Dataset name: demg_v1.1

Participant ID pid	Acrostic acrostic
	Interviewer compby Visit Code vc YYY
	Date of Visit vis_dat (mm/dd/yyyy)
	Demographics
	CRF 1.1
I would like to learn more about you, espe	cially your background, activities, and health.
1. Do you live alone? livalone_demg	
-9 1 Yes (Go to Q4) 0 No (Go to Q2) -8 Don't Know (Go to Q2) -7 Refused (Go to Q2) -6 Permanently Missing	
•	
2. Who lives with you?	
Spouse spouse_d	emg value="1" Paid paidempl_demg value="1" Employee
Child child_de	emg value="1" Other othlv_demg value="1"
Friend friend_de	emg value="1" (specify) othlvspc_demg
Other othrel_de Relative	emg value="1" Refused liveref_demg value="1"
3. Including yourself, how many live in y	our household: tothhmem_demg
tothhref_demg value="1"	
4. Which of the following best describes 9 1 Married 2 Separated 3 Divorced 4 Widowed 5 Never Married 6 Other -7 Refused -6 Permanently Missing	your current marital status? marst_demg
If "other" please specify: marstoth_d	emg2
4a. What is your maiden name? maid	en_demg

(Interviewer note: If participant is female and married, please record maiden name.)

4b. What is your state of birth? sob_demg
5. What was the last grade you completed in school? lastgr_demg 9 1 No Formal Education (00) 2 Elementary School (K-08) 3 High School/Equivalent (09-12) 4 College (13-16) 5 Post Graduate 6 Other -7 Refused -6 Permanently Missing
Other: lastgrspc_demg
6. Do you smoke any cigarettes at the present time? smokcurr_demg 1 Yes 0 No (Go to Q8) 8 Don't Know (Go to Q8) 7 Refused (Go to Q8) 6 Permanently Missing
7. How many cigarettes do you usually smoke per day? cigperdy_demg
8. Have you smoked a total of 100 or more cigarettes during your lifetime? smokd100_demg 9 1 Yes 0 No -8 Don't Know -7 Refused -6 Permanently Missing
Script: This next question is about drinking alcoholic beverages. Alcoholic beverages include beer, wine and wine coolers and liquor like whisky or vodka, or cocktails. A drink is one 12 ounce can of beer, a five ounce glass of wine or a drink containing a "shot", a "jigger" or a "finger of liquor".
9. During the past 12 months, how many drinks did you have in a typical week? If you are unsure, please make your best guess.
Number of Drinks numdrnk_demg -9 -8 Don't Know -7 Refused -6 Permanently Missing
10. Did you work for pay or as a volunteer in the last 7 days? workpyvl_demg 9 1 Yes (Go to Q11) 0 No (Go to Q12) 8 Don't Know (Go to Q12) -7 Refused (Go to Q12) 6 Permanently Missing

11. How many hours per week did you work for pay and/or as a volunteer? hrsworkd_demg

1	2. Have you EVER b	been employed for wages or salary?	everempl_demg
-9	9		
	Yes (Go to Q13)		
() No (Go to Q14)		
-8	B Don't Know (Go to Q14)		
-7	7 Refused (Go to Q14)		
-(6 Permanently Missing		
ſ			
L		· · · · · · · · · · · · · · · · · · ·	

13. What kind of work have you done most of your life? (What was your job called?) (Interviewer Note: Select the category which best describes their occupation)

0	ccp_demg
-9	
b c d e	Professional, technical and related occupations (i.e., teachers, professors, nurses, lawyers, physicians, and engineers.) Managers, administrators, or proprietors (i.e., sales managers, real estate agents, or postmasters.) Clerical and related occupations (i.e., secretaries, clerks, or mail carriers.) Sales occupations (i.e., salespersons, demonstrators, agents, and brokers.) Service occupations (i.e., police, cooks, or hairdressers.)
g h j	Skilled crafts, repairers, and related occupations (i.e., carpenters, repairers, or telephone line workers.) Laborers (i.e., helpers, or warehouse workers.) Farmers (owners, managers, operators, or tennants.) Equipment or vehicle operators and related occupations (i.e., drivers, railroad brakemen. Member of the military Permanently Missing

If Member of the military - (please X one that applies): occpml_demg Non-Commissioned Officer

Ŧ

- **Commissioned Officer**
- 1 2 3 4 -6 Enlisted Other

-9

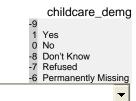
Permanently Missing

(specify other) : occpmlspc_demg

14. Roughly how much income from all sources (including earnings, pensions, investments, etc.) did your household have last year (before taxes)? (Show response card demg 1)



