	SUNV	YEY OF CONSUMER FINANCE Summer 19
Sample Label		
		2. Interviewer's Label
. Your IW No.		7. Total Calls (Call # of Final Call)
. Length of Iw	(Minutes)	8. Date of Final Result
. Length of Edit	(Minutes)	9. Final Result Code
	YES>(Date)	BSERVATION SECTION AND THUMBNAIL SKETCH
THE ADDRESS OR DES	CRIPTION ON THE SAMPLE	LABEL ABOVE WAS FOUND TO HAVE: (CHECK ONE)
1 HU 2 HU'S 3	HU'S 4 HU'S 5	OR MORE HU's> Do not attempt any interviews. Obtain HU locations within the structure and call your supervisor.
	described by adding to HU 1 in the structure:	the sample address on the label the following description about the
description	and location of HU in	description for each of the additional HU's is (use street address/ the structure:
Make out an unla additional HU's. ID's on the resp Be sure to add to Hello, my name identification interested in	belled coversheet for e Call your supervisor ective lines above. En hese ID's to your SAS. is, and I wo (SHOW ID). The Univer the financial situation	each of the additional HUs. Attempt an interview at HU 1 and at each of the later to obtain a sample ID for each of the additional HU's. Record the ster the ID in Box 0 of the unlabelled coversheet for each added HU(s). Tork for The University of Michigan's Survey Research Center. Here is my esity of Michigan is conducting a study throughout the country and we are as of households in the United States. This address was selected as part of the someone here. TURN TO P. 8, ITEM 13, HOUSEHOLD LISTING.
CALL RECORD		
(b) (c) (d) DAY OF TIME DATE WEEK AM/P		(g) (h) (j) APPT. MADE APPT. KEPT PROVIDE A COMPLETE DESCRIPTION OF CONTACT OR ATTEMPT YES / NO YES/NO/INAP TO CONTACT ON THE LINES BELOW. GIVE COMPLETE DETAILS
	(e) (f) IWER CONTACT WITH	(g) (h) (j) APPT. MADE APPT. KEPT PROVIDE A COMPLETE DESCRIPTION OF CONTACT OR ATTEMPT

Z1.	INTERVIEWER CHECKPOINT: RESPONDENT: EMPLOYER/PENSION/SOCIAL SECURITY NUMBER
	1. R IS COVERED BY A PENSION FROM CURRENT JOB (BOX 1 CHECKED AT Y42) 2. ALL OTHERS, (BOX 2 CHECKED AT Y42)>GO TO Z3BOTTOM OF THIS PAGE
Z2 .	I need to get just a few more pieces of information before I leave. In order to obtain the latest available information about the retirement benefits that people with work experience like yours are entitled to, we would like to contact the employer who will be providing your <u>primary</u> pension. For this purpose, we need to know the name and address of the employer, or other organization, that provides the <u>primary</u> pension you expect to receive.
Z2a.	EMPLOYER NAME:
	ADDRESS: NUMBER AND STREET / CITY, STATE AND ZIP CODE
Z2b.	PENSION PROVIDER (IF DIFFERENT):
	ADDRESS:
	NUMBER AND STREET CITY, STATE AND ZIP CODE
Z2c.	REFUSED (EXPLAIN):
Z2d.	What is the official title of the job from which you expect to receive your <u>primary</u> pension? OFFICIAL JOB TITLE
Z2e.	In order to get complete information on the adequacy of pension and retirement income and to examine health care benefit information of households in our sample, we would like to know your Social Security Number(what is your Social Security Number?)
	SOCIAL SECURITY NUMBER
Z2f.	REFUSED (EXPLAIN):
	NEXT PAGE, Z4
Z3.	The Survey Research Center would like to obtain the latest available information about the retirement and health benefits that you and others like you can expect to receive. For this reason, we would like to know your Social Security Number (what is your Social Security Number)?
	SOCIAL SECURITY NUMBER
Z3a.	REFUSED (EXPLAIN):

