



# LEISURE ACTIVITIES, SPORTS SUPPLIES, PUBLIC ACTIVITIES

LEISURE ACTIVITIES	PERSONALLY ATTENDED			SPORTS & RECREATION EQUIPMENT	PERSONALLY		RECREATIONAL ITEMS/VEHICLES	YOUR HOUSEHOLD			
	Times Past 12 Months	1-2	3-9		10+	Own		Bought Past 12 Months	Owns/Leases	Bought Past 12 Months	
Live Theatre <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ballet <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Opera <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Music Concerts —Classical <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Popular <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Jazz <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Rock <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Country <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Museum <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Art Gallery <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Amusement Parks <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Zoo/Aquariums <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Spas <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Nightclubs/Bars <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>				Boating Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Camping Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Exercise Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Fishing Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Golf Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Hockey Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Hunting Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Ski Equipment —Cross-Country <input type="checkbox"/> ..... <input type="checkbox"/> —Downhill <input type="checkbox"/> ..... <input type="checkbox"/> Snowboarding Equipment <input type="checkbox"/> ..... <input type="checkbox"/> Other <input type="checkbox"/> ..... <input type="checkbox"/>			<b>EQUIPMENT:</b> All Terrain Vehicle <input type="checkbox"/> ..... <input type="checkbox"/> Motorhome/RV <input type="checkbox"/> ..... <input type="checkbox"/> Camper/Trailer <input type="checkbox"/> ..... <input type="checkbox"/> Snowmobile <input type="checkbox"/> ..... <input type="checkbox"/> Bicycle <input type="checkbox"/> ..... <input type="checkbox"/> Sailboat <input type="checkbox"/> ..... <input type="checkbox"/> Windsurfer/Surfboard <input type="checkbox"/> ..... <input type="checkbox"/> Personal Water Craft (e.g. Sea Doo, Jet Ski) <input type="checkbox"/> ..... <input type="checkbox"/> Power Boat —Inboard Motor <input type="checkbox"/> ..... <input type="checkbox"/> —Outboard Motor <input type="checkbox"/> ..... <input type="checkbox"/>				
<b>PROFESSIONAL SPORTS EVENTS:</b> Auto Racing <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Baseball <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Basketball <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Figure Skating <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Football <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Golf <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Horse Racing <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Hockey <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Soccer <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Tennis <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wrestling <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>				<b>SPORTING GOODS</b>		<b>PUBLIC ACTIVITIES</b>		<b>YOU PERSONALLY</b>			
				<b>PERSONALLY BOUGHT PAST 12 MONTHS</b>		<b>YOU PERSONALLY</b>		<b>Past 2 Years</b>			
				<b>Equipment</b>		<b>Clothing</b>		<b>Worked In Past 12 Months</b>			
<b>AMOUNT SPENT:</b> \$1-\$100 <input type="checkbox"/> ..... <input type="checkbox"/> \$101-\$200 <input type="checkbox"/> ..... <input type="checkbox"/> \$201-\$500 <input type="checkbox"/> ..... <input type="checkbox"/> \$501-\$750 <input type="checkbox"/> ..... <input type="checkbox"/> \$751+ <input type="checkbox"/> ..... <input type="checkbox"/>				<b>WHERE BOUGHT:</b> Sears <input type="checkbox"/> ..... <input type="checkbox"/> Sears Catalogue <input type="checkbox"/> ..... <input type="checkbox"/> The Bay <input type="checkbox"/> ..... <input type="checkbox"/>		Wrote To A Public Official <input type="checkbox"/>  Wrote To The Editor Of A Newspaper Or Magazine <input type="checkbox"/>  Were Active In A Social Issue Or Community Project <input type="checkbox"/>  Actively Worked For A Political Party Or Candidate <input type="checkbox"/>  Did Volunteer Work <input type="checkbox"/>					
<b>MOVIES</b>				<b>PERSONALLY ATTENDED</b>		<b>PERSONALLY BOUGHT PAST 12 MONTHS</b>		<b>YOU PERSONALLY</b>			
				<b>Past 12 Months</b>		<b>Past 3 Months</b>		<b>Worked In Past 12 Months</b>			
