

# BEVERAGES SERVED IN HOUSEHOLD/HOUSEHOLD PRODUCTS

		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th rowspan="2" style="text-align: left; padding: 5px;">TOILET PAPER</th> <th colspan="2" style="text-align: center; padding: 5px;">USED IN HOUSEHOLD</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Most Often</th> <th style="text-align: center; padding: 5px;">Others Sometimes</th> </tr> <tr> <td colspan="3" style="padding: 5px;"><b>BRANDS (Continued):</b></td> </tr> <tr> <td style="padding: 5px;">Majesta Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">President's Choice</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Purex</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Purex Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Purex Ultra</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Royale</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Royale Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Royale Ultra</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Scott Premium</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">White Swan</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Store Brand</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;"><i>Other</i></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> </table>	TOILET PAPER	USED IN HOUSEHOLD		Most Often	Others Sometimes	<b>BRANDS (Continued):</b>			Majesta Double Roll	<input type="checkbox"/>	<input type="checkbox"/>	President's Choice	<input type="checkbox"/>	<input type="checkbox"/>	Purex	<input type="checkbox"/>	<input type="checkbox"/>	Purex Double Roll	<input type="checkbox"/>	<input type="checkbox"/>	Purex Ultra	<input type="checkbox"/>	<input type="checkbox"/>	Royale	<input type="checkbox"/>	<input type="checkbox"/>	Royale Double Roll	<input type="checkbox"/>	<input type="checkbox"/>	Royale Ultra	<input type="checkbox"/>	<input type="checkbox"/>	Scott Premium	<input type="checkbox"/>	<input type="checkbox"/>	White Swan	<input type="checkbox"/>	<input type="checkbox"/>	Store Brand	<input type="checkbox"/>	<input type="checkbox"/>	<i>Other</i>	<input type="checkbox"/>	<input type="checkbox"/>																																								
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TOILET PAPER	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center; padding: 5px;">USED IN HOUSEHOLD</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Most Often</th> <th style="text-align: center; padding: 5px;">Others Sometimes</th> </tr> <tr> <td style="padding: 5px;">YES</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">NO</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;"><b>ROLL SIZE:</b></td> </tr> <tr> <td style="padding: 5px;">Regular</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Double</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Jumbo/Giant</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;"><b>BRANDS:</b></td> </tr> <tr> <td style="padding: 5px;">Capri</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Cascades</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Charmin</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Charmin Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Charmin Ultra</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Charmin Ultra Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Chelsea/Kirkland</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Cottonelle/Cashmere</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Cottonelle/Cashmere Double Roll</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Cottonelle/Cashmere Jumbo</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Cottonelle/Cashmere Ultra</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Kleenex Ultra Soft</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Life Brand</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Majesta</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> </table>	USED IN HOUSEHOLD		Most Often	Others Sometimes	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<b>ROLL SIZE:</b>		Regular	<input type="checkbox"/>	Double	<input type="checkbox"/>	Jumbo/Giant	<input type="checkbox"/>	<b>BRANDS:</b>		Capri	<input type="checkbox"/>	Cascades	<input type="checkbox"/>	Charmin	<input type="checkbox"/>	Charmin Double Roll	<input type="checkbox"/>	Charmin Ultra	<input type="checkbox"/>	Charmin Ultra Double Roll	<input type="checkbox"/>	Chelsea/Kirkland	<input type="checkbox"/>	Cottonelle/Cashmere	<input type="checkbox"/>	Cottonelle/Cashmere Double Roll	<input type="checkbox"/>	Cottonelle/Cashmere Jumbo	<input type="checkbox"/>	Cottonelle/Cashmere Ultra	<input type="checkbox"/>	Kleenex Ultra Soft	<input type="checkbox"/>	Life Brand	<input