="width: 50%; text-align: center;">PERSONALLY USED FOR VACATION/LEISURE OR BUSINESS TRAVEL</th> </tr> <tr> <td></td> <td style="text-align: center;">In Past 3 Years</td> </tr> </table> AIRLINE USED: Air Canada (Incl. Jazz) <input type="checkbox"/> Air France <input type="checkbox"/> Air Transat <input type="checkbox"/> American Airlines <input type="checkbox"/> British Airways <input type="checkbox"/> Cathay Pacific/Japan Airlines <input type="checkbox"/> Continental/Delta/US Airways <input type="checkbox"/> KLM <input type="checkbox"/> Lufthansa <input type="checkbox"/> Skyservice <input type="checkbox"/> United Airlines <input type="checkbox"/> WestJet <input type="checkbox"/> Other <input type="checkbox"/> CLASS OF TICKET BOUGHT: First Class <input type="checkbox"/> Business/Executive <input type="checkbox"/> Economy <input type="checkbox"/> TYPE OF FARE: Full Fare <input type="checkbox"/> Charter <input type="checkbox"/> Discount <input type="checkbox"/> Other <input type="checkbox"/>		TRAVEL AGENT	TRAVEL AGENT USED TO BOOK BUSINESS TRAVEL		In Past 12 Months	YES <input type="checkbox"/>		NO <input type="checkbox"/>		INTERNET TRAVEL SITES	USED INTERNET SITES FOR BUSINESS TRAVEL IN PAST 12 MONTHS		Yes	AIRLINE CARRIERS (Vacation/Leisure or Business Travel)	PERSONALLY USED FOR VACATION/LEISURE OR BUSINESS TRAVEL		In Past 3 Years
TRAVEL AGENT	TRAVEL AGENT USED TO BOOK BUSINESS TRAVEL																		
	In Past 12 Months																		
YES <input type="checkbox"/>																			
NO <input type="checkbox"/>																			
INTERNET TRAVEL SITES	USED INTERNET SITES FOR BUSINESS TRAVEL IN PAST 12 MONTHS																		
	Yes																		
AIRLINE CARRIERS (Vacation/Leisure or Business Travel)	PERSONALLY USED FOR VACATION/LEISURE OR BUSINESS TRAVEL																		
	In Past 3 Years																		
MODE(S) OF TRANSPORTATION USED ON TRIP	BUSINESS TRIPS OUT OF TOWN																		
	In Past 12 Months																		
Airplane <input type="checkbox"/> Boat/ship <input type="checkbox"/> Bus <input type="checkbox"/> Private automobile/truck, van <input type="checkbox"/> Rented automobile/truck, van <input type="checkbox"/> Train <input type="checkbox"/>																			

AUTOMOTIVE

DRIVER'S LICENSE	PERSONALLY	AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED		AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED	
	Currently Have		Most Recently Obtained	Second Most Recently Obtained		Most Recently Obtained	Second Most Recently Obtained
YES <input type="checkbox"/> NO <input type="checkbox"/>		HOW OBTAINED: New, purchased <input type="checkbox"/> <input type="checkbox"/> New, leased <input type="checkbox"/> <input type="checkbox"/> Used, purchased from dealer <input type="checkbox"/> <input type="checkbox"/> Used, leased from dealer <input type="checkbox"/> <input type="checkbox"/> Used, purchased from previous owner <input type="checkbox"/> <input type="checkbox"/> IF LEASED: Leased personally <input type="checkbox"/> <input type="checkbox"/> Leased through company <input type="checkbox"/> <input type="checkbox"/> IF PURCHASED: —HOW: Paid in full (no loan) <input type="checkbox"/> <input type="checkbox"/> By dealer financing <input type="checkbox"/> <input type="checkbox"/> Loan from bank or trust company <input type="checkbox"/> <input type="checkbox"/> Loan from other finance company <input type="checkbox"/> <input type="checkbox"/> Provided by company <input type="checkbox"/> <input type="checkbox"/> Some other way <input type="checkbox"/> <input type="checkbox"/> TOTAL COST OF VEHICLE: \$10,000 or less <input type="checkbox"/> <input type="checkbox"/> \$10,001 to \$15,000 <input type="checkbox"/> <input type="checkbox"/> \$15,001 to \$20,000 <input type="checkbox"/> <input type="checkbox"/> \$20,001 to \$30,000 <input type="checkbox"/> <input type="checkbox"/> \$30,001 to \$40,000 <input type="checkbox"/> <input type="checkbox"/> \$40,001 to \$50,000 <input type="checkbox"/> <input type="checkbox"/> \$50,001 to \$75,000 <input type="checkbox"/> <input type="checkbox"/> More than \$75,000 <input type="checkbox"/> <input type="checkbox"/> VEHICLE YOU PERSONALLY DRIVE MOST OFTEN: (check one only) <input type="checkbox"/> <input type="checkbox"/>					BMW 1 Series <input type="checkbox"/> <input type="checkbox"/> 3 Series <input type="checkbox"/> <input type="checkbox"/> 5 or 7 Series <input type="checkbox"/> <input type="checkbox"/> 6 Series/M-Coupe <input type="checkbox"/> <input type="checkbox"/> Mini-Cooper <input type="checkbox"/> <input type="checkbox"/> X3 <input type="checkbox"/> <input type="checkbox"/> X5 <input type="checkbox"/> <input type="checkbox"/> X6 <input type="checkbox"/> <input type="checkbox"/> Z4/M-Roadster <input type="checkbox"/> <input type="checkbox"/> Other BMW <input type="checkbox"/> <input type="checkbox"/> Buick Century/Regal/Allure/ Lacrosse <input type="checkbox"/> <input type="checkbox"/> Enclave <input type="checkbox"/> <input type="checkbox"/> Le Sabre <input type="checkbox"/> <input type="checkbox"/> Lucerne <input type="checkbox"/> <input type="checkbox"/> Park Avenue <input type="checkbox"/> <input type="checkbox"/> Rainier <input type="checkbox"/> <input type="checkbox"/> Rendezvous <input type="checkbox"/> <input type="checkbox"/> Terrazza <input type="checkbox"/> <input type="checkbox"/> Other Buick <input type="checkbox"/> <input type="checkbox"/> Cadillac Catera/CTS <input type="checkbox"/> <input type="checkbox"/> Deville/DHS/DTS <input type="checkbox"/> <input type="checkbox"/> Escalade <input type="checkbox"/> <input type="checkbox"/> Seville/Eldorado/STS <input type="checkbox"/> <input type="checkbox"/> SRX <input type="checkbox"/> <input type="checkbox"/> XLR <input type="checkbox"/> <input type="checkbox"/> Other Cadillac <input type="checkbox"/> <input type="checkbox"/> Chevrolet Astro <input type="checkbox"/> <input type="checkbox"/> Avalanche <input type="checkbox"/> <input type="checkbox"/> Aveo <input type="checkbox"/> <input type="checkbox"/> Blazer <input type="checkbox"/> <input type="checkbox"/> Camaro <input type="checkbox"/> <input type="checkbox"/> Cavalier/Cobalt <input type="checkbox"/> <input type="checkbox"/> Colorado/S-10 Pickup <input type="checkbox"/> <input type="checkbox"/> Corvette <input type="checkbox"/> <input type="checkbox"/> Cruze <input type="checkbox"/> <input type="checkbox"/> Epica <input type="checkbox"/> <input type="checkbox"/> Equinox <input type="checkbox"/> <input type="checkbox"/> Express <input type="checkbox"/> <input type="checkbox"/> HHR <input type="checkbox"/> <input type="checkbox"/> Impala <input type="checkbox"/> <input type="checkbox"/> Malibu <input type="checkbox"/> <input type="checkbox"/> Monte Carlo <input type="checkbox"/> <input type="checkbox"/> Optra <input type="checkbox"/> <input type="checkbox"/> Silverado Pickup <input type="checkbox"/> <input type="checkbox"/> Suburban/Tahoe <input type="checkbox"/> <input type="checkbox"/> Tracker <input type="checkbox"/> <input type="checkbox"/> Trailblazer <input type="checkbox"/> <input type="checkbox"/> Traverse <input type="checkbox"/> <input type="checkbox"/> Venture/Uplander <input type="checkbox"/> <input type="checkbox"/> Other Chevrolet Car <input type="checkbox"/> <input type="checkbox"/> Other Chevrolet Sports Utility <input type="checkbox"/> <input type="checkbox"/> Other Chevrolet Van <input type="checkbox"/> <input type="checkbox"/> Other Chevrolet Pickup Truck <input type="checkbox"/> <input type="checkbox"/>
AUTOMOBILES/VANS/ UTILITY TRUCKS IN HOUSEHOLD	NUMBER IN HOUSEHOLD Include Owned Or Leased						
None <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four or more <input type="checkbox"/>							
IF 'NONE', GO TO PAGE 12 "INTENT TO PURCHASE OR LEASE VEHICLES". ALL OTHERS CONTINUE.							
AUTOMOBILES/ VANS/UTILITY TRUCKS	HOUSEHOLD VEHICLES OWNED/LEASED Most Recently Obtained	Second Most Recently Obtained					
TYPE: Car <input type="checkbox"/> <input type="checkbox"/> Station wagon <input type="checkbox"/> <input type="checkbox"/> Van <input type="checkbox"/> <input type="checkbox"/> Pickup truck <input type="checkbox"/> <input type="checkbox"/> Compact sports utility vehicle <input type="checkbox"/> <input type="checkbox"/> Full size sports utility vehicle <input type="checkbox"/> <input type="checkbox"/> Other type of vehicle/ unsure of type of vehicle <input type="checkbox"/> <input type="checkbox"/> TYPE OF ENGINE: Diesel <input type="checkbox"/> <input type="checkbox"/> Ethanol <input type="checkbox"/> <input type="checkbox"/> Gasoline (Petroleum) <input type="checkbox"/> <input type="checkbox"/> Hybrid <input type="checkbox"/> <input type="checkbox"/> Natural gas <input type="checkbox"/> <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> Not sure of engine type <input type="checkbox"/> <input type="checkbox"/> OBTAINED IN PAST YEAR: YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> MODEL YEAR: 2011 <input type="checkbox"/> <input type="checkbox"/> 2010 <input type="checkbox"/> <input type="checkbox"/> 2009 <input type="checkbox"/> <input type="checkbox"/> 2008 <input type="checkbox"/> <input type="checkbox"/> 2007 <input type="checkbox"/> <input type="checkbox"/> 2006 <input type="checkbox"/> <input type="checkbox"/> 2005 <input type="checkbox"/> <input type="checkbox"/> 2004 <input type="checkbox"/> <input type="checkbox"/> 2003 <input type="checkbox"/> <input type="checkbox"/> 2002 <input type="checkbox"/> <input type="checkbox"/> 2001 <input type="checkbox"/> <input type="checkbox"/> 2000 or earlier <input type="checkbox"/> <input type="checkbox"/>							
			MAKE AND MODEL:				
			Acura CSX/EL <input type="checkbox"/> <input type="checkbox"/> MDX <input type="checkbox"/> <input type="checkbox"/> RDX <input type="checkbox"/> <input type="checkbox"/> RL/NSX <input type="checkbox"/> <input type="checkbox"/> RSX/Integra <input type="checkbox"/> <input type="checkbox"/> TL <input type="checkbox"/> <input type="checkbox"/> TSX <input type="checkbox"/> <input type="checkbox"/> ZDX <input type="checkbox"/> <input type="checkbox"/> Other Acura <input type="checkbox"/> <input type="checkbox"/> Audi A3/A4/A4 Cabriolet/ A4 Avant <input type="checkbox"/> <input type="checkbox"/> A5/S5 <input type="checkbox"/> <input type="checkbox"/> A6/S6 <input type="checkbox"/> <input type="checkbox"/> A8/S8 <input type="checkbox"/> <input type="checkbox"/> Allroad <input type="checkbox"/> <input type="checkbox"/> Q5/Q7 <input type="checkbox"/> <input type="checkbox"/> R8 <input type="checkbox"/> <input type="checkbox"/> S4/RS4 <input type="checkbox"/> <input type="checkbox"/> TT Cabriolet/Roadster <input type="checkbox"/> <input type="checkbox"/> Other Audi <input type="checkbox"/> <input type="checkbox"/>				
VEHICLE LIST CONTINUED ON NEXT PAGE							

