| Current Living Conditions |
|---|
| How you respond on this page will determine the questions posed throughout the remainder of the survey. |
| *1. Are you currently living in a place with bed bugs? |
| C Yes. |
| No, but I have experienced bed bugs in the past. |
| No, and I have never experienced bed bugs. |
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| | ng with Bed Bugs |
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| Ple | ase respond to each these questions about your experiences with bed bugs. |
| 1. I | low can you be sure that the pests are bed bugs? |
| 0 | Based on what our neighbors or family members told us |
| 0 | Based on what our landlord or property manager told us |
| 0 | Based on what pest control experts told us |
| 0 | Based on what our local extension agent or university entomologist told us |
| 0 | Based on what we found on the internet or in literature |
| 0 | We are not sure if they are bed bugs |
| Add | itional Comments (optional) |
| | |
| 2. I | Oo you recall how long ago you first noticed bites? |
| 0 | Less than a week ago |
| 0 | Between one week and one month ago |
| 0 | Between one month and 6 months ago |
| 0 | Between 6 months and a year ago |
| 0 | More than a year ago |
| 0 | We have not noticed bites |
| Add | tional Comments (optional) |
| | |
| 3. / | Are you or is anyone that lives with you having a reaction to the bites? |
| | Bites cause swollen, itchy bumps or sores |
| | Bites cause swollen and itchy open sores that require medical attention |
| | Bites cause mild irritation or rash |
| | Bites do not cause a noticeable reaction |
| hhΔ | itional Comments (optional) |

| 2-3 times 4-6 times More than 6 times More than 6 times How often do you or people that live with you travel for work or personal reasons including vacation stays in hotels/motels, and/or medical facility stays)? Never Once a year 2-3 times a year More than 6 times a year How often do you or people that live with you spend the night at a friend or relative ace in your area? Never Once a year 2-3 times a year 3-4-6 times a year 4-6 times a year 4-6 times a year 5-4-6 times a year 6-6 Once a year 7-7 Once a year 7-8 Once a year 7-9 Once a year 8-9 Once a year 9-9 Once a year | 2-3 times 4-6 times More than 6 times More than 6 times How often do you or people that live with you travel for work or personal reasons including vacation stays in hotels/motels, and/or medical facility stays)? Never Once a year 2-3 times a year More than 6 times a year How often do you or people that live with you spend the night at a friend or relative ace in your area? Never Once a year 2-3 times a year 3-4-6 times a year 4-6 times a year 4-6 times a year 5-4-6 times a year 6-6 Once a year 7-7 Once a year 7-8 Once a year 7-9 Once a year 8-9 Once a year 9-9 Once a year | None. I have been in the same place | e for the last 5 years |
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| C 4-6 times C More than 6 times diditional Comments (optional) . How often do you or people that live with you travel for work or personal reasons ncluding vacation stays in hotels/motels, and/or medical facility stays)? Never C Once a year C 4-6 times a year More than 6 times a year diditional Comments (optional) . How often do you or people that live with you spend the night at a friend or relative in your area? Never Once a year C Never Once a year C 4-6 times a year 4-6 times a year 4-6 times a year 4-6 times a year More than 6 times a year | 4-6 times More than 6 times diditional Comments (optional) How often do you or people that live with you travel for work or personal reasons including vacation stays in hotels/motels, and/or medical facility stays)? Never Once a year 2-3 times a year More than 6 times a year More than 6 times a year Never Once a year About the thines a year Never Once a year About the thines a year More than 6 times a year About the thines a year More than 6 times a year More than 6 times a year | C Once | |
| More than 6 times dditional Comments (optional) How often do you or people that live with you travel for work or personal reasons neluding vacation stays in hotels/motels, and/or medical facility stays)? Never Once a year 2-3 times a year More than 6 times a year dditional Comments (optional) How often do you or people that live with you spend the night at a friend or relative in your area? Never Once a year Never Once a year 4-6 times a year 4-6 times a year 4-6 times a year More than 6 times a year | diditional Comments (optional) How often do you or people that live with you travel for work or personal reasons including vacation stays in hotels/motels, and/or medical facility stays)? Never Once a year 2-3 times a year More than 6 times a year How often do you or people that live with you spend the night at a friend or relative in your area? Never Once a year Once a year Above of the do you or people that live with you spend the night at a friend or relative in your area? Never Once a year 4-6 times a year More than 6 times a year More than 6 times a year | C 2-3 times | |
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| | Never |
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| | Once a year |
| | 2-3 times a year |
| | 4-6 times a year |
| | More than 6 times a year |