type="checkbox"/>	Majesta	<input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th rowspan="2" style="text-align: left; padding: 5px;">PAPER TOWELS</th> <th colspan="2" style="text-align: center; padding: 5px;">USED IN HOUSEHOLD</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Past 6 Months</th> <th style="text-align: center; padding: 5px;">Past 30 Days</th> </tr> <tr> <td style="padding: 5px;">YES</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">NO</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3" style="padding: 5px;"><b>NUMBER OF ROLLS:</b></td> </tr> <tr> <td style="padding: 5px;">None</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">Less Than 1</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">1-2</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">3-4</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 5px;">5+</td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> <td style="text-align: center; padding: 5px;"><input type="checkbox"/></td> </tr> </table>	PAPER TOWELS	USED IN HOUSEHOLD		Past 6 Months	Past 30 Days	YES	<input type="checkbox"/>	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>	<b>NUMBER OF ROLLS:</b>			None	<input type="checkbox"/>	<input type="checkbox"/>	Less Than 1	<input type="checkbox"/>	<input type="checkbox"/>	1-2	<input type="checkbox"/>	<input type="checkbox"/>	3-4	<input type="checkbox"/>	<input type="checkbox"/>	5+	<input type="checkbox"/>	<input type="checkbox"/>									
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1-2	<input type="checkbox"/>	<input type="checkbox"/>																																																																																				
3-4	<input type="checkbox"/>	<input type="checkbox"/>																																																																																				
5+	<input type="checkbox"/>	<input type="checkbox"/>																																																																																				

# HOUSEHOLD PRODUCTS

PAPER TOWELS	USED IN HOUSEHOLD		PRE-MOISTENED HOUSEHOLD WIPES	USED IN HOUSEHOLD		PLASTIC-TYPE KITCHEN WRAP	USED IN HOUSEHOLD	
	Most Often	Others Sometimes		Past 6 Months	Past 30 Days		Past 6 Months	Past 7 Days
<b>BRANDS:</b> Bounty White <input type="checkbox"/> <input type="checkbox"/> Bounty Prints <input type="checkbox"/> <input type="checkbox"/> Cascades <input type="checkbox"/> <input type="checkbox"/> Chelsea/Kirkland <input type="checkbox"/> <input type="checkbox"/> Majesta <input type="checkbox"/> <input type="checkbox"/> Mardi Gras <input type="checkbox"/> <input type="checkbox"/> Mardi Gras Prints <input type="checkbox"/> <input type="checkbox"/> Royale <input type="checkbox"/> <input type="checkbox"/> Scottowels/Sponge Towels <input type="checkbox"/> <input type="checkbox"/> Scottowels Ultra <input type="checkbox"/> <input type="checkbox"/> Sparkle <input type="checkbox"/> <input type="checkbox"/> Sparkle Prints <input type="checkbox"/> <input type="checkbox"/> Viva <input type="checkbox"/> <input type="checkbox"/> White Swan <input type="checkbox"/> <input type="checkbox"/> Store Brand <input type="checkbox"/> <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF PACKAGES:</b> None <input type="checkbox"/> Less Than 1 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> 5+ <input type="checkbox"/> <b>TYPES:</b> Adult <input type="checkbox"/> General Purpose <input type="checkbox"/> <b>KINDS:</b> Scented <input type="checkbox"/> Unscented <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF TIMES:</b> None <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+ <input type="checkbox"/>		
PAPER NAPKINS	USED IN HOUSEHOLD		GARBAGE BAGS	USED IN HOUSEHOLD		PLASTIC FOOD CONTAINERS	USED IN HOUSEHOLD	
	Past 6 Months	Past 30 Days		Past 6 Months	Past 30 Days		Past 6 Months	Past 7 Days
YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF NAPKINS:</b> None <input type="checkbox"/> Less Than 50 <input type="checkbox"/> 50-100 <input type="checkbox"/> 101+ <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF BAGS:</b> None <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10-19 <input type="checkbox"/> 20+ <input type="checkbox"/> <b>TYPES:</b> Garden/Outdoor <input type="checkbox"/> Kitchen <input type="checkbox"/> Large Bags <input type="checkbox"/> Recycling <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>TYPES:</b> Reusable <input type="checkbox"/> Disposable <input type="checkbox"/>		
PAPER NAPKINS	USED IN HOUSEHOLD		PLASTIC FREEZER BAGS	USED IN HOUSEHOLD		ALUMINUM FOIL	USED IN HOUSEHOLD	
	Most Often	Others Sometimes		Past 6 Months	Past 30 Days		Past 6 Months	Past 7 Days