Z4.	INTERVIEWER CHECKPOINT: SPOUSE: EMPLOYER/PENSION/SS#							
	3. R IS NOT MARRIED (BOX 3 CHECKED AT Y43)>NEXT PAGE, R1							
	4. S IS COVERED BY A PENSION FROM CURRENT JOB (BOX 4 CHECKED AT Y43)							
	5. ALL OTHERS (BOX 5 CHECKED AT Y43)>GO TO Z6BOTTOM OF THIS PAGE							
Z5.	We would also like to obtain information about the retirement benefits that peop with work experience like your (husband/wife) are entitled to receive. (In orde do this, we would like to contact the employer who will be providing (his/her) primary pension.) For this purpose, we would like to know the name and address the employer, or other organization, that provides the primary pension that (he/expects to receive.							
Z5a.	EMPLOYER NAME:							
	ADDRESS: / CITY, STATE AND ZIP CODE							
Ζ5Ъ.	PENSION PROVIDER (IF DIFFERENT):							
	ADDRESS:/ CITY, STATE AND ZIP CODE							
Z 5c.	REFUSED (EXPLAIN):							
Z5d.	(his/her) primary pension?							
	OFFICIAL JOB ŢITLE							
Z5e.	In addition, to get complete information about your (husband's/wife's) retirement and health benefits, we would like to know (his/her) Social Security Number(what is [his/her] Social Security Number?)							
	SOCIAL SECURITY NUMBER							
Z5f.	REFUSED (EXPLAIN):							
	NEXT PAGE, R1							
Z6.	(The Survey Research Center would like to obtain the latest available information about the retirement and health benefits that your [husband/wife] and others like [him/her] can expect to receive.) (For this reason,) we would like to know your (husband's/wife's) Social Security Number (what is [his/her] Social Security Number)?							
	SOCIAL SECURITY NUMBER							
Z6a.	REFUSED (EXPLAIN):							

NEXT PAGE, R1

RECONTACT INFORMATION

R1.	Thank you very much for this interview. We value people like you who are willing to contribute their experiences to our research. We will be sending you a report of some of our findings as a way of expressing our appreciation for your cooperation. Our Regional Supervisor may also be calling or writing you to verify this interview. For these reasons I would like to ask for your name, address and telephone number. (FOR WOMEN OBTAIN THEIR FIRST NAME, NOT THEIR HUSBAND'S FIRST NAME.)
Rla.	What is your <u>full legal</u> name as it appears on official documents such as your voter's registration, Social Security Card, or driver's license? (IWER: VERIFY SPELLING OF R'S FULL NAME AND WRITE CLEARLY.)
	TITLE: MR MRS MISS MS DR REV NAME REFUSED
	FIRST NAME MIDDLE LAST NAME INITIAL
Rlb.	What is your address? ADDRESS REFUSED
	STREET ADDRESS
	CITY STATE ZIP CODE
R2.	INTERVIEWER CHECKPOINT: ADDRESS AT R1b ABOVE IS:
	1. IDENTICAL TO SAMPLE 2. CORRECTED VERSION OF LABEL ADDRESS 3. DIFERENT FROM SAMPLE . LABEL
	GO TO R4 GO TO R4
R3.	Is this a mailing address for your home, an address you will be moving to, a relative's address, the address of a friend, a business address, or what?
	1. MAILING ADDRESS TO WHICH R IS MOVING 3. RELATIVE 4. FRIEND 5. BUSINESS 7. OTHER:
R4.	And, what is your telephone number?
	R HAS NO PHONE PHONE NUMBER REFUSED
	AREA CODE TELEPHONE NUMBER