AUTOMOTIVE

AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED		AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED		AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED	
	Most Recently Obtained	Second Most Recently Obtained		Most Recently Obtained	Second Most Recently Obtained		Most Recently Obtained	Second Most Recently Obtained
Chrysler			Honda			Lexus		
300/300C	<input type="checkbox"/>	<input type="checkbox"/>	Accord Coupe	<input type="checkbox"/>	<input type="checkbox"/>	ES300/350	<input type="checkbox"/>	<input type="checkbox"/>
Aspen	<input type="checkbox"/>	<input type="checkbox"/>	Accord Sedan	<input type="checkbox"/>	<input type="checkbox"/>	GS300/350/400/430	<input type="checkbox"/>	<input type="checkbox"/>
Crossfire	<input type="checkbox"/>	<input type="checkbox"/>	Civic Coupe	<input type="checkbox"/>	<input type="checkbox"/>	GS450h	<input type="checkbox"/>	<input type="checkbox"/>
Pacifica	<input type="checkbox"/>	<input type="checkbox"/>	Civic Hatchback	<input type="checkbox"/>	<input type="checkbox"/>	HS250h	<input type="checkbox"/>	<input type="checkbox"/>
PT Cruiser	<input type="checkbox"/>	<input type="checkbox"/>	Civic Sedan	<input type="checkbox"/>	<input type="checkbox"/>	IS250/350/ISF	<input type="checkbox"/>	<input type="checkbox"/>
Sebring	<input type="checkbox"/>	<input type="checkbox"/>	Civic Sedan Hybrid	<input type="checkbox"/>	<input type="checkbox"/>	LS460	<input type="checkbox"/>	<input type="checkbox"/>
Sebring Convertible	<input type="checkbox"/>	<input type="checkbox"/>	Crosstour	<input type="checkbox"/>	<input type="checkbox"/>	LS600h	<input type="checkbox"/>	<input type="checkbox"/>
Town & Country Van	<input type="checkbox"/>	<input type="checkbox"/>	CRV	<input type="checkbox"/>	<input type="checkbox"/>	LX570/RX350	<input type="checkbox"/>	<input type="checkbox"/>
Other Chrysler Car	<input type="checkbox"/>	<input type="checkbox"/>	Element	<input type="checkbox"/>	<input type="checkbox"/>	RX400h	<input type="checkbox"/>	<input type="checkbox"/>
Other Chrysler Van	<input type="checkbox"/>	<input type="checkbox"/>	Fit	<input type="checkbox"/>	<input type="checkbox"/>	SC Coupe	<input type="checkbox"/>	<input type="checkbox"/>
Other Chrysler Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Insight	<input type="checkbox"/>	<input type="checkbox"/>	Other Lexus	<input type="checkbox"/>	<input type="checkbox"/>
			Odyssey	<input type="checkbox"/>	<input type="checkbox"/>	Other Lexus Hybrid	<input type="checkbox"/>	<input type="checkbox"/>
			Pilot	<input type="checkbox"/>	<input type="checkbox"/>			
Dodge			Ridgeline	<input type="checkbox"/>	<input type="checkbox"/>	Lincoln		
Avenger	<input type="checkbox"/>	<input type="checkbox"/>	S2000	<input type="checkbox"/>	<input type="checkbox"/>	Aviator/Navigator	<input type="checkbox"/>	<input type="checkbox"/>
Caliber	<input type="checkbox"/>	<input type="checkbox"/>	Other Honda Car	<input type="checkbox"/>	<input type="checkbox"/>	Continental/Town Car	<input type="checkbox"/>	<input type="checkbox"/>
Caravan/Grand Caravan	<input type="checkbox"/>	<input type="checkbox"/>	Other Honda Sports Utility	<input type="checkbox"/>	<input type="checkbox"/>	LS	<input type="checkbox"/>	<input type="checkbox"/>
Challenger	<input type="checkbox"/>	<input type="checkbox"/>	Other Honda Van	<input type="checkbox"/>	<input type="checkbox"/>	Mark LT	<input type="checkbox"/>	<input type="checkbox"/>
Charger	<input type="checkbox"/>	<input type="checkbox"/>				MKS	<input type="checkbox"/>	<input type="checkbox"/>
Dakota Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Hummer (Any)	<input type="checkbox"/>	<input type="checkbox"/>	MKX/MKT	<input type="checkbox"/>	<input type="checkbox"/>
Durango	<input type="checkbox"/>	<input type="checkbox"/>				Zephyr/MKZ	<input type="checkbox"/>	<input type="checkbox"/>
Journey	<input type="checkbox"/>	<input type="checkbox"/>	Hyundai			Other Lincoln	<input type="checkbox"/>	<input type="checkbox"/>
Magnum	<input type="checkbox"/>	<input type="checkbox"/>	Accent	<input type="checkbox"/>	<input type="checkbox"/>			
Nitro	<input type="checkbox"/>	<input type="checkbox"/>	Azera/Genesis	<input type="checkbox"/>	<input type="checkbox"/>	Mazda		
Ram Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Elantra	<input type="checkbox"/>	<input type="checkbox"/>	B Series Pickup	<input type="checkbox"/>	<input type="checkbox"/>
Sprinter	<input type="checkbox"/>	<input type="checkbox"/>	Entourage	<input type="checkbox"/>	<input type="checkbox"/>	CX7	<input type="checkbox"/>	<input type="checkbox"/>
Other Dodge Car	<input type="checkbox"/>	<input type="checkbox"/>	Sante Fe	<input type="checkbox"/>	<input type="checkbox"/>	CX9	<input type="checkbox"/>	<input type="checkbox"/>
Other Dodge Station Wagon/Sports Utility	<input type="checkbox"/>	<input type="checkbox"/>	Sonata	<input type="checkbox"/>	<input type="checkbox"/>	Mazda 3/Protégé	<input type="checkbox"/>	<input type="checkbox"/>
Other Dodge Van	<input type="checkbox"/>	<input type="checkbox"/>	Tiburon	<input type="checkbox"/>	<input type="checkbox"/>	Mazda 6/626/Cronos	<input type="checkbox"/>	<input type="checkbox"/>
Other Dodge Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Tucson	<input type="checkbox"/>	<input type="checkbox"/>	MPV	<input type="checkbox"/>	<input type="checkbox"/>
			Vera Cruz	<input type="checkbox"/>	<input type="checkbox"/>	MX-5/Miata	<input type="checkbox"/>	<input type="checkbox"/>
			Other Hyundai	<input type="checkbox"/>	<input type="checkbox"/>	RX8	<input type="checkbox"/>	<input type="checkbox"/>
Ford						Tribute	<input type="checkbox"/>	<input type="checkbox"/>
Clubwagon/Econoline	<input type="checkbox"/>	<input type="checkbox"/>	Infiniti (Any)	<input type="checkbox"/>	<input type="checkbox"/>	Other Mazda Car	<input type="checkbox"/>	<input type="checkbox"/>
Crown Victoria	<input type="checkbox"/>	<input type="checkbox"/>	Isuzu (Any)	<input type="checkbox"/>	<input type="checkbox"/>	Other Mazda Van	<input type="checkbox"/>	<input type="checkbox"/>
Edge	<input type="checkbox"/>	<input type="checkbox"/>	Jaguar (Any)	<input type="checkbox"/>	<input type="checkbox"/>	Other Mazda Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>
Escape	<input type="checkbox"/>	<input type="checkbox"/>						
Expedition	<input type="checkbox"/>	<input type="checkbox"/>	Jeep			Mercedes Benz		
Explorer/Sport Trac	<input type="checkbox"/>	<input type="checkbox"/>	Commander	<input type="checkbox"/>	<input type="checkbox"/>	B-Class	<input type="checkbox"/>	<input type="checkbox"/>
F Series Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Compass	<input type="checkbox"/>	<input type="checkbox"/>	C-Class Coupe	<input type="checkbox"/>	<input type="checkbox"/>
Five Hundred/Taurus	<input type="checkbox"/>	<input type="checkbox"/>	Grand Cherokee	<input type="checkbox"/>	<input type="checkbox"/>	C-Class Sedan/Wagon	<input type="checkbox"/>	<input type="checkbox"/>
Flex	<input type="checkbox"/>	<input type="checkbox"/>	Liberty	<input type="checkbox"/>	<input type="checkbox"/>	E-Class	<input type="checkbox"/>	<input type="checkbox"/>
Focus	<input type="checkbox"/>	<input type="checkbox"/>	Patriot	<input type="checkbox"/>	<input type="checkbox"/>	GL-Class	<input type="checkbox"/>	<input type="checkbox"/>
Freestar/Windstar	<input type="checkbox"/>	<input type="checkbox"/>	Wrangler/4-door/TJ	<input type="checkbox"/>	<input type="checkbox"/>	Maybach	<input type="checkbox"/>	<input type="checkbox"/>
Freestyle/Taurus X	<input type="checkbox"/>	<input type="checkbox"/>	Other Jeep	<input type="checkbox"/>	<input type="checkbox"/>	M-Class	<input type="checkbox"/>	<input type="checkbox"/>
Fusion	<input type="checkbox"/>	<input type="checkbox"/>				R-Class	<input type="checkbox"/>	<input type="checkbox"/>
Mustang	<input type="checkbox"/>	<input type="checkbox"/>	KIA			S-Class	<input type="checkbox"/>	<input type="checkbox"/>
Ranger Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Amanti	<input type="checkbox"/>	<input type="checkbox"/>	Smart fortwo	<input type="checkbox"/>	<input type="checkbox"/>
Thunderbird	<input type="checkbox"/>	<input type="checkbox"/>	Borrego	<input type="checkbox"/>	<input type="checkbox"/>	Other Mercedes Benz	<input type="checkbox"/>	<input type="checkbox"/>
Other Ford Car	<input type="checkbox"/>	<input type="checkbox"/>	Magentis	<input type="checkbox"/>	<input type="checkbox"/>			
Other Ford Station Wagon/ Sports Utility	<input type="checkbox"/>	<input type="checkbox"/>	Rio/Rio5	<input type="checkbox"/>	<input type="checkbox"/>	Mercury		
Other Ford Van	<input type="checkbox"/>	<input type="checkbox"/>	Rondo	<input type="checkbox"/>	<input type="checkbox"/>	Grand Marquis	<input type="checkbox"/>	<input type="checkbox"/>
Other Ford Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>	Sedona	<input type="checkbox"/>	<input type="checkbox"/>	Sable	<input type="checkbox"/>	<input type="checkbox"/>
			Sorento	<input type="checkbox"/>	<input type="checkbox"/>	Other Mercury Car	<input type="checkbox"/>	<input type="checkbox"/>
			Spectra/Spectra5/ Soul/Forte	<input type="checkbox"/>	<input type="checkbox"/>	Other Mercury Van	<input type="checkbox"/>	<input type="checkbox"/>
GMC			Sportage	<input type="checkbox"/>	<input type="checkbox"/>			
Acadia	<input type="checkbox"/>	<input type="checkbox"/>	Other Kia	<input type="checkbox"/>	<input type="checkbox"/>	Mitsubishi		
Canyon/Sonoma Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>				Any Mitsubishi Car	<input type="checkbox"/>	<input type="checkbox"/>
Envoy/XL/XUV	<input type="checkbox"/>	<input type="checkbox"/>				Any Mitsubishi Truck	<input type="checkbox"/>	<input type="checkbox"/>
Jimmy	<input type="checkbox"/>	<input type="checkbox"/>						
Safari	<input type="checkbox"/>	<input type="checkbox"/>						
Savana	<input type="checkbox"/>	<input type="checkbox"/>						
Sierra Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>						
Terrain	<input type="checkbox"/>	<input type="checkbox"/>						
Yukon/Yukon Denali/XL	<input type="checkbox"/>	<input type="checkbox"/>						
Other GMC Sports Utility	<input type="checkbox"/>	<input type="checkbox"/>						
Other GMC Van	<input type="checkbox"/>	<input type="checkbox"/>						
Other GMC Pickup Truck	<input type="checkbox"/>	<input type="checkbox"/>						