<b>BRANDS:</b> Bounty <input type="checkbox"/> <input type="checkbox"/> Cascades <input type="checkbox"/> <input type="checkbox"/> Hi Dri <input type="checkbox"/> <input type="checkbox"/> Kleenex Dinner <input type="checkbox"/> <input type="checkbox"/> Kleenex Luncheon <input type="checkbox"/> <input type="checkbox"/> Majesta <input type="checkbox"/> <input type="checkbox"/> Mardi Gras <input type="checkbox"/> <input type="checkbox"/> Royale Luncheon <input type="checkbox"/> <input type="checkbox"/> Royale Dinner <input type="checkbox"/> <input type="checkbox"/> White Swan <input type="checkbox"/> <input type="checkbox"/> Store Brand <input type="checkbox"/> <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF BAGS:</b> None <input type="checkbox"/> 1-3 <input type="checkbox"/> 4-8 <input type="checkbox"/> 9+ <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF TIMES:</b> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3-4 <input type="checkbox"/> 5+ <input type="checkbox"/>		
DISPOSABLE TABLEWARE	USED IN HOUSEHOLD		PLASTIC SANDWICH BAGS	USED IN HOUSEHOLD		IN TANK TOILET BOWL CLEANERS	USED IN HOUSEHOLD	
	Past 6 Months	Past 30 Days		Past 6 Months	Past 7 Days		Past 6 Months	
YES <input type="checkbox"/> NO <input type="checkbox"/> <b>TYPES:</b> Plates <input type="checkbox"/> Cups <input type="checkbox"/> Cutlery <input type="checkbox"/> <b>NUMBER OF PACKS:</b> None <input type="checkbox"/> Less Than 1 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> 5+ <input type="checkbox"/> <b>KINDS:</b> Foam <input type="checkbox"/> Paper <input type="checkbox"/> Plastic <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF BAGS:</b> None <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-9 <input type="checkbox"/> 10+ <input type="checkbox"/> <b>TYPES:</b> Zipper <input type="checkbox"/> Open Top <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/> <b>TYPES:</b> Liquid Automatic <input type="checkbox"/> Pucks <input type="checkbox"/>		
						IN BOWL TOILET CLEANERS	USED IN HOUSEHOLD	
							Past 6 Months	
						YES <input type="checkbox"/> NO <input type="checkbox"/> <b>NUMBER OF TIMES:</b> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> 5+ <input type="checkbox"/>		

# HOUSEHOLD PRODUCTS

IN BOWL TOILET CLEANERS	USED IN HOUSEHOLD		AUTOMATIC DISHWASHER DETERGENT	USED IN HOUSEHOLD		ALL PURPOSE HOUSEHOLD CLEANERS	USED IN HOUSEHOLD			
	Most Often	Others Sometimes		Past 6 Months	Past 7 Days		Most Often	Others Sometimes		
<b>TYPES:</b> Clip On ..... <input type="checkbox"/> ..... <input type="checkbox"/> Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>		<b>TYPES:</b> Creams/Gels ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wipes ..... <input type="checkbox"/> ..... <input type="checkbox"/>					
<b>BRANDS:</b> 2000 Flushes ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fantastik ..... <input type="checkbox"/> ..... <input type="checkbox"/> Javex ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lime-A-Way ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Plus Bleach ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Power-On Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Ready Brush ..... <input type="checkbox"/> ..... <input type="checkbox"/> Sani-Flush ..... <input type="checkbox"/> ..... <input type="checkbox"/> Toilet Duck ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tilex ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vanish ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Thick Bleach ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>			<b>NUMBER OF LOADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>		<b>WHERE USED:</b> Bathroom ..... <input type="checkbox"/> ..... <input type="checkbox"/> Kitchen ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other Areas ..... <input type="checkbox"/> ..... <input type="checkbox"/>					
			AUTOMATIC DISHWASHER DETERGENT	USED IN HOUSEHOLD						
			Most Often	Others Sometimes						
			<b>TYPES:</b> Gel Pacs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid/Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tablets ..... <input type="checkbox"/> ..... <input type="checkbox"/>		<b>BRANDS:</b> Ajax ..... <input type="checkbox"/> ..... <input type="checkbox"/> Bam ..... <input type="checkbox"/> ..... <input type="checkbox"/> Clorox Clean-Up ..... <input type="checkbox"/> ..... <input type="checkbox"/> Clorox Disinfecting & Cleaning Wipes ..... <input type="checkbox"/> ..... <input type="checkbox"/> CLR ..... <input type="checkbox"/> ..... <input type="checkbox"/> Comet ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hertel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Javex Cleaner ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lestoil ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol All Purpose ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Disinfecting Wipes ..... <input type="checkbox"/> ..... <input type="checkbox"/> Mr. Clean ..... <input type="checkbox"/> ..... <input type="checkbox"/> Murphy's Oil Soap ..... <input type="checkbox"/> ..... <input type="checkbox"/> Pine Sol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Spic'N Span ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Cream Cleanser ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Oxy Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Thick Bleach ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>					