| ldi | onal Comments (optional) |
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| ŀ | ow often do you or anyone that lives with you purchase or receive used furniture |
| | hing? |
| | Never |
| | Once a year |
| | 2-3 times a year |
| | 4-6 times a year |
| | More than 6 times a year |
| di | onal Comments (optional) |
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| 9. What effects have the bed bugs had on the quality of life? (check all that apply to |
|--|
| yourself and /or anyone residing with you) |
| Loss of sleep |
| Cannot eat properly |
| Cannot fulfill work duties as well as usual |
| Cannot parent or care for dependents as well as usual |
| ☐ Cannot relax |
| Financial loss (include how much you think you have lost in the comment box below) |
| Loss of or troubled personal relationships |
| ☐ Feeling isolated |
| Loss of friends and family connections |
| ☐ Increased alcohol consumption |
| ☐ Increased smoking |
| ☐ Increased prescription drug use |
| ☐ Increased recreational drug use |
| Loss of job |
| Loss of home |
| ☐ Significant weight gain or loss |
| Decline in health or increase in health problems |
| Loss of self esteem |
| Feelings of depression and / or desperation |
| ☐ Increase mental health problems |
| Concern that I may have transferred the bed bugs to another home or location |
| Additional Comments (optional) |
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| 0. | What has been done to get rid of the bed bugs (select all that apply)? |
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| | I / We applied a single pesticide purchased from a retail store |
| | I / We applied 2-3 different pesticides purchased from retail stores |
| | I / We applied more than 3 different pesticides purchased from retail stores |
| | Bombed place of residence with one or more bug bombs purchased from a retail store |
| | A pest control company applied pesticides |
| | A pest control company applied a heat or cold treatment |
| | A bed bug detection dog was used to locate bed bugs |
| | Free treatment by the pest control company |
| | We have worked with more than 1 pest control company in an attempt to get rid of bed bugs |
| Addi | itional Comments (optional) |
| | |
| app | Once |
| | Two or three times |
| П | Four to eight times |
| | More than eight times |
| | I used other substances to kill the bugs e.g. gasoline, cleaning agents, insect repellents, etc. (please list the substances in the text |
| | |
| Addi | itional Comments (optional) |
| 42 | Do you of ill have had burn? |
| | Do you still have bed bugs? |
| 0 | Yes |
| 0 | Not sure |
| | |
| Addi | itional Comments (optional) |
| | |
| 13. | If you have additional comments, please write them here. |
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| Please respond as best describes your previous dealings with bed bugs. 1. How were you sure that the pests were bed bugs? C Based on what our leighbors or family members told us Based on what our leadlord or property manager told us Based on what pest control experts told us Based on what we found on the internet or in literature We were not sure if they were bed bugs Additional Comments (optional) 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated Less than a week Between one week and one month Between one month and 6 months Between 8 months and a year More than a year It was never resolved, we moved out because of the bed bugs Additional Comments (optional) J. Did you have a reaction to the bites? Bites caused swollen, litchy open sores that required medical attention Bites caused swollen, litchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction Additional Comments (optional) | Pre | vious Experience with Bed Bugs |
|---|------|--|
| Based on what our neighbors or family members told us Based on what our landlord or property manager told us Based on what pest control experts told us Based on what our local extension agent or university entomologist told us Based on what we found on the internet or in literature We were not sure if they were bed bugs Additional Comments (optional) 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated Less than a week Between one week and one month Between one month and 8 months Between 6 months and a year It was never resolved, we moved out because of the bed bugs It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? Bites caused swollen, lichy bumps or sores Bites caused swollen, lichy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | Plea | ase respond as best describes your previous dealings with bed bugs. |
| C Based on what our landlord or property manager told us C Based on what pest control experts told us C Based on what pest control experts told us C Based on what we found on the internet or in literature C We were not sure if they were bed bugs Additional Comments (optional) 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated C Less than a week C Between one week and one month C Between one month and 6 months C Between 6 months and a year C More than a year C It was never resolved, we moved out because of the bed bugs C It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? C Bites caused swollen, litchy bumps or sores C Bites caused swollen, litchy poen sores that required medical attention C Bites caused mild irritation or rash C Bites did not cause a noticeable reaction | 1. F | low were you sure that the pests were bed bugs? |