VEHICLE LIST CONTINUED ON NEXT PAGE

AUTOMOTIVE/AUTOMOTIVE SERVICES

AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED		AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED		AUTOMOBILES/VANS/ UTILITY TRUCKS -CONTINUED-	HOUSEHOLD VEHICLES OWNED/LEASED														
	Most Recently Obtained	Second Most Recently Obtained		Most Recently Obtained	Second Most Recently Obtained		Most Recently Obtained	Second Most Recently Obtained													
Nissan 350Z/350Z convertible/ GT-R <input type="checkbox"/> <input type="checkbox"/> Altima <input type="checkbox"/> <input type="checkbox"/> Armada <input type="checkbox"/> <input type="checkbox"/> Cube <input type="checkbox"/> <input type="checkbox"/> Hardbody/Frontier Pickup <input type="checkbox"/> <input type="checkbox"/> Maxima <input type="checkbox"/> <input type="checkbox"/> Pathfinder/Murano/Xterra <input type="checkbox"/> <input type="checkbox"/> Quest Van <input type="checkbox"/> <input type="checkbox"/> Sentra <input type="checkbox"/> <input type="checkbox"/> Titan <input type="checkbox"/> <input type="checkbox"/> Versa <input type="checkbox"/> <input type="checkbox"/> XTrail/Rogue <input type="checkbox"/> <input type="checkbox"/> Other Nissan Car <input type="checkbox"/> <input type="checkbox"/> Other Nissan Sports Utility <input type="checkbox"/> <input type="checkbox"/> Other Nissan Van <input type="checkbox"/> <input type="checkbox"/> Other Nissan Pickup Truck <input type="checkbox"/> <input type="checkbox"/>			Subaru B9 Tribeca <input type="checkbox"/> <input type="checkbox"/> Forester <input type="checkbox"/> <input type="checkbox"/> Impreza <input type="checkbox"/> <input type="checkbox"/> Impreza WRX/Sti <input type="checkbox"/> <input type="checkbox"/> Legacy <input type="checkbox"/> <input type="checkbox"/> Outback <input type="checkbox"/> <input type="checkbox"/> Other Subaru Car <input type="checkbox"/> <input type="checkbox"/> Other Subaru Station Wagon/Sports Utility <input type="checkbox"/> <input type="checkbox"/>			Suzuki Equator <input type="checkbox"/> <input type="checkbox"/> Esteem/Aerio <input type="checkbox"/> <input type="checkbox"/> Swift/Swift + <input type="checkbox"/> <input type="checkbox"/> SX4 <input type="checkbox"/> <input type="checkbox"/> Verona <input type="checkbox"/> <input type="checkbox"/> Vitara/Grand Vitara/XL7 <input type="checkbox"/> <input type="checkbox"/> Other Suzuki <input type="checkbox"/> <input type="checkbox"/>			Toyota 4 Runner <input type="checkbox"/> <input type="checkbox"/> Avalon <input type="checkbox"/> <input type="checkbox"/> Camry <input type="checkbox"/> <input type="checkbox"/> Camry Hybrid <input type="checkbox"/> <input type="checkbox"/> Celica/Paseo <input type="checkbox"/> <input type="checkbox"/> Corolla <input type="checkbox"/> <input type="checkbox"/> Echo <input type="checkbox"/> <input type="checkbox"/> FJ Cruiser <input type="checkbox"/> <input type="checkbox"/> Highlander <input type="checkbox"/> <input type="checkbox"/> Highlander Hybrid <input type="checkbox"/> <input type="checkbox"/> Matrix <input type="checkbox"/> <input type="checkbox"/> Prius <input type="checkbox"/> <input type="checkbox"/> RAV 4 <input type="checkbox"/> <input type="checkbox"/> Sequoia <input type="checkbox"/> <input type="checkbox"/> Sienna <input type="checkbox"/> <input type="checkbox"/> Solara <input type="checkbox"/> <input type="checkbox"/> Tacoma/T100 (Pickup) <input type="checkbox"/> <input type="checkbox"/> Tercel <input type="checkbox"/> <input type="checkbox"/> Tundra <input type="checkbox"/> <input type="checkbox"/> Venza <input type="checkbox"/> <input type="checkbox"/> Yaris Hatchback <input type="checkbox"/> <input type="checkbox"/> Yaris Sedan <input type="checkbox"/> <input type="checkbox"/> Other Toyota Car <input type="checkbox"/> <input type="checkbox"/> Other Toyota Van <input type="checkbox"/> <input type="checkbox"/> Other Toyota Pickup Truck <input type="checkbox"/> <input type="checkbox"/>			Volkswagen City Jetta <input type="checkbox"/> <input type="checkbox"/> EOS <input type="checkbox"/> <input type="checkbox"/> Golf/City Golf <input type="checkbox"/> <input type="checkbox"/> Jetta <input type="checkbox"/> <input type="checkbox"/> New Beetle/New Beetle Convertible <input type="checkbox"/> <input type="checkbox"/> Passat/Passat CC <input type="checkbox"/> <input type="checkbox"/> Rabbit <input type="checkbox"/> <input type="checkbox"/> Routan <input type="checkbox"/> <input type="checkbox"/> Tiguan <input type="checkbox"/> <input type="checkbox"/> Touareg <input type="checkbox"/> <input type="checkbox"/> Other Volkswagen Car <input type="checkbox"/> <input type="checkbox"/> Other Volkswagen Van <input type="checkbox"/> <input type="checkbox"/>			Volvo C30/S40/V40/V50 <input type="checkbox"/> <input type="checkbox"/> C70 <input type="checkbox"/> <input type="checkbox"/> Cross Country/XC70/XC90 <input type="checkbox"/> <input type="checkbox"/> S70/V70/S80/S60 <input type="checkbox"/> <input type="checkbox"/> XC60 <input type="checkbox"/> <input type="checkbox"/> Volvo Station Wagon (Any) <input type="checkbox"/> <input type="checkbox"/> Other Volvo Car <input type="checkbox"/> <input type="checkbox"/>			<div style="border: 1px solid black; padding: 5px;"> IF MAKE AND MODEL OF HOUSEHOLD VEHICLE IS NOT LISTED, PLEASE WRITE DETAILS HERE: </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> MAKE: _____ MODEL: _____ <input type="checkbox"/> _____ <input type="checkbox"/> </div>	<div style="border: 1px solid black; padding: 5px;"> VEHICLES CURRENTLY OWNED/LEASED </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; vertical-align: middle;">Most Recently Obtained</td> <td style="width: 50%; text-align: center; vertical-align: middle;">Second Most Recently Obtained</td> </tr> </table> </div>	Most Recently Obtained	Second Most Recently Obtained
Most Recently Obtained	Second Most Recently Obtained																				
Oldsmobile Alero <input type="checkbox"/> <input type="checkbox"/> Aurora <input type="checkbox"/> <input type="checkbox"/> Bravada <input type="checkbox"/> <input type="checkbox"/> Intrigue <input type="checkbox"/> <input type="checkbox"/> Silhouette <input type="checkbox"/> <input type="checkbox"/> Other Oldsmobile Car <input type="checkbox"/> <input type="checkbox"/> Other Oldsmobile Van <input type="checkbox"/> <input type="checkbox"/>																					