			<b>RINSE AGENTS:</b> Solid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/>							
DRAIN CLEANERS	USED IN HOUSEHOLD									
		Past 6 Months								
YES ..... <input type="checkbox"/>										
NO ..... <input type="checkbox"/>										
<b>NUMBER OF TIMES:</b> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>										
DISHWASHING LIQUID	USED IN HOUSEHOLD		SCOURING CLEANSERS	USED IN HOUSEHOLD		HOUSEHOLD CLEANERS — Spray Bottle —	USED IN HOUSEHOLD			
		Past 6 Months	Past 6 Months	Past 7 Days		Past 6 Months	Past 7 Days			
YES ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/>				
NO ..... <input type="checkbox"/>			NO ..... <input type="checkbox"/>			NO ..... <input type="checkbox"/>				
<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10-20 ..... <input type="checkbox"/> 21+ ..... <input type="checkbox"/>			<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>		<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6+ ..... <input type="checkbox"/>					
<b>TYPES:</b> Ultra/Concentrate ..... <input type="checkbox"/> Regular ..... <input type="checkbox"/>			<b>KINDS:</b> Powder ..... <input type="checkbox"/> Creme/Liquid ..... <input type="checkbox"/>		<b>HOUSEHOLD CLEANERS — Spray Bottle —</b> USED IN HOUSEHOLD Most Often ..... <input type="checkbox"/> Others Sometimes ..... <input type="checkbox"/>					
DISHWASHING LIQUID	USED IN HOUSEHOLD		ALL PURPOSE HOUSEHOLD CLEANERS	USED IN HOUSEHOLD						
		Past 6 Months	Past 6 Months	Past 7 Days						
YES ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/>			<b>WHERE USED:</b> Bathroom ..... <input type="checkbox"/> ..... <input type="checkbox"/> Kitchen ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other Areas ..... <input type="checkbox"/> ..... <input type="checkbox"/>				
NO ..... <input type="checkbox"/>			NO ..... <input type="checkbox"/>							
<b>BRANDS:</b> Dawn ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ivory ..... <input type="checkbox"/> ..... <input type="checkbox"/> Palmolive ..... <input type="checkbox"/> ..... <input type="checkbox"/> President's Choice ..... <input type="checkbox"/> ..... <input type="checkbox"/> Sunlight ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>			<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6+ ..... <input type="checkbox"/>		<b>BRANDS:</b> Bam ..... <input type="checkbox"/> ..... <input type="checkbox"/> Clorox Clean-Up ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fantastik ..... <input type="checkbox"/> ..... <input type="checkbox"/> Glass Plus ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hertel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol All-Purpose ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Antibacterial Kitchen Cleaner ..... <input type="checkbox"/> ..... <input type="checkbox"/> Mr. Clean ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Oxy Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Windex ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>					

# HOUSEHOLD PRODUCTS

BATHROOM CLEANERS		USED IN HOUSEHOLD		METAL POLISH		USED IN HOUSEHOLD		CARPET AND RUG CLEANERS		USED IN HOUSEHOLD	
		Past 6 Months	Past 7 Days			Past 6 Months	Past 30 Days			Past 6 Months	
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF CONTAINERS:</b> Less Than 1 ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>			
BATHROOM CLEANERS		USED IN HOUSEHOLD		FURNITURE POLISH/ LEMON OIL		USED IN HOUSEHOLD		AIR FRESHENERS, CARPET & ROOM DEODORIZERS		USED IN HOUSEHOLD	
		Most Often	Others Sometimes			Past 6 Months	Past 30 Days			Past 6 Months	Past 3 Months