YES <input type="checkbox"/> NO <input type="checkbox"/>				Wal-Mart <input type="checkbox"/> ..... <input type="checkbox"/> Zellers <input type="checkbox"/> ..... <input type="checkbox"/>		André Lalonde Sports <input type="checkbox"/> ..... <input type="checkbox"/> Athlete's World <input type="checkbox"/> ..... <input type="checkbox"/> Atmosphere <input type="checkbox"/> ..... <input type="checkbox"/> Baron Sports <input type="checkbox"/> ..... <input type="checkbox"/> Bernard Trottier <input type="checkbox"/> ..... <input type="checkbox"/> Boutique Courir <input type="checkbox"/> ..... <input type="checkbox"/> Boutique Oberson <input type="checkbox"/> ..... <input type="checkbox"/> Champs <input type="checkbox"/> ..... <input type="checkbox"/> Excellence Sports <input type="checkbox"/> ..... <input type="checkbox"/> Foot Locker <input type="checkbox"/> ..... <input type="checkbox"/> Golf Town <input type="checkbox"/> ..... <input type="checkbox"/> La Cordée-Plein Air <input type="checkbox"/> ..... <input type="checkbox"/> National Sports <input type="checkbox"/> ..... <input type="checkbox"/> Nevada Bob's <input type="checkbox"/> ..... <input type="checkbox"/> Runners World <input type="checkbox"/> ..... <input type="checkbox"/> Sport Chek <input type="checkbox"/> ..... <input type="checkbox"/> Sport Mart <input type="checkbox"/> ..... <input type="checkbox"/> Sporting Life <input type="checkbox"/> ..... <input type="checkbox"/> Sports Authority <input type="checkbox"/> ..... <input type="checkbox"/> Sports Experts <input type="checkbox"/> ..... <input type="checkbox"/> Tommy & Lefevre <input type="checkbox"/> ..... <input type="checkbox"/> Other Specialty Sporting Store <input type="checkbox"/> ..... <input type="checkbox"/>		Play It Again Sports <input type="checkbox"/> ..... <input type="checkbox"/> Other Second Hand Stores <input type="checkbox"/> ..... <input type="checkbox"/>		Very Often <input type="checkbox"/> Quite Often <input type="checkbox"/> Rarely <input type="checkbox"/> Never <input type="checkbox"/>	
<b>LAST TIME WENT:</b> In Past 7 Days <input type="checkbox"/> In Past 2 Weeks <input type="checkbox"/> In Past 3 Weeks <input type="checkbox"/> In Past Month <input type="checkbox"/> In Past 2 Months <input type="checkbox"/> In Past 3 Months <input type="checkbox"/> Longer Ago <input type="checkbox"/>				Canadian Tire <input type="checkbox"/> ..... <input type="checkbox"/> Costco <input type="checkbox"/> ..... <input type="checkbox"/> Mountain Equipment Co-op <input type="checkbox"/> ..... <input type="checkbox"/>  Other Stores <input type="checkbox"/> ..... <input type="checkbox"/>							
<b>NUMBER OF TIMES:</b> None <input type="checkbox"/> 1 <input type="checkbox"/> 2-3 <input type="checkbox"/> 4-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11+ <input type="checkbox"/>				<b>PERSONALLY ATTENDED</b>		<b>PERSONALLY BOUGHT PAST 12 MONTHS</b>		<b>YOU PERSONALLY</b>			
<b>MOVIES</b>				<b>Most Often</b>		<b>Others Sometimes</b>		<b>Worked In Past 12 Months</b>			
<b>TYPES:</b> Action/Adventure <input type="checkbox"/> ..... <input type="checkbox"/> Animated <input type="checkbox"/> ..... <input type="checkbox"/> Comedy <input type="checkbox"/> ..... <input type="checkbox"/> Drama <input type="checkbox"/> ..... <input type="checkbox"/> Family/Children Oriented <input type="checkbox"/> ..... <input type="checkbox"/> Foreign <input type="checkbox"/> ..... <input type="checkbox"/> Horror <input type="checkbox"/> ..... <input type="checkbox"/> Science Fiction <input type="checkbox"/> ..... <input type="checkbox"/> Other <input type="checkbox"/> ..... <input type="checkbox"/>											



# GAMBLING, CIGARETTES, CANDY, CHEWING GUM, CHOCOLATES

CASINOS	PERSONALLY VISITED		CIGARETTES	PERSONALLY SMOKED		CHEWY CANDIES	PERSONALLY EAT			
	Past 12 Months	Past 3 Months		Past 12 Months	Packs/ Past 7 Days		Past 6 Months	Packages/ Past 7 Days		
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"/> 5-6 ..... <input type="checkbox"/> 7+ ..... <input type="checkbox"/>  <b>TYPE:</b> Casino ..... <input type="checkbox"/> Local Charity/Fair Casino ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6-9 ..... <input type="checkbox"/> 10-14 ..... <input type="checkbox"/> 15+ ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6-9 ..... <input type="checkbox"/> 10-14 ..... <input type="checkbox"/> 15+ ..... <input type="checkbox"/>				
BINGO/VIDEO LOTTERY TERMINALS	PERSONALLY VISITED		HARD CANDY/ MINTS	PERSONALLY EAT		CHEWY CANDIES	PERSONALLY EAT			
	Past 3 Months			Past 6 Months	Packages/ Past 7 Days		Most Often	Others Sometimes		
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>TYPE:</b> Bingo Hall ..... <input type="checkbox"/> Video Lottery Terminals ..... <input type="checkbox"/>			YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  None ..... <input type="checkbox"/> 1-2 ..... <input type="checkbox"/> 3-5 ..... <input type="checkbox"/> 6-9 ..... <input type="checkbox"/> 10-14 ..... <input type="checkbox"/> 15+ ..... <input type="checkbox"/>			<b>BRANDS:</b> Crème Savers Chewy ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dare Disney ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dare Original/Juicee ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fruitella ..... <input type="checkbox"/> ..... <input type="checkbox"/> Goodies ..... <input type="checkbox"/> ..... <input type="checkbox"/> LifeSaver's Gummies ..... <input type="checkbox"/> ..... <input type="checkbox"/> Juiced Up ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ju Jubes ..... <input