Plymouth (Any) <input type="checkbox"/> <input type="checkbox"/> Pontiac Aztek <input type="checkbox"/> <input type="checkbox"/> Bonneville <input type="checkbox"/> <input type="checkbox"/> Firebird <input type="checkbox"/> <input type="checkbox"/> G8 <input type="checkbox"/> <input type="checkbox"/> Grand AM/G6 <input type="checkbox"/> <input type="checkbox"/> Grand Prix <input type="checkbox"/> <input type="checkbox"/> Solstice <input type="checkbox"/> <input type="checkbox"/> Sunfire/Pursuit/G5 <input type="checkbox"/> <input type="checkbox"/> Torrent <input type="checkbox"/> <input type="checkbox"/> Trans Sport/Trans Sport Montana/SV6 <input type="checkbox"/> <input type="checkbox"/> Vibe <input type="checkbox"/> <input type="checkbox"/> Wave/G3 <input type="checkbox"/> <input type="checkbox"/> Other Pontiac Car <input type="checkbox"/> <input type="checkbox"/> Other Pontiac Van <input type="checkbox"/> <input type="checkbox"/>																					
Porsche (Any) <input type="checkbox"/> <input type="checkbox"/> Saab (Any) <input type="checkbox"/> <input type="checkbox"/> Saturn ION/Astra <input type="checkbox"/> <input type="checkbox"/> LS/LW/Aura <input type="checkbox"/> <input type="checkbox"/> Outlook <input type="checkbox"/> <input type="checkbox"/> Relay <input type="checkbox"/> <input type="checkbox"/> SC <input type="checkbox"/> <input type="checkbox"/> Sky <input type="checkbox"/> <input type="checkbox"/> SL/SW <input type="checkbox"/> <input type="checkbox"/> VUE <input type="checkbox"/> <input type="checkbox"/> Other Saturn <input type="checkbox"/> <input type="checkbox"/>																					

AUTOMOTIVE SERVICES	PERSONALLY HAD DONE
	In Past 12 Months

- SERVICE (EXCLUDING ACCIDENT REPAIR):**
- Body work
 - Brakes repaired
 - Muffler/exhaust replacement ...
 - Oil change
 - Tires repaired/installed
 - Transmission repaired
 - Tune-up
 - Wheel alignment
 - Windshield replacement
 - Other service

- SERVICED BY:**
- Canadian Tire
 - Goodyear/Fountain Tire
 - Midas
 - Mr. Lube
 - Speedy Muffler, Brake & Wheel ..
 - Wal-Mart
 - xxxxx
 - xxxxx
 - xxxxx
 - xxxxx
 - Local Service/Gas Stations
 - Self/other family member
 - Auto/Car Dealerships
 - Service Department
 - Any Other Service Outlet

- AMOUNT SPENT ON SERVICES:**
- \$100 or less
 - \$101 to \$500
 - \$501 to \$1,000
 - \$1,001 to \$2,000
 - More than \$2,000

ROADSIDE ASSISTANCE PROGRAM	YOUR HOUSEHOLD
	Currently Has
YES <input type="checkbox"/>	
NO <input type="checkbox"/>	

AUTO SUPPLIES, TIRES, INTENT TO PURCHASE VEHICLE, CAR/TRUCK/VAN RENTAL, RETAIL SHOPPING

AUTO SUPPLIES OR PRODUCTS	PERSONALLY BOUGHT	INTENT TO PURCHASE OR LEASE VEHICLE	YOUR HOUSEHOLD
-Oil, Spark Plugs, Fan Belts, etc.-	In Past 12 Months		Likely To Acquire In Next 12 Months
<p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>WHERE BOUGHT:</p> <p>Canadian Tire..... <input type="checkbox"/></p> <p>Midas <input type="checkbox"/></p> <p>Mr. Lube <input type="checkbox"/></p> <p>NAPA Auto Parts <input type="checkbox"/></p> <p>PartsSource <input type="checkbox"/></p> <p>Speedy Muffler, Brake & Wheel..... <input type="checkbox"/></p> <p>Wal-Mart..... <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>Local Service/Gas Stations..... <input type="checkbox"/></p> <p>Auto/Car Dealership Service Department..... <input type="checkbox"/></p> <p>Any Other Service Outlet <input type="checkbox"/></p>		<p>NEW/USED:</p> <p>New Vehicle <input type="checkbox"/></p> <p>Used Vehicle from a dealer <input type="checkbox"/></p> <p>Used Vehicle from a previous owner <input type="checkbox"/></p> <p>Not Sure <input type="checkbox"/></p>	
		CAR, TRUCK OR VAN RENTAL	PERSONALLY RENTED IN PAST 12 MONTHS
			For Business For Personal Use
		<p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>NUMBER OF TIMES:</p> <p>1 <input type="checkbox"/></p> <p>2 <input type="checkbox"/></p> <p>3 <input type="checkbox"/></p> <p>4+ <input type="checkbox"/></p>	
TIRES	PERSONALLY BOUGHT	RETAIL SHOPPING	PERSONALLY MADE ANY PURCHASE
	In Past 12 Months		In Past 12 Months
<p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>WHERE BOUGHT:</p> <p>Canadian Tire..... <input type="checkbox"/></p> <p>Costco <input type="checkbox"/></p> <p>Firestone Tire & Automotive Centre..... <input type="checkbox"/></p> <p>Goodyear <input type="checkbox"/></p> <p>Midas <input type="checkbox"/></p> <p>Wal-Mart..... <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>Local Service/Gas Stations..... <input type="checkbox"/></p> <p>Auto/Car Dealership Service Department..... <input type="checkbox"/></p> <p>Any Other Service Outlet <input type="checkbox"/></p>		<p>(check all that apply)</p> <p>WHERE:</p> <p>Best Buy..... <input type="checkbox"/></p> <p>Canadian Tire..... <input type="checkbox"/></p> <p>Costco <input type="checkbox"/></p> <p>Future Shop..... <input type="checkbox"/></p> <p>Home Depot..... <input type="checkbox"/></p> <p>Sears <input type="checkbox"/></p> <p>Shoppers Drug Mart..... <input type="checkbox"/></p> <p>Staples/Business Depot..... <input type="checkbox"/></p> <p>Telus..... <input type="checkbox"/></p> <p>The Bay <input type="checkbox"/></p> <p>The Source by Circuit City..... <input type="checkbox"/></p> <p>Wal-Mart..... <input type="checkbox"/></p> <p>Zellers <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p> <p>xxxxx <input type="checkbox"/></p>	
INTENT TO PURCHASE OR LEASE VEHICLE(S)	YOUR HOUSEHOLD		
	Likely To Acquire In Next 12 Months		
<p>YES <input type="checkbox"/></p> <p>NO <input type="checkbox"/></p> <p>TYPE OF VEHICLE:</p> <p>Car <input type="checkbox"/></p> <p>Station wagon <input type="checkbox"/></p> <p>Van <input type="checkbox"/></p> <p>Pickup truck <input type="checkbox"/></p> <p>Compact sports utility vehicle <input type="checkbox"/></p> <p>Full size sports utility vehicle <input type="checkbox"/></p> <p>Other type of vehicle <input type="checkbox"/></p> <p>Not sure of vehicle type <input type="checkbox"/></p> <p>TYPE OF ENGINE:</p> <p>Diesel <input type="checkbox"/></p> <p>Ethanol <input type="checkbox"/></p> <p>Gasoline (Petroleum) <input type="checkbox"/></p> <p>Hybrid <input type="checkbox"/></p> <p>Natural gas <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>Not sure of engine type..... <input type="checkbox"/></p>			