<b>TYPES:</b> Aerosol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Creams/Gels ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Trigger Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wipes ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>BRANDS:</b> Fantastik Cleaner ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fantastik Shower Shine ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lime-A-Way Trigger ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol Bathroom Cleaner —Trigger ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Aerosol ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Wipes ..... <input type="checkbox"/> ..... <input type="checkbox"/> Mr. Clean Bathroom —Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Scrub Free Daily Shower Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Scrub Free Mildew Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Scrub Free Soap Scum Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tilex Fresh Shower Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tilex Mildew Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tilex Soap Scum Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Bathroom Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vim Cream ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>  <b>TYPES:</b> Lemon Oil ..... <input type="checkbox"/> Furniture Polish —Spray ..... <input type="checkbox"/> —Other ..... <input type="checkbox"/> Wipes ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF PACKAGES:</b> None ..... <input type="checkbox"/> Less Than 1 ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6+ ..... <input type="checkbox"/>			
SCOURING PADS		USED IN HOUSEHOLD		FLOOR WAX & POLISH		USED IN HOUSEHOLD		AIR FRESHENERS, CARPET & ROOM DEODORIZERS		USED IN HOUSEHOLD	
		Past 6 Months	Past 30 Days			Past 6 Months	Past 30 Days			Most Often	Others Sometimes
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF PADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>TYPES:</b> Cleaner ..... <input type="checkbox"/> One Step Clean & Shine ..... <input type="checkbox"/> Polish ..... <input type="checkbox"/> Paste Wax ..... <input type="checkbox"/> Liquid Wax ..... <input type="checkbox"/>				Aerosol Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Automatic Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Carpet Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/> Disinfectant Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Electrical Oil/Plug In ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fragrance Discs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Portable Oil ..... <input type="checkbox"/> ..... <input type="checkbox"/> Scented Candles ..... <input type="checkbox"/> ..... <input type="checkbox"/> Solid Gel ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>BRANDS:</b> Airwick/Wizard ..... <input type="checkbox"/> ..... <input type="checkbox"/> Arm & Hammer ..... <input type="checkbox"/> ..... <input type="checkbox"/> Carpet Fresh ..... <input type="checkbox"/> ..... <input type="checkbox"/> Febreze ..... <input type="checkbox"/> ..... <input type="checkbox"/> Glade ..... <input type="checkbox"/> ..... <input type="checkbox"/> Lysol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Neutra Air By Lysol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Renuzit ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>			
WINDOW/GLASS CLEANERS		USED IN HOUSEHOLD		DUST/DIRT CLEANING SYSTEM		USED IN HOUSEHOLD		DISINFECTANT SPRAYS		USED IN HOUSEHOLD	
		Past 6 Months	Past 7 Days			Past 6 Months				Past 6 Months	Past 7 Days
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1 ..... <input type="checkbox"/> 2-3 ..... <input type="checkbox"/> 4+ ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>TYPES:</b> Dusters ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dry ..... <input type="checkbox"/> ..... <input type="checkbox"/> Mitt ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wet—Powered ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wet—Manual ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>BRANDS:</b> Mr. Clean ..... <input type="checkbox"/> ..... <input type="checkbox"/> Pledge ..... <input type="checkbox"/> ..... <input type="checkbox"/> Swiffer ..... <input type="checkbox"/> ..... <input type="checkbox"/> Swiffer Dusters ..... <input type="checkbox"/> ..... <input type="checkbox"/> Swiffer Wet Jet ..... <input type="checkbox"/> ..... <input type="checkbox"/> Vileda ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>NUMBER OF TIMES:</b> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6+ ..... <input type="checkbox"/>			
FABRIC REFRESHENER		USED IN HOUSEHOLD									
		Past 6 Months									
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>											

# HOUSEHOLD PRODUCTS

SOAP & DETERGENTS FOR REGULAR LAUNDRY		USED IN HOUSEHOLD		SOAP & DETERGENTS FOR FINE FABRICS		USED IN HOUSEHOLD		FABRIC SOFTENERS		USED IN HOUSEHOLD			
		Past 6 Months	Past 7 Days			Past 6 Months	Past 7 Days			Most Often	Others Sometimes		