type="checkbox"/> ..... <input type="checkbox"/> Maynards ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Bassett's Liquorice AllSorts ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Fuzzy Peach ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Gummy Bears ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Sour Cherry Blasters ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Sour Patch Kids ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Swedish Berries ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Wine Gums ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Wine Gums Sours ..... <input type="checkbox"/> ..... <input type="checkbox"/> Mentos ..... <input type="checkbox"/> ..... <input type="checkbox"/> Realfruit Gummies ..... <input type="checkbox"/> ..... <input type="checkbox"/> Starburst ..... <input type="checkbox"/> ..... <input type="checkbox"/> Twizzlers/Nibs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wonka ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>				
LOTTERY TICKETS	PERSONALLY BOUGHT		HARD CANDY/ MINTS	PERSONALLY EAT		CHEWING GUM				
	Past 12 Months	Average Month		Most Often	Others Sometimes					
YES ..... <input type="checkbox"/> NO ..... <input type="checkbox"/>  <b>AMOUNT SPENT:</b> Less Than \$5 ..... <input type="checkbox"/> \$5-\$9.99 ..... <input type="checkbox"/> \$10-\$19.99 ..... <input type="checkbox"/> \$20-\$29.99 ..... <input type="checkbox"/> \$30+ ..... <input type="checkbox"/>			<b>KINDS:</b> In Rolls ..... <input type="checkbox"/> ..... <input type="checkbox"/> In Bags ..... <input type="checkbox"/> ..... <input type="checkbox"/> In Blister Packs ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>BRANDS:</b> Altoids ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Mints ..... <input type="checkbox"/> ..... <input type="checkbox"/> —Sours ..... <input type="checkbox"/> ..... <input type="checkbox"/> Blitz ..... <input type="checkbox"/> ..... <input type="checkbox"/> Breath Savers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Campino ..... <input type="checkbox"/> ..... <input type="checkbox"/> Certs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Chocfuls ..... <input type="checkbox"/> ..... <input type="checkbox"/> Coolmint Certs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Clorets ..... <input type="checkbox"/> ..... <input type="checkbox"/> Crème Savers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dare ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dentyne Fire ..... <input type="checkbox"/> ..... <input type="checkbox"/> Dentyne Ice ..... <input type="checkbox"/> ..... <input type="checkbox"/> Entice ..... <input type="checkbox"/> ..... <input type="checkbox"/>  Excel ..... <input type="checkbox"/> ..... <input type="checkbox"/> Frisk ..... <input type="checkbox"/> ..... <input type="checkbox"/> Fruit Waves ..... <input type="checkbox"/> ..... <input type="checkbox"/> Halls Defense Vitamin C ..... <input type="checkbox"/> ..... <input type="checkbox"/> Halls Fruit Breezers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Ice Breakers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Jolly Rancher ..... <input type="checkbox"/> ..... <input type="checkbox"/> LifeSavers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Milkfuls ..... <input type="checkbox"/> ..... <input type="checkbox"/> Power Certs ..... <input type="checkbox"/> ..... <input type="checkbox"/> Smint ..... <input type="checkbox"/> ..... <input type="checkbox"/>  Tic Tac ..... <input type="checkbox"/> ..... <input type="checkbox"/> Velamints ..... <input type="checkbox"/> ..... <input type="checkbox"/> Werthers ..... <input type="checkbox"/> ..... <input type="checkbox"/> Other ..... <input type="checkbox"/> ..... <input type="checkbox"/>					CHEWING GUM		
LOTTERY TICKETS	NUMBER OF TICKETS IN AVERAGE MONTH			CHEWING GUM						
	1	2-3	4+				PERSONALLY CHEW			
<b>TYPES:</b> Instant Win (By Price) \$1 Tickets ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> \$2 Tickets ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> \$3 Tickets ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> \$5 Tickets ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>BRANDS:</b> Instant Win Cash For Life/Gagnant à Vie ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Loto-Bingo/Bingo+ ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Crosswords/Mots Cachés ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> La Poule aux Oeufs d'or ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Wheel Of Fortune/Roue de Fortune ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>  <b>DRAWS:</b> Lotto 6/49 ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Super 7 ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Atlantic Choice/Prairie Or Daily Keno ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Québec 49/Ontario 49/ BC49/Western 649 ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/> Extra/Encore/Tag/Plus ..... <input type="checkbox"/> ..... <input type="checkbox"/> ..... <input type="checkbox"/>				PERSONALLY CHEW						
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