MEN'S, WOMEN'S, CHILDREN'S CLOTHING, SHOES/FOOTWEAR, SPORTS & EXERCISE CLOTHING

MEN'S CLOTHING <small>-Excluding Athletic Clothing-</small>	PERSONALLY BOUGHT FOR SELF OR OTHERS In Past 12 Months	WOMEN'S CLOTHING <small>-Excluding Athletic Clothing- - CONTINUED-</small>	PERSONALLY BOUGHT FOR SELF OR OTHERS In Past 12 Months	SHOES/FOOTWEAR	PERSONALLY BOUGHT FOR SELF OR OTHERS In Past 12 Months
YES <input type="checkbox"/> NO <input type="checkbox"/> ITEMS BOUGHT: Coats <input type="checkbox"/> Jeans <input type="checkbox"/> Pants-casual/khakis <input type="checkbox"/> Pants-dress <input type="checkbox"/> Shirts <input type="checkbox"/> Sports jackets <input type="checkbox"/> Suits <input type="checkbox"/> Sweaters <input type="checkbox"/> Other <input type="checkbox"/> WHERE BOUGHT: Gap <input type="checkbox"/> Mark's/L'Équipeur <input type="checkbox"/> Moores <input type="checkbox"/> Old Navy <input type="checkbox"/> Roots <input type="checkbox"/> Sears <input type="checkbox"/> The Bay <input type="checkbox"/> Tip Top Tailors <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Winners <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other chain store <input type="checkbox"/> Any other local independent retailer <input type="checkbox"/> Any second-hand/consignment store <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		WHERE BOUGHT: Cotton Ginny/Cotton Ginny Plus .. <input type="checkbox"/> Fairweather <input type="checkbox"/> Gap <input type="checkbox"/> Old Navy <input type="checkbox"/> Le Chateau <input type="checkbox"/> La Senza/La Vie en Rose <input type="checkbox"/> Penningtons <input type="checkbox"/> Reitmans <input type="checkbox"/> Roots <input type="checkbox"/> Sears <input type="checkbox"/> Smart Set <input type="checkbox"/> Suzy Shier <input type="checkbox"/> The Bay <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Winners <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other chain store <input type="checkbox"/> Any other local independent retailer <input type="checkbox"/> Any second-hand/consignment store <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/> TYPES BOUGHT: Athletic shoes <input type="checkbox"/> Boots <input type="checkbox"/> Casual shoes <input type="checkbox"/> Dress shoes <input type="checkbox"/> Other <input type="checkbox"/> WHERE BOUGHT: Aldo <input type="checkbox"/> Foot Locker <input type="checkbox"/> Payless ShoeSource <input type="checkbox"/> Sears <input type="checkbox"/> Sport Chek/Sports Experts <input type="checkbox"/> The Bay <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other chain store <input type="checkbox"/> Any other local independent retailer <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>	
		CHILDREN'S CLOTHING <small>(under 13 years)</small> <small>-Excluding Athletic Clothing-</small>	PERSONALLY BOUGHT FOR FAMILY OR OTHERS In Past 12 Months	SPORTS & EXERCISE CLOTHING	PERSONALLY BOUGHT FOR SELF OR OTHERS In Past 12 Months
		YES <input type="checkbox"/> NO <input type="checkbox"/> WHERE BOUGHT: GapKids <input type="checkbox"/> Old Navy <input type="checkbox"/> Sears <input type="checkbox"/> The Bay <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Winners <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local independent retailer <input type="checkbox"/> Any second-hand/consignment store <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/> WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Foot Locker <input type="checkbox"/> Sears <input type="checkbox"/> Sport Chek/Sports Experts <input type="checkbox"/> The Bay <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local retailer <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>	
WOMEN'S CLOTHING <small>-Excluding Athletic Clothing-</small>	PERSONALLY BOUGHT FOR SELF OR OTHERS In Past 12 Months				
YES <input type="checkbox"/> NO <input type="checkbox"/> ITEMS BOUGHT: Blazers/jackets <input type="checkbox"/> Blouses/shirts <input type="checkbox"/> Coats <input type="checkbox"/> Dresses <input type="checkbox"/> Jeans <input type="checkbox"/> Lingerie/undergarments <input type="checkbox"/> Pants-casual/khakis <input type="checkbox"/> Pants-dress <input type="checkbox"/> Skirts <input type="checkbox"/> Suits <input type="checkbox"/> Sweaters <input type="checkbox"/> Other <input type="checkbox"/>					

SPORTS & EXERCISE EQUIPMENT, TOYS & GAMES, PERSONAL & HEALTH CARE PRODUCTS, COSMETICS & FRAGRANCES, JEWELLERY/WATCHES

SPORTS & EXERCISE EQUIPMENT	PERSONALLY BOUGHT FOR SELF OR OTHERS	PERSONAL & HEALTH CARE PRODUCTS <small>-Shampoo, Skin Cleanser, Vitamins, Prescriptions, Pain Relievers, Nutritional Supplements (Excludes Cosmetics)-</small>	PERSONALLY BOUGHT	
	In Past 12 Months		In Past 12 Months	
YES <input type="checkbox"/> NO <input type="checkbox"/> WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Sport Chek/Sports Experts <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local retailer <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		WHERE BOUGHT: Sears <input type="checkbox"/> Shoppers Drug Mart. <input type="checkbox"/> The Bay <input type="checkbox"/> The Body Shop <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local retailer <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$250 <input type="checkbox"/> \$251 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> More than \$1,000 <input type="checkbox"/>		
TOYS & GAMES	PERSONALLY BOUGHT FOR SELF OR OTHERS	COSMETICS & FRAGRANCES	PERSONALLY BOUGHT IN PAST 12 MONTHS	
	In Past 12 Months		Yes	No
YES <input type="checkbox"/> NO <input type="checkbox"/> WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Sears <input type="checkbox"/> The Bay <input type="checkbox"/> The Source by Circuit City <input type="checkbox"/> Toys 'R Us <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local retailer <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		Cosmetics (lipstick, eye makeup, etc.) ... <input type="checkbox"/> <input type="checkbox"/> Fragrances (men's and women's) <input type="checkbox"/> <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$250 <input type="checkbox"/> \$251 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> More than \$1,000 <input type="checkbox"/>		
PERSONAL & HEALTH CARE PRODUCTS <small>-Shampoo, Skin Cleanser, Vitamins, Prescriptions, Pain Relievers, Nutritional Supplements (Excludes Cosmetics)-</small>	PERSONALLY BOUGHT	JEWELLERY OR WATCHES <small>-Excluding Costume Jewellery-</small>	PERSONALLY BOUGHT FOR SELF OR OTHERS IN PAST 3 YEARS	
	In Past 12 Months		Jewellery	Watches
YES <input type="checkbox"/> NO <input type="checkbox"/> ITEMS BOUGHT: Personal Care: Facial cleanser/moisturizer/toner <input type="checkbox"/> Hair care (hair spray, mousse, hair colour etc.) <input type="checkbox"/> Oral care (toothpaste, dental floss, mouth wash etc.) <input type="checkbox"/> Soap/bodywash/deodorant <input type="checkbox"/> Other personal care items <input type="checkbox"/> Health Care: Herbal supplements/remedies <input type="checkbox"/> Nutritional supplements <input type="checkbox"/> Pain relievers <input type="checkbox"/> Prescriptions <input type="checkbox"/> Vitamins <input type="checkbox"/> Other health care items <input type="checkbox"/>		YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> WHERE BOUGHT: Peoples <input type="checkbox"/> <input type="checkbox"/> Sears <input type="checkbox"/> <input type="checkbox"/> The Bay <input type="checkbox"/> <input type="checkbox"/> Wal-Mart <input type="checkbox"/> <input type="checkbox"/> Zellers <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> Any other local retailer <input type="checkbox"/> <input type="checkbox"/> AMOUNT SPENT: \$100 or less <input type="checkbox"/> <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> <input type="checkbox"/> \$2,001 to \$3,500 <input type="checkbox"/> <input type="checkbox"/> \$3,501 to \$5,000 <input type="checkbox"/> <input type="checkbox"/> More than \$5,000 <input type="checkbox"/> <input type="checkbox"/>		