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				<b>BRANDS—</b> <b>DRYER SHEETS:</b> Bounce ..... <input type="checkbox"/> ..... <input type="checkbox"/> Bounce Free ..... <input type="checkbox"/> ..... <input type="checkbox"/> Cling Free ..... <input type="checkbox"/> ..... <input type="checkbox"/> Downy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fleecy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Snuggle ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other—Dryer Sheets ..... <input type="checkbox"/> ..... <input type="checkbox"/>					
<b>NUMBER OF LOADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>				<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>				<b>BRANDS—</b> <b>LIQUID:</b> Original Downy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ultra Downy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fleecy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ultra Fleecy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Kirkland ..... <input type="checkbox"/> ..... <input type="checkbox"/> La Parisienne ..... <input type="checkbox"/> ..... <input type="checkbox"/> Snuggle ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ultra Snuggle ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other—Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/>					
SOAP & DETERGENTS FOR REGULAR LAUNDRY		USED IN HOUSEHOLD		BLEACH		USED IN HOUSEHOLD							
		Most Often	Others Sometimes			Past 6 Months	Past 7 Days						
<b>TYPES:</b> Liquid —Concentrated/Ultra ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Regular/Non-Ultra ..... <input type="checkbox"/> ..... <input type="checkbox"/> —High Efficiency ..... <input type="checkbox"/> ..... <input type="checkbox"/> Powder —Concentrated/Ultra ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Regular/Non-Ultra ..... <input type="checkbox"/> ..... <input type="checkbox"/> —High Efficiency ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tablets ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>									
<b>BRANDS:</b> ABC ..... <input type="checkbox"/> ..... <input type="checkbox"/> All ..... <input type="checkbox"/> ..... <input type="checkbox"/> Arctic Power ..... <input type="checkbox"/> ..... <input type="checkbox"/> Arm & Hammer ..... <input type="checkbox"/> ..... <input type="checkbox"/> Cheer ..... <input type="checkbox"/> ..... <input type="checkbox"/> Gain Island Fresh ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ivory Snow ..... <input type="checkbox"/> ..... <input type="checkbox"/> La Parisienne ..... <input type="checkbox"/> ..... <input type="checkbox"/> President's Choice ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purex —Lemon ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Sunshine Clean ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Perfume Free ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>NUMBER OF LOADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>									
Sunlight —Regular ..... <input type="checkbox"/> ..... <input type="checkbox"/> —HE (High Efficiency) ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Lemon Fresh ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Morning Fresh ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Sensitive Skin ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Spring Escape ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Tropical Ocean ..... <input type="checkbox"/> ..... <input type="checkbox"/> —With Bleach ..... <input type="checkbox"/> ..... <input type="checkbox"/> —With Snuggle ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>FORM:</b> Liquid ..... <input type="checkbox"/> Powder ..... <input type="checkbox"/>									
Surf ..... <input type="checkbox"/> ..... <input type="checkbox"/>  Tide —Regular ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Clean Breeze ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Cold Water ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Free ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Lemon Fresh ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Mountain Spring ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Regular Scent ..... <input type="checkbox"/> ..... <input type="checkbox"/> —With Bleach ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>LAUNDRY PRE-TREATMENTS &amp; PRE-CLEANERS</b>		USED IN HOUSEHOLD							
Wisk ..... <input type="checkbox"/> ..... <input type="checkbox"/> Woolite Delicate ..... <input type="checkbox"/> ..... <input type="checkbox"/> Zero Cold Water Wash Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Zero Dark Laundry Wash Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand Liquid Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>									