NEXT PAGE, R6

1. YES,	LISTED	5. NO, NO	T LISTED	8. NO	SURE, DON'	T KNOW	
Y			GC	TO R6			
R5a. Is	your phone	listed in	your name	? 			
1.	7ES 5. 1	10>			is the phon nis person t		
,			NAME			RELAT	TIONSHIP
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1. YES -			h to conta ddress and			reside	ence. May I
5. NO	- 5	TREET AD	DRESS			ADDE	RESS REFUSED
		ITY			ST	ATE	ZIP
	(/	REA CODE) NUMB	ER	R HAS NO P	HONE	PHONE REFUSED
name, addr to get in	ess, and te touch with	lephone myou? (An	number of nd what is	a close f this per	riend or re son's relat RELATIO	lative ionship NSHIP T	'O R:
- ADDRESS:							
	ED <u>ANY</u> RECO ATION WAS R		FORMATION:	WHAT IS	YOUR UNDER	STANDIN	G OF THE REAS

NONINTERVIEW FORM

This form <u>MUST</u> be completed for each coversheet finalized as a Noninterview.

Coversheets finalized as Nonsample do not need to have a Noninterview Form completed.

Did you ever have any contact with the respondent? NO ---> GO TO NI3 1. YES Did R refuse initially? NI2. NI2a. Did R break any appointments? 2. TWO OR MORE 1. YES 5. NO ---> O. NONE 1. ONE NI2b. If there was any resistance from the respondent, what were the reasons given? (CHECK ALL THAT APPLY.) A. SURVEYS WASTE OF C. 'TOO D. STRESSFUL E. CONFIDEN-B. VERY TIALITY TIME: PREVIOUS BUSY' FAMILY ILL BAD EXPERIENCE SITUATION F. INVASION OF G. NO REASON H. OTHER: PRIVACY GIVEN NI3. Describe here **IN DETAIL** any interactions you had with the respondent or informant(s) that will help us understand finalizing this coversheet as a Noninterview. Examples of the kind of information we need are attempts made at persuasion--letters, visits, coversheet transfers, excuses/reasons R gave for not participating.

	DATE	DAY OF WEEK		IWER ID	R/INF/NO ONE			PROVIDE A COMPLETE DESCRIPTION OF CONTACT OR ATTEMPT TO CONTACT ON THE LINES BELOW. GIVE COMPLETE DETAIL
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13. In order to determine whom to interview, I need to know who lives here at this address--not their names, just their ages and their relationship to you. Let's start with you--how old are you? (CONTINUE LISTING ALL MEMBERS OF THIS HOUSEHOLD BY RELATIONSHIP TO INFORMANT.)

	(a)	(b)	(c)	(d)
	Household Members by Relationship to Informant	Sex	Age	Enter "R" to Identify Respondent
1.	INFORMANT			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

WHOM TO INTERVIEW -- INTERVIEWER INSTRUCTIONS

- a. If household contains only a married couple or persons living as though married, with or without children, interview the person who is most knowledgeable about the family's assets and debts.
- b. If household contains only an adult and their minor children, interview the adult.
- c. If household contains unrelated roommates who are 18 years of age or older, list the household and interview person closest to age 45 as a single person economic unit.
- d. If household contains an extended family (persons related by blood, marriage or adoption--e.g., adult married children living with parents), interview the person or persons most knowledgeable about the family's assets and debts. (FAMILY TO BE INTERVIEWED IS DETERMINED BY WHOSE NAME IS ON THE LEASE OR MORTGAGE. INTERVIEW THE MOST KNOWLEDGEABLE PERSON IN THAT FAMILY.)
- e. If unclear whom to interview (especially in case d.) -- CALL THE F.O.
- f. NOTE: In <u>ALL</u> situations, the person whose occupation is asked about in Section R is considered the <u>Respondent</u>. Indicate R for this cover sheet in Col. (d) above.
- 14. We would like to conduct the interview with the person or persons in your family who are most knowledgeable about the family's assets and debts. Who would that be?
- 15. IF MOST KNOWLEDGEABLE PERSON IS NOT AT HOME, DETERMINE CONVENIENT TIME FOR IW (AND PHONE NUMBER IF APPROPRIATE). RECORD THIS INFORMATION IN THE CALL RECORD, ITEM 12.