EYE CARE, SHOPPING MALLS, GROCERY SHOPPING, BEER

EYE CARE	PERSONALLY BOUGHT/HAD DONE			GROCERY STORES	YOUR HOUSEHOLD SHOPPED FOR GROCERIES		
	In Past 2 Years				In Past Month	Most Often	
YES <input type="checkbox"/> NO <input type="checkbox"/> EYE CARE ITEMS BOUGHT: (check all that apply) Prescription eye glasses <input type="checkbox"/> Contact lenses <input type="checkbox"/> Laser eye surgery (elective) <input type="checkbox"/> AMOUNT SPENT IN TOTAL: \$250 or less <input type="checkbox"/> \$251 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> More than \$1,000 <input type="checkbox"/>				XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/>			
SHOPPING MALLS, CENTRES OR DISTRICTS	PERSONALLY			HOUSEHOLD EXPENDITURE			
	Visited Past Month	Visited Past 12 Months	Visited Most Often	In Average Week			
(Check all that apply) (Check all that apply) (Check only one)				AMOUNT SPENT: \$50 or less <input type="checkbox"/> \$51 to \$75 <input type="checkbox"/> \$76 to \$100 <input type="checkbox"/> \$101 to \$150 <input type="checkbox"/> More than \$150 <input type="checkbox"/>			
VISITED: XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> XXXXX <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				GROCERY SHOPPING HABITS			
				Regularly Sometimes Never			
				(check response on each line) Buys non-branded or private label/store brands (eg. "No-Name", President's Choice, Master Choice, Our Compliments) ... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Buys national brands <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Uses cents-off coupons <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
GROCERY SHOPPING				PERSONAL RESPONSIBILITY			
				In Past Month			
Mainly responsible <input type="checkbox"/> Share responsibility <input type="checkbox"/> Rarely/never shop for groceries <input type="checkbox"/>				BEER			
				PERSONALLY DRANK AT HOME OR ELSEWHERE			
				In Past Month			
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>			
GROCERY SHOPPING				PERSONAL RESPONSIBILITY			
				In Past Month			
Mainly responsible <input type="checkbox"/> Share responsibility <input type="checkbox"/> Rarely/never shop for groceries <input type="checkbox"/>				TYPES: Regular <input type="checkbox"/> Light (low alcohol/calories/cholesterol) <input type="checkbox"/> Non-alcoholic <input type="checkbox"/>			
GROCERY SHOPPING				PERSONAL RESPONSIBILITY			
				In Past Month			
Mainly responsible <input type="checkbox"/> Share responsibility <input type="checkbox"/> Rarely/never shop for groceries <input type="checkbox"/>				KINDS: Domestic (major brands/domestic) <input type="checkbox"/> Micro-brewery <input type="checkbox"/> American <input type="checkbox"/> Other imported <input type="checkbox"/> Self-brewed <input type="checkbox"/> Other <input type="checkbox"/>			
GROCERY SHOPPING				PERSONAL RESPONSIBILITY			
				In Past Month			
Mainly responsible <input type="checkbox"/> Share responsibility <input type="checkbox"/> Rarely/never shop for groceries <input type="checkbox"/>				NUMBER OF BOTTLES/CANS/GLASSES: None <input type="checkbox"/> 1-3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-12 <input type="checkbox"/> 13+ <input type="checkbox"/>			
GROCERY SHOPPING				PERSONAL RESPONSIBILITY			
				In Past Month			
Mainly responsible <input type="checkbox"/> Share responsibility <input type="checkbox"/> Rarely/never shop for groceries <input type="checkbox"/>				Discount supermarkets (eg. No Frills, Maxi, Food Basics, Super C) <input type="checkbox"/> SuperCentres (eg. Wal-Mart, etc.) <input type="checkbox"/> Warehouse outlet (eg. Costco, etc.) <input type="checkbox"/> Grocery store/supermarket <input type="checkbox"/> Bulk food store <input type="checkbox"/> Convenience store/Pharmacy <input type="checkbox"/> Ethnic food store <input type="checkbox"/> Health food store <input type="checkbox"/> Local farmers' market <input type="checkbox"/> Meat/butcher shop <input type="checkbox"/> Produce store <input type="checkbox"/>			

WINE, LIQUOR, MAJOR APPLIANCES, FURNITURE, HOME ENTERTAINMENT ITEMS

WINE	PERSONALLY DRANK AT HOME OR ELSEWHERE		FURNITURE –Excluding Outdoor/Patio–	YOUR HOUSEHOLD	
	In Past Month			Bought In Past 3 Years	Plans to buy in Next 12 months
YES..... <input type="checkbox"/>			YES..... <input type="checkbox"/>		
NO..... <input type="checkbox"/>			NO..... <input type="checkbox"/>		
TYPES:			WHERE BOUGHT:		
Red..... <input type="checkbox"/>			Costco..... <input type="checkbox"/>		
White..... <input type="checkbox"/>			La-Z-Boy Furniture Galleries..... <input type="checkbox"/>		
Rosé..... <input type="checkbox"/>			Leon's..... <input type="checkbox"/>		
			Sears/Sears Furniture & Appliances..... <input type="checkbox"/>		
KINDS:			The Bay/Home Outfitters..... <input type="checkbox"/>		
British Columbia..... <input type="checkbox"/>			The Brick..... <input type="checkbox"/>		
Ontario..... <input type="checkbox"/>			xxxxx..... <input type="checkbox"/>		
Other Canadian..... <input type="checkbox"/>			xxxxx..... <input type="checkbox"/>		
U.S.A..... <input type="checkbox"/>			xxxxx..... <input type="checkbox"/>		
France..... <input type="checkbox"/>			xxxxx..... <input type="checkbox"/>		
Italy..... <input type="checkbox"/>			Any discount/wholesale store..... <input type="checkbox"/>		
Australia..... <input type="checkbox"/>			Any other local independent store..... <input type="checkbox"/>		
South America (eg. Argentina, Chile)..... <input type="checkbox"/>					
Other imported..... <input type="checkbox"/>			AMOUNT SPENT:		
Self-made..... <input type="checkbox"/>			\$500 or less..... <input type="checkbox"/>		
Other..... <input type="checkbox"/>			\$501 to \$1,000..... <input type="checkbox"/>		
			\$1,001 to \$2,000..... <input type="checkbox"/>		
NUMBER OF GLASSES:			\$2,001 to \$5,000..... <input type="checkbox"/>		
None..... <input type="checkbox"/>			More than \$5,000..... <input type="checkbox"/>		
1–3..... <input type="checkbox"/>					
4–6..... <input type="checkbox"/>			HOME ENTERTAINMENT	YOUR HOUSEHOLD	
7–12..... <input type="checkbox"/>			ITEMS		
13+..... <input type="checkbox"/>			–eg. Stereo, TV, DVD player–	Bought In Past 2 Years	
			YES..... <input type="checkbox"/>		
			NO..... <input type="checkbox"/>		
			WHERE BOUGHT:		
LIQUOR	PERSONALLY DRANK AT HOME OR ELSEWHERE		Best Buy..... <input type="checkbox"/>		
	In Past Month		Canadian Tire..... <input type="checkbox"/>		
YES..... <input type="checkbox"/>			Costco..... <input type="checkbox"/>		
NO..... <input type="checkbox"/>			Future Shop..... <input type="checkbox"/>		
			Sears..... <input type="checkbox"/>		
			Sony Style..... <input type="checkbox"/>		
			The Bay..... <input type="checkbox"/>		
			The Source by Circuit City..... <input type="checkbox"/>		
			Wal-Mart..... <input type="checkbox"/>		
			xxxxx..... <input type="checkbox"/>		
			xxxxx..... <input type="checkbox"/>		
			xxxxx..... <input type="checkbox"/>		
			xxxxx..... <input type="checkbox"/>		
			Any other local retailer..... <input type="checkbox"/>		
			AMOUNT SPENT:		
			\$500 or less..... <input type="checkbox"/>		
			\$501 to \$1,000..... <input type="checkbox"/>		
			\$1,001 to \$2,000..... <input type="checkbox"/>		
			\$2,001 to \$5,000..... <input type="checkbox"/>		
			More than \$5,000..... <input type="checkbox"/>		
MAJOR APPLIANCES	YOUR HOUSEHOLD				
–Stove, Washer, etc.–	Bought In Past 3 Years	Plans to buy in Next 12 months			
YES..... <input type="checkbox"/>					
NO..... <input type="checkbox"/>					
WHERE BOUGHT:					
Costco..... <input type="checkbox"/>					
Future Shop..... <input type="checkbox"/>					
Home Depot..... <input type="checkbox"/>					
Leon's..... <input type="checkbox"/>					
Sears/Sears Furniture & Appliances..... <input type="checkbox"/>					
The Bay..... <input type="checkbox"/>					
The Brick..... <input type="checkbox"/>					
xxxxx..... <input type="checkbox"/>					
xxxxx..... <input type="checkbox"/>					
xxxxx..... <input type="checkbox"/>					
xxxxx..... <input type="checkbox"/>					
Any other local retailer..... <input type="checkbox"/>					
AMOUNT SPENT:					
\$500 or less..... <input type="checkbox"/>					
\$501 to \$1,000..... <input type="checkbox"/>					
\$1,001 to \$2,000..... <input type="checkbox"/>					
\$2,001 to \$5,000..... <input type="checkbox"/>					
More than \$5,000..... <input type="checkbox"/>					