<b>WATER TEMPERATURE:</b> Hot ..... <input type="checkbox"/> ..... <input type="checkbox"/> Warm ..... <input type="checkbox"/> ..... <input type="checkbox"/> Cold ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>NUMBER OF LOADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>									
				FABRIC SOFTENERS		USED IN HOUSEHOLD							
						Past 6 Months	Past 7 Days						
				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>									
				<b>NUMBER OF LOADS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>									
				LAUNDRY PRE-TREATMENTS & PRE-CLEANERS		USED IN HOUSEHOLD		SPRAY STARCH		USED IN HOUSEHOLD			
										Past 6 Months	Past 7 Days		
				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>					
				<b>TYPES:</b> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/> Powder ..... <input type="checkbox"/> ..... <input type="checkbox"/> Spray ..... <input type="checkbox"/> ..... <input type="checkbox"/> Stick ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tabs ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-4 ..... <input type="checkbox"/> 5+ ..... <input type="checkbox"/>					
				<b>BRANDS:</b> Javex ..... <input type="checkbox"/> ..... <input type="checkbox"/> Oxy Clean ..... <input type="checkbox"/> ..... <input type="checkbox"/> Shout ..... <input type="checkbox"/> ..... <input type="checkbox"/> Spray 'n Wash ..... <input type="checkbox"/> ..... <input type="checkbox"/> Spray 'n Wash Dual Power ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tide Spinbrush ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>SPRAY STARCH</b>		USED IN HOUSEHOLD			
										Most Often	Others Sometimes		
				<b>TYPES:</b> Aerosol ..... <input type="checkbox"/> ..... <input type="checkbox"/> Pump ..... <input type="checkbox"/> ..... <input type="checkbox"/> Liquid ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>DRY CLEANING</b>		FOR HOUSEHOLD			
										Past 30 Days			
				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>					
				<b>TYPES:</b> In Dryer ..... <input type="checkbox"/> At Dry Cleaners ..... <input type="checkbox"/>				<b>AMOUNT SPENT AT DRY CLEANERS:</b> \$1-\$9 ..... <input type="checkbox"/> \$10-\$19 ..... <input type="checkbox"/> \$20-\$49 ..... <input type="checkbox"/> \$50+ ..... <input type="checkbox"/>					

# CATS & DOGS

PET OWNERSHIP		NUMBER IN HOUSEHOLD		DOG BISCUITS OR TREATS		USED IN HOUSEHOLD		CAT FOOD — Wet —		USED IN HOUSEHOLD	
		None	1	2	3 Or More	Past 6 Months	Past 7 Days	Most Often	Others Sometimes		
Cats ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dogs ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				<b>BRANDS:</b> 9 Lives ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hill's Science Diet ..... <input type="checkbox"/> ..... <input type="checkbox"/> Iams ..... <input type="checkbox"/> ..... <input type="checkbox"/> Kal Kan ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Fancy Feast ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Friskies ..... <input type="checkbox"/> ..... <input type="checkbox"/> Royal Canin ..... <input type="checkbox"/> ..... <input type="checkbox"/> Sheba ..... <input type="checkbox"/> ..... <input type="checkbox"/> Whiskas Cans ..... <input type="checkbox"/> ..... <input type="checkbox"/> Whiskas Pouches ..... <input type="checkbox"/> ..... <input type="checkbox"/> Whiskas Tender Bites ..... <input type="checkbox"/> ..... <input type="checkbox"/> Premium Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Generic ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>			
DOG FOOD — Wet —		USED IN HOUSEHOLD		CAT LITTER		USED IN HOUSEHOLD		CAT FOOD — Packaged Dry —		USED IN HOUSEHOLD	
		Past 6 Months	Past 7 Days			Past 6 Months	Past 30 Days	Past 6 Months	Past 7 Days		
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>			
<b>NUMBER OF CANS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>				<b>NUMBER OF KILOGRAMS:</b> None ..... <input type="checkbox"/> Less Than 1 ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>				<b>NUMBER OF KILOGRAMS:</b> None ..... <input type="checkbox"/> Less Than 500 g ..... <input type="checkbox"/> 501 g-1 kg ..... <input type="checkbox"/> 1.1-2 kg ..... <input type="checkbox"/> 2.1-3 kg ..... <input type="checkbox"/> More Than 3 kg ..... <input type="checkbox"/>			
DOG FOOD — Packaged Dry —		USED IN HOUSEHOLD		CAT TREATS		USED IN HOUSEHOLD		CAT FOOD — Packaged Dry —		USED IN HOUSEHOLD	
		Past 6 Months	Past 7 Days			Past 6 Months	Past 7 Days	Most Often	Others Sometimes		
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>			