| C Based on what pest control experts told us C Based on what our local extension agent or university entomologist told us C Based on what we found on the internet or in literature C We were not sure if they were bed bugs Additional Comments (optional) 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated C Less than a week Between one week and one month Between one month and 6 months C Between 6 months and a year C More than a year C It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? C Bites caused swollen, litchy bumps or sores C Bites caused swollen, litchy poen sores that required medical attention C Bites caused mild irritation or rash C Bites did not cause a noticeable reaction | 0 | Based on what our neighbors or family members told us |
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| Additional Comments (optional) 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated C. Less than a week C. Between one week and one month C. Between one month and 6 months C. Between 6 months and a year C. More than a year C. It was never resolved, we moved out because of the bed bugs C. It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? C. Bites caused swollen, itchy open sores that required medical attention C. Bites caused mild irritation or rash C. Bites caused mild irritation or rash D. Bites did not cause a noticeable reaction | 0 | Based on what our local extension agent or university entomologist told us |
| 2. How long were bed bugs present in your home? Guess the amount of time from when you first noticed the bugs, to the time they were eradiated C Less than a week Between one week and one month Between one month and 6 months More than a year It was never resolved, we moved out because of the bed bugs It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites did not cause a noticeable reaction | 0 | Based on what we found on the internet or in literature |
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| C Between one month and 6 months C Between 6 months and a year C More than a year C It was never resolved, we moved out because of the bed bugs C It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? C Bites caused swollen, itchy bumps or sores C Bites caused swollen, itchy open sores that required medical attention C Bites caused mild irritation or rash C Bites did not cause a noticeable reaction | 0 | Less than a week |
| Between 6 months and a year More than a year It was never resolved, we moved out because of the bed bugs It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | 0 | Between one week and one month |
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| It was never resolved, we moved out because of the bed bugs It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | 0 | Between 6 months and a year |
| It was never resolved, we moved out for other reasons Additional Comments (optional) 3. Did you have a reaction to the bites? Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | 0 | More than a year |
| Additional Comments (optional) 3. Did you have a reaction to the bites? © Bites caused swollen, itchy bumps or sores © Bites caused swollen, itchy open sores that required medical attention © Bites caused mild irritation or rash © Bites did not cause a noticeable reaction | 0 | It was never resolved, we moved out because of the bed bugs |
| 3. Did you have a reaction to the bites? C Bites caused swollen, itchy bumps or sores C Bites caused swollen, itchy open sores that required medical attention C Bites caused mild irritation or rash C Bites did not cause a noticeable reaction | 0 | It was never resolved, we moved out for other reasons |
| Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | Addi | tional Comments (optional) |
| Bites caused swollen, itchy bumps or sores Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | | |
| Bites caused swollen, itchy open sores that required medical attention Bites caused mild irritation or rash Bites did not cause a noticeable reaction | 3. D | id you have a reaction to the bites? |
| Bites caused mild irritation or rash Bites did not cause a noticeable reaction | 0 | Bites caused swollen, itchy bumps or sores |
| C Bites did not cause a noticeable reaction | 0 | Bites caused swollen, itchy open sores that required medical attention |
| | 0 | Bites caused mild irritation or rash |
| Additional Comments (optional) | 0 | Bites did not cause a noticeable reaction |
| | Addi | tional Comments (optional) |
| | | |

| | e. I have been in the same place for the last 5 years |
|---|--|
| Onc | e e |
| © 2-3 | times |
| C 4-6 | times |
| O Mor | e than 6 times |
| Additiona | l Comments (optional) |
| | |
| | often do you or people that live with you travel for work or personal reasons |
| | ling vacation stays in hotels/motels, and/or medical facility stays)? |
| O Nev | |
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| Additional | e than 6 times a year I Comments (optional) To often do you or people that live with you spend the night at a friend or relative in your area? |