15. Are you currently providing childcare on a regular basis? (at least weekly)

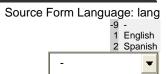


16. Are you currently taking care of a sick or frail older relative or friend on a regular basis? (Meaning on a daily or weekly basis helping the person with their personal care needs such as eating, dressing, or getting around the house, or with routine needs such as household chores, shopping, or business

crrel_demg

- -9 1 Yes (Go to Q17) 0 No (ÈND) Don't Know (END)
- -8 Don't Know (EN -7 Refused (END)

-6 Permanently Missing transactions.) Ŧ **17.** Approximately *how long* have you been caring for this person on a regular basis? Months: crrelmon_demg Years: crrelyrs_demg crreldk_demg -9 -8 Don't Know 2 N/A -7 Refused -6 Permanently Missing Ŧ



	LIFE	Acrostic
Participant ID (affix ID label here)	Interviewer Date of Visit	Visit Code

Demographics				
I would like to learn more about you, especially your background, activities and health.				
1. Do you live alone?	Yes No D/K Refused Go to Go to Go to Go to Go to #4 Go to Question #2 Go to Go to			
2. Who lives with you? (X all that apply)				
SpouseChildFriendOther Relative	Paid Employee Other: (specify) Refused			
3. Including yourself, how many live in your househ	old: Refused			
4. Which of the following best describes your current marital status? Married Separated Divorced Widowed				
 4a. What is your maiden name?				
5. What was the last grade you completed in school	?			
No formal Education (00)Elementary School (K-08)High School/Equivalent (09-12)	College (13-16) Post Graduate Other: Refused			
6. Do you smoke any cigarettes at the present time?	Yes No D/K Refused			
How many cigarettes do you usually smoke per day?	Go to Question # 8			
8. Have you smoked a total of 100 or more cigarettes during your lifetime?	Yes No D/K Refused			

Participant ID	LIFE	Acrostic
Fantopant iD		Visit Code
(affix ID label here)		
Script: This next question is about d	Irinking alcoholic bev	erages. Alcoholic beverages
include beer, wine and wine cooler drink is one 12 ounce can of beer,		
"shot", a "jigger" or a "finger of liq		
9. During the past 12 months, how mai	ny drinks did you have i	in a typical week?
If you are unsure, please make your		
	Don't Know	
Number of Drinks	Refused	
10. Did you work for pay or as a volunte	er in the last 7 days?	Yes No D/K Refused
		Go to Question # 12
		# 11
11. How many hours per week did you w	vork for pay and/or as a	
12. Have you EVER been employed for	wages or salary?	Yes <u>No</u> D/K R <u>efus</u> ed
	hagee of calary i	
		Go to Go to Question # 14
		Question 413

Participant ID (affix ID label here)	Acrostic
13. What kind of work have you done most of your life? (What was	your job called?)
(Interviewer Note: Select the category which best describes their of	
 Professional, technical and related occupations (i.e., teachers, profe physicians, and engineers.) 	ssors, nurses, lawyers,
 Managers, administrators, or proprietors (i.e., sales managers, real e postmasters.) 	estate agents, or
c. Clerical and related occupations (i.e., secretaries, clerks, or mail car	riers.)
d. Sales occupations (i.e., salespersons, demonstrators, agents, and b	rokers.)
e. Service occupations (i.e., police, cooks, or hairdressers.)	
 Skilled crafts, repairers, and related occupations (i.e., carpenters, re workers.) 	pairers, or telephone line
g. Laborers (i.e., helpers or warehouse workers.)	
h. Farmers (owners, managers, operators, or tenants.)	
i. Equipment or vehicle operators and related occupations (i.e., drivers	s, railroad brakemen.)
j. Member of the military (please X one that applies):	
Non-Commissioned Officer	Officer
Enlisted Other:	<u> </u>
14. Roughly how much income from all sources (including earning etc.) did your household have last year (before taxes)? (Show a. Less than \$5000 b. \$5,000 to \$9,999 c. \$10,000 to \$14,999 d. \$15,000 to \$24,999 e. \$25,000 to \$34,999	v response card demg 1) 999 999 ater

(affix ID label here)	Participant ID (affix ID label here)	LIFE	
-----------------------	---	------	--

15. Are you currently providing childcare on a regular basis? (at least weekly)	Yes	No	D/K	Refused
16. Are you currently taking care of a sick or frail relative or friend on a regular basis? (Meaning on a daily or weekly basis helping the person with their personal care needs such as eating, dressing, or getting around the house, or with routine needs such as household chores, shopping, or business transactions.)	Yes ↓ Go to Question #17	No	D/K ↓ END	Refused
17. Approximately how long have you been caring for this person on a regular basis?	Years	D/K	N/A	Refused