HOME ENTERTAINMENT ITEMS, COMPUTER EQUIPMENT, PURCHASE OF MAJOR HOUSEHOLD ITEMS, LONG DISTANCE CALLS, CELL PHONES, PERSONAL ELECTRONIC DEVICES

HOME ENTERTAINMENT ITEMS	YOUR HOUSEHOLD		CELL PHONES	PERSONALLY HAVE
	Currently Has	Likely To Buy Next 12 Months		
Compact disc player <input type="checkbox"/> <input type="checkbox"/> DVD player <input type="checkbox"/> <input type="checkbox"/> Flat Screen TV (Plasma, LCD) <input type="checkbox"/> <input type="checkbox"/> Home Theatre System <input type="checkbox"/> <input type="checkbox"/> PVR (Personal Video Recorder) <input type="checkbox"/> <input type="checkbox"/> Satellite Radio <input type="checkbox"/> <input type="checkbox"/> Satellite TV <input type="checkbox"/> <input type="checkbox"/> Traditional TV <input type="checkbox"/> <input type="checkbox"/> Video game system (eg. Playstation, Nintendo, Xbox, Wii) <input type="checkbox"/> <input type="checkbox"/> Other home entertainment items <input type="checkbox"/> <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> CURRENT SERVICE PROVIDER: Aliant Mobility <input type="checkbox"/> Bell Mobility <input type="checkbox"/> Fido <input type="checkbox"/> Koodo Mobile <input type="checkbox"/> MTS Mobility <input type="checkbox"/> President's Choice <input type="checkbox"/> Rogers Wireless <input type="checkbox"/> SaskTel Mobility <input type="checkbox"/> Solo Mobile <input type="checkbox"/> TELUS <input type="checkbox"/> Videotron <input type="checkbox"/> Virgin Mobile <input type="checkbox"/> Other <input type="checkbox"/>	
COMPUTER HARDWARE & SOFTWARE -For Personal Home Use-	YOUR HOUSEHOLD BOUGHT IN PAST 2 YEARS		PERSONALLY USE	
	Hardware	Software	AMOUNT SPENT IN AVERAGE MONTH: \$20 or less <input type="checkbox"/> \$21 to \$50 <input type="checkbox"/> \$51 to \$100 <input type="checkbox"/> \$101 to \$250 <input type="checkbox"/> More than \$250 <input type="checkbox"/> PAYMENT PLAN: Prepaid <input type="checkbox"/> Monthly fee <input type="checkbox"/>	
YES <input type="checkbox"/> <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/> WHERE BOUGHT: Best Buy <input type="checkbox"/> <input type="checkbox"/> Costco <input type="checkbox"/> <input type="checkbox"/> Dell <input type="checkbox"/> <input type="checkbox"/> Future Shop <input type="checkbox"/> <input type="checkbox"/> MDG Computers <input type="checkbox"/> <input type="checkbox"/> Staples/Business Depot <input type="checkbox"/> <input type="checkbox"/> The Source by Circuit City <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> xxxxx <input type="checkbox"/> <input type="checkbox"/> Direct from other manufacturers <input type="checkbox"/> <input type="checkbox"/> Any other retail outlet <input type="checkbox"/> <input type="checkbox"/>			CELL PHONES <input type="checkbox"/> PERSONALLY USE <input type="checkbox"/> FEATURES ON YOUR CELL PHONE: Camera/video <input type="checkbox"/> E-mail <input type="checkbox"/> Games/Apps <input type="checkbox"/> Ringtones <input type="checkbox"/> MP3s <input type="checkbox"/> Text Messaging <input type="checkbox"/> Web Browser <input type="checkbox"/> Other <input type="checkbox"/>	
COMPUTER EQUIPMENT	YOUR HOUSEHOLD		INTENT TO ACQUIRE CELL PHONE	PERSONALLY INTEND TO ACQUIRE IN NEXT 12 MONTHS
	Currently Has	Likely To Buy Next 12 Months	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Laptop/notebook computer <input type="checkbox"/> <input type="checkbox"/> Desktop computer <input type="checkbox"/> <input type="checkbox"/> Printer/Scanner <input type="checkbox"/> <input type="checkbox"/> Router <input type="checkbox"/> <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/>			PERSONAL ELECTRONIC DEVICES <input type="checkbox"/> PERSONALLY <input type="checkbox"/> Currently Have <input type="checkbox"/> Likely To Buy/Upgrade Next 12 Months <input type="checkbox"/>	
LONG DISTANCE CALLS	YOUR HOUSEHOLD SPENDS		Personal Digital Assistant (eg. Palm Pilot, BlackBerry) <input type="checkbox"/> <input type="checkbox"/> MP3 Player/iPod <input type="checkbox"/> <input type="checkbox"/>	
	In Average Month			
AMOUNT SPENT: \$20 or less <input type="checkbox"/> \$21-\$50 <input type="checkbox"/> \$51-\$100 <input type="checkbox"/> \$101-\$250 <input type="checkbox"/> More than \$250 <input type="checkbox"/>				

HOME IMPROVEMENTS, HOME ACCESSORIES, BUILDING & HARDWARE SUPPLIES, GARDENING SUPPLIES

HOME IMPROVEMENTS TO PRINCIPAL DWELLING –Past 2 Years–	IN PAST 2 YEARS MOSTLY DONE BY	HOME ACCESSORIES –Lamps, Mirrors, Pictures, Ceiling Fans, etc.–	PERSONALLY BOUGHT
	Self Or Other Household Member Contracted Out		In Past 12 Months
(check all that apply) INTERIOR DECORATING: Floor or window coverings (excluding area rugs) <input type="checkbox"/> <input type="checkbox"/> Interior painting <input type="checkbox"/> <input type="checkbox"/> Wallpaper/wall coverings <input type="checkbox"/> <input type="checkbox"/> Did other interior decorating <input type="checkbox"/> <input type="checkbox"/> MAJOR REMODELING/RENOVATIONS: Remodeled: –Kitchen <input type="checkbox"/> <input type="checkbox"/> –Bathroom <input type="checkbox"/> <input type="checkbox"/> –Basement <input type="checkbox"/> <input type="checkbox"/> –Other room <input type="checkbox"/> <input type="checkbox"/> Made an addition <input type="checkbox"/> <input type="checkbox"/> Did other major remodeling/renovations <input type="checkbox"/> <input type="checkbox"/> DID OTHER TYPES OF EXTERIOR WORK: Brick/stone work <input type="checkbox"/> <input type="checkbox"/> Decking/fencing <input type="checkbox"/> <input type="checkbox"/> Exterior paint/staining <input type="checkbox"/> <input type="checkbox"/> Exterior siding <input type="checkbox"/> <input type="checkbox"/> Installed a pool/hot tub <input type="checkbox"/> <input type="checkbox"/> Landscaping <input type="checkbox"/> <input type="checkbox"/> New windows, skylights or doors <input type="checkbox"/> <input type="checkbox"/> Roofing <input type="checkbox"/> <input type="checkbox"/> Did other major exterior work <input type="checkbox"/> <input type="checkbox"/>		WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Costco <input type="checkbox"/> Home Depot <input type="checkbox"/> Home Outfitters <input type="checkbox"/> Pier 1 Imports <input type="checkbox"/> Sears/Sears Furniture & Appliances <input type="checkbox"/> The Bay <input type="checkbox"/> Winners/HomeSense <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any local/other home accessory store <input type="checkbox"/>	
		BUILDING & HARDWARE SUPPLIES –e.g. Wood, Tools, Plumbing Supplies–	PERSONALLY BOUGHT
			In Past 12 Months
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Home Depot <input type="checkbox"/> Reno-Depot <input type="checkbox"/> Rona/R Lansing/Rona Cashway/ Rona Home & Gin/Rona l'entrepot <input type="checkbox"/> Home Hardware/Building Centre <input type="checkbox"/> Wal-Mart <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other building and hardware stores <input type="checkbox"/>	
		AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>	
HOME IMPROVEMENTS TO PRINCIPAL DWELLING		IN PAST 2 YEARS	
		Total Amount Spent	
None <input type="checkbox"/> \$1 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,500 <input type="checkbox"/> \$2,501 to \$5,000 <input type="checkbox"/> \$5,001 to \$10,000 <input type="checkbox"/> More than \$10,000 <input type="checkbox"/>			
HOME ACCESSORIES –Lamps, Mirrors, Pictures, Ceiling Fans, etc.–		PERSONALLY BOUGHT	
		In Past 12 Months	
YES <input type="checkbox"/> NO <input type="checkbox"/>			
TYPES: Bedding/bath <input type="checkbox"/> Drapery/fabric <input type="checkbox"/> Floor covering (rugs/carpets) <input type="checkbox"/> Home décor/accessories <input type="checkbox"/> Kitchen accessories <input type="checkbox"/> Other accessories <input type="checkbox"/>		WHERE BOUGHT: Canadian Tire <input type="checkbox"/> Home Depot <input type="checkbox"/> Home Hardware <input type="checkbox"/> Reno-Depot <input type="checkbox"/> Revy H&G Ctr/R Cwy Bldg Ctrs/R H&G Ctr/ Rona L'entrepot/Rona <input type="checkbox"/> Sears <input type="checkbox"/> Wal-Mart <input type="checkbox"/> Zellers <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> xxxxx <input type="checkbox"/> Any other local independent retailer <input type="checkbox"/>	
AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> \$1,001 to \$2,000 <input type="checkbox"/> More than \$2,000 <input type="checkbox"/>		AMOUNT SPENT: \$100 or less <input type="checkbox"/> \$101 to \$250 <input type="checkbox"/> \$251 to \$500 <input type="checkbox"/> \$501 to \$1,000 <input type="checkbox"/> More than \$1,000 <input type="checkbox"/>	