<b>NUMBER OF KILOGRAMS:</b> None ..... <input type="checkbox"/> 1 kg Or Less ..... <input type="checkbox"/> 1.1-2 ..... <input type="checkbox"/> 2.1-4 ..... <input type="checkbox"/> 4.1-7 ..... <input type="checkbox"/> 7.1-10 ..... <input type="checkbox"/> More Than 10 kg ..... <input type="checkbox"/>				<b>NUMBER OF TIMES:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>				<b>TYPES:</b> Premium ..... <input type="checkbox"/> ..... <input type="checkbox"/> Regular ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand/No-Name ..... <input type="checkbox"/> ..... <input type="checkbox"/>			
DOG FOOD — Packaged Dry —		USED IN HOUSEHOLD		CAT FOOD — Wet —		USED IN HOUSEHOLD		CAT FOOD — Packaged Dry —		USED IN HOUSEHOLD	
		Most Often	Others Sometimes			Past 6 Months	Past 7 Days	Most Often	Others Sometimes		
<b>TYPES:</b> Premium ..... <input type="checkbox"/> ..... <input type="checkbox"/> Regular ..... <input type="checkbox"/> ..... <input type="checkbox"/> Store Brand/No-Name ..... <input type="checkbox"/> ..... <input type="checkbox"/>				YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>				<b>BRANDS:</b> 9-Lives ..... <input type="checkbox"/> ..... <input type="checkbox"/> Eukanuba ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hills/Science Diet ..... <input type="checkbox"/> ..... <input type="checkbox"/> Iams ..... <input type="checkbox"/> ..... <input type="checkbox"/> Meow Mix ..... <input type="checkbox"/> ..... <input type="checkbox"/> Nutro ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Cat Chow ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Friskies ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Happy Cat ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Kitten Chow ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina One ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Pro Plan ..... <input type="checkbox"/> ..... <input type="checkbox"/> Royal Canin ..... <input type="checkbox"/> ..... <input type="checkbox"/> Special Kitty ..... <input type="checkbox"/> ..... <input type="checkbox"/> Whiskas ..... <input type="checkbox"/> ..... <input type="checkbox"/> Premium Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Generic Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>			
<b>BRANDS:</b> Eukanuba ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hills/Science Diet ..... <input type="checkbox"/> ..... <input type="checkbox"/> Iams ..... <input type="checkbox"/> ..... <input type="checkbox"/> Kibbles 'n Bits ..... <input type="checkbox"/> ..... <input type="checkbox"/> Nutro ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ol' Roy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Pedigree ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Alpo ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Beneful ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Dog Chow ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Pro Plan ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina One ..... <input type="checkbox"/> ..... <input type="checkbox"/> Purina Puppy Chow ..... <input type="checkbox"/> ..... <input type="checkbox"/> Techni-Cal ..... <input type="checkbox"/> ..... <input type="checkbox"/> Royal Canin ..... <input type="checkbox"/> ..... <input type="checkbox"/> Generic Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Premium Store Brand ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>NUMBER OF CANS:</b> None ..... <input type="checkbox"/> 1-4 ..... <input type="checkbox"/> 5-9 ..... <input type="checkbox"/> 10+ ..... <input type="checkbox"/>							

<b>PET FOOD</b> — Where Bought —		USED IN HOUSEHOLD
		Past 30 Days
J.E. Mondou ..... <input type="checkbox"/> Pet Cetera ..... <input type="checkbox"/> PJ's Pet Centres ..... <input type="checkbox"/> Pet Smart ..... <input type="checkbox"/> Pet Valu ..... <input type="checkbox"/> Super Pet ..... <input type="checkbox"/> Other Pet Store ..... <input type="checkbox"/>  Canadian Tire ..... <input type="checkbox"/> Sam's Club ..... <input type="checkbox"/> Wal-Mart ..... <input type="checkbox"/> Zellers ..... <input type="checkbox"/>  Drug Store ..... <input type="checkbox"/> Supermarket/Grocery ..... <input type="checkbox"/> Other Grocery Store ..... <input type="checkbox"/> From The Vet ..... <input type="checkbox"/> Warehouse Stores ..... <input type="checkbox"/> Other ..... <input type="checkbox"/>		
<b>ANIMAL HEALTH PRODUCTS FOR DOGS &amp; CATS</b>		PURCHASED
		Past 12 Months
YES..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>PURPOSE:</b> Fleas & Ticks ..... <input type="checkbox"/> Heartworm ..... <input type="checkbox"/> Other ..... <input type="checkbox"/>  <b>TYPES:</b> Collars ..... <input type="checkbox"/> Injectable (Prescribed) ..... <input type="checkbox"/> Tablet (Prescribed) ..... <input type="checkbox"/> Spot On (Prescribed) ..... <input type="checkbox"/> Shampoo ..... <input type="checkbox"/> Mousse ..... <input type="checkbox"/>		