CREDIT CARDS, REAL ESTATE, INFLUENCE ON BUSINESS PURCHASING/LEASING/CONTRACTING

CREDIT CARDS	IN YOUR NAME, JOINTLY OR THROUGH COMPANY Currently Have	THE FOLLOWING SECTION IS ABOUT YOUR INVOLVEMENT IN BUSINESS PURCHASING DECISIONS
NUMBER OF CREDIT CARDS: None <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 or more <input type="checkbox"/> TYPES OF CREDIT CARDS: Bank/Credit Union card (eg. Visa, MasterCard, etc.) <input type="checkbox"/> Store card <input type="checkbox"/> Gasoline card <input type="checkbox"/> Other card (eg. American Express, EnROUTE/Diner's Club Int., etc.) <input type="checkbox"/> TYPICAL PAYMENT: Partial <input type="checkbox"/> Full balance <input type="checkbox"/>		INFLUENCE ON BUSINESS PURCHASING/LEASING/ CONTRACTING
		PERSONALLY INVOLVED IN DECISIONS In Past 12 Months
INTENT TO PURCHASE REAL ESTATE YES <input type="checkbox"/> NO <input type="checkbox"/> FIRST HOME PURCHASED: YES <input type="checkbox"/> NO <input type="checkbox"/> INTEND TO PURCHASE: New home <input type="checkbox"/> Resale home <input type="checkbox"/> INTEND TO PURCHASE: Apartment (including condo/co-op) <input type="checkbox"/> Duplex, Triplex or Fourplex <input type="checkbox"/> Row or Townhouse (including condo/co-op) <input type="checkbox"/> Single detached house <input type="checkbox"/> Semi-detached house <input type="checkbox"/> Other <input type="checkbox"/> AMOUNT EXPECT TO SPEND: Less than \$100,000 <input type="checkbox"/> \$100,000 to \$200,000 <input type="checkbox"/> \$200,001 to \$300,000 <input type="checkbox"/> \$300,001 to \$400,000 <input type="checkbox"/> \$400,001 to \$500,000 <input type="checkbox"/> More than \$500,000 <input type="checkbox"/>		I am involved in business purchasing, leasing or contracting decisions: YES <input type="checkbox"/> NO <input type="checkbox"/> IF 'NO', GO TO PAGE 21 "LIFE EVENTS". ALL OTHERS CONTINUE.
		VALUE OF BUSINESS PURCHASING/LEASING/ CONTRACTING
REAL ESTATE (check response on each line) Will use a real estate agent to sell real estate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Will use a real estate agent to buy real estate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		AMOUNT SPENT WITH YOUR INVOLVEMENT: Under \$1,000 <input type="checkbox"/> \$1,000 to \$10,000 <input type="checkbox"/> \$10,001 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$250,000 <input type="checkbox"/> More than \$250,000 <input type="checkbox"/>
		INFLUENCE ON BUSINESS PURCHASING/LEASING/ CONTRACTING
(check response if applicable) FINANCIAL SERVICES: Banking/investments/insurance <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> TELEPHONE SERVICES: Data communications equipment <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Long distance supplier <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Telephone equipment and services <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> OFFICE EQUIPMENT: Computer hardware <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Computer software <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Internet service provider <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Office furniture <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Photocopier and fax equipment <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SERVICES: Outside services and consultants <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> BUSINESS FACILITIES: Business travel services <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Meeting facilities <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> BUSINESS VEHICLES: Fleet autos <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Trucks/trailers <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> MAINTENANCE: Maintenance and building services <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PROPERTY/REAL ESTATE: Industrial/commercial/institutional locations (buildings and property) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		YOUR HOUSEHOLD PLANS TO PURCHASE In Next 12 Months
		REAL ESTATE

INFLUENCE ON BUSINESS PURCHASING/LEASING/CONTRACTING, LIFE EVENTS, LIFESTYLE CHANGES, PETS

INFLUENCE ON BUSINESS PURCHASING/LEASING/ CONTRACTING	PERSONALLY HAVE SOME INFLUENCE AND ORGANIZATION EXPECTS TO PURCHASE In Next 12 Months		LIFESTYLE CHANGES	YOU PERSONALLY																														
				Started 6-12 Months Ago And Still Maintain	Started 6-12 Months Ago But Did <u>Not</u> Maintain																													
<p>(check all items for which you have some purchase influence and which your company expects to purchase in the next 12 months)</p> <p>Automotive vehicles <input type="checkbox"/></p> <p>Cell phone <input type="checkbox"/></p> <p>Computer-desktop <input type="checkbox"/></p> <p>Computer-laptop <input type="checkbox"/></p> <p>Fax machine <input type="checkbox"/></p> <p>Furniture <input type="checkbox"/></p> <p>Image scanner <input type="checkbox"/></p> <p>Personal Digital Assistant (eg. Palm Pilot, BlackBerry) <input type="checkbox"/></p> <p>Phone service or other equipment <input type="checkbox"/></p> <p>Photocopier <input type="checkbox"/></p> <p>Printer <input type="checkbox"/></p> <p>Security system <input type="checkbox"/></p> <p>Video camera <input type="checkbox"/></p> <p>None of the above <input type="checkbox"/></p>			<p>On a reduced cholesterol diet <input type="checkbox"/> <input type="checkbox"/></p> <p>On a reduced calorie diet <input type="checkbox"/> <input type="checkbox"/></p> <p>Quit/stopped smoking <input type="checkbox"/> <input type="checkbox"/></p> <p>Exercise regularly <input type="checkbox"/> <input type="checkbox"/></p>			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">PETS –Dogs, Cats, Other–</th> <th style="text-align: center;">YOUR HOUSEHOLD</th> </tr> </thead> <tbody> <tr> <td colspan="2"></td> <td style="text-align: center;">Currently Has</td> </tr> <tr> <td>YES.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>NO.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">AMOUNT SPENT IN PAST YEAR (food, care, vet bills, etc):</td> </tr> <tr> <td>\$100 to \$500.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>\$501 to \$1,000.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>\$1,001 to \$3,000.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>More than \$3,000.....</td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		PETS –Dogs, Cats, Other–		YOUR HOUSEHOLD			Currently Has	YES.....		<input type="checkbox"/>	NO.....		<input type="checkbox"/>	AMOUNT SPENT IN PAST YEAR (food, care, vet bills, etc):			\$100 to \$500.....		<input type="checkbox"/>	\$501 to \$1,000.....		<input type="checkbox"/>	\$1,001 to \$3,000.....		<input type="checkbox"/>	More than \$3,000.....		<input type="checkbox"/>
PETS –Dogs, Cats, Other–		YOUR HOUSEHOLD																																
		Currently Has																																
YES.....		<input type="checkbox"/>																																
NO.....		<input type="checkbox"/>																																
AMOUNT SPENT IN PAST YEAR (food, care, vet bills, etc):																																		
\$100 to \$500.....		<input type="checkbox"/>																																
\$501 to \$1,000.....		<input type="checkbox"/>																																
\$1,001 to \$3,000.....		<input type="checkbox"/>																																
More than \$3,000.....		<input type="checkbox"/>																																
LIFE EVENTS	TO YOU PERSONALLY																																	
	Happened Past 12 Months	Expect To Happen Next 12 Months																																
<p>(check all that apply in each column)</p> <p>Adult child returns to your home <input type="checkbox"/> <input type="checkbox"/></p> <p>Child gets married <input type="checkbox"/> <input type="checkbox"/></p> <p>Child goes to University/College/CEGEP <input type="checkbox"/> <input type="checkbox"/></p> <p>Child born/adopted <input type="checkbox"/> <input type="checkbox"/></p> <p>Grandchild born/adopted <input type="checkbox"/> <input type="checkbox"/></p> <p>Immediate family member (including yourself) moves to nursing / retirement home <input type="checkbox"/> <input type="checkbox"/></p> <p>Last child leaves home <input type="checkbox"/> <input type="checkbox"/></p> <p>Marry <input type="checkbox"/> <input type="checkbox"/></p> <p>Complete schooling <input type="checkbox"/> <input type="checkbox"/></p> <p>Start first full-time job <input type="checkbox"/> <input type="checkbox"/></p> <p>Start working after period between jobs .. <input type="checkbox"/> <input type="checkbox"/></p> <p>Take continuing education courses <input type="checkbox"/> <input type="checkbox"/></p> <p>Change job <input type="checkbox"/> <input type="checkbox"/></p> <p>Lose job or be laid off <input type="checkbox"/> <input type="checkbox"/></p> <p>Retire or semi-retire <input type="checkbox"/> <input type="checkbox"/></p> <p>Change principal home <input type="checkbox"/> <input type="checkbox"/></p> <p>Make first mortgage payment <input type="checkbox"/> <input type="checkbox"/></p> <p>Make last mortgage payment <input type="checkbox"/> <input type="checkbox"/></p> <p>Move out of your parents' home <input type="checkbox"/> <input type="checkbox"/></p> <p>Move to or from another city/town <input type="checkbox"/> <input type="checkbox"/></p> <p>Move within same city/town <input type="checkbox"/> <input type="checkbox"/></p>																																		

**THANK YOU FOR YOUR CO-OPERATION IN ANSWERING THESE QUESTIONS.
PLEASE RETURN THE QUESTIONNAIRE IN THE PRE-PAID ENVELOPE PROVIDED.**