| Additiona 6. Hovelace Nev | e than 6 times a year I Comments (optional) Toften do you or people that live with you spend the night at a friend or relative in your area? er |
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| Additional S. Howolace Nev C Onc C 2-3 C 4-6 More | e than 6 times a year I Comments (optional) V often do you or people that live with you spend the night at a friend or relative in your area? er er a year times a year |

| 2-3 times a year 4-6 times a year More than 6 times a year ditional Comments (optional) How often do you or anyone that live with you purchase or receive used furniture othing? Never Once a year 2-3 times a year 4-6 times a year | 0 | Never |
|--|------|---|
| 4-6 times a year More than 6 times a year ditional Comments (optional) How often do you or anyone that live with you purchase or receive used furniture othing? Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | 0 | Once a year |
| More than 6 times a year ditional Comments (optional) How often do you or anyone that live with you purchase or receive used furniture othing? Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | 0 | 2-3 times a year |
| How often do you or anyone that live with you purchase or receive used furniture othing? Never Once a year 2-3 times a year More than 6 times a year | 0 | 4-6 times a year |
| How often do you or anyone that live with you purchase or receive used furniture othing? Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | 0 | More than 6 times a year |
| Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | Add | onal Comments (optional) |
| Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | | |
| Never Once a year 2-3 times a year 4-6 times a year More than 6 times a year | 3. I | ow often do you or anyone that live with you purchase or receive used furniture |
| Once a year 2-3 times a year 4-6 times a year More than 6 times a year | | |
| 2-3 times a year 4-6 times a year More than 6 times a year | 0 | Never |
| 4-6 times a year More than 6 times a year | 0 | Once a year |
| More than 6 times a year | 0 | 2-3 times a year |
| | 0 | 4-6 times a year |
| ditional Comments (optional) | 0 | More than 6 times a year |
| | .dd | onal Comments (optional) |
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| 9. What effects did the bed bugs have on the quality of your life (check all that apply to |
|--|
| yourself and /or anyone living with you)? |
| Loss of sleep |
| ☐ Could not eat properly |
| Could not fulfill work duties as well as usual |
| Could not parent or care for dependents as well as usual |
| Could not relax |
| Financial loss (include how much you think you lost in the text box below) |
| Loss of or troubled personal relationships |
| Felt isolated |
| Loss of friends and family connections |
| ☐ Increased alcohol consumption |
| ☐ Increased smoking |
| ☐ Increased prescription drug use |
| ☐ Increased recreational drug use |
| ☐ Loss of job |
| Loss of home |
| ☐ Significant weight gain or loss |
| Declined in health or increased health problems |
| Loss of self esteem |
| Felt depression and / or desperation |
| ☐ Increased mental health problems |
| Concern that I may have transferred the bed bugs to another home or location |
| Additional Comments (optional) |
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| 10. | What was done to get rid of the bed bugs (select all that apply)? |
|-------|---|
| | I / We applied a single pesticide purchased from a retail store |
| | I / We applied 2-3 different pesticides purchased from retail stores |
| | I / We applied more than 3 different pesticides purchased from retail stores |
| | Bombed place of residence with bug bombs purchased from a retail store |
| | A pest control company applied pesticides |
| | A pest control company applied a heat or cold treatment |
| | A bed bug detection dog was used to locate bed bugs |
| | Free treatment by the pest control company |
| | We worked with more than 1 pest control company in an attempt to get rid of the bed bugs |
| Add | itional Comments (optional) |
| | |
| 11. | If you applied pesticides or chemicals yourself please select all the statements that |
| арр | oly to your situation |
| | Once |
| | Two or three times |
| | Four to eight times |
| | More than eight times |
| | I used other substances to kill the bugs e.g. gasoline, cleaning agents, insect repellents, etc. (please list the substances in the text box) |
| Add | itional Comments (optional) |
| | |
| aga | Do you do certain things differently now, in an attempt to avoid acquiring bed bugs ain? Yes No Not sure |
| If yo | u selected "Yes" please tell us what you do differently to avoid bed bugs |
| | |
| 13 | If you have additional comments, please write them here. |
| 10. | |
| | |

| 1. 1 | |
|---------------|---|
| | low many times have you moved in the last 5 years? |
| 0 | None. I have resided in the same place for the last 5 years. |
| 0 | Once |
| 0 | 2-3 times |
| 0 | 4-6 times |
| 0 | More than 6 times |
| Add | itional Comments (optional) |
| | |
| | low often do you or people that live with you travel for work or personal reasons cluding vacation stays in hotels/motels, and/or medical facility stays)? |
| 0 | Never |
| 0 | Once a year |
| 0 | 2-3 times a year |
| 0 | 4-6 times a year |
| 0 | More than 6 times a year |
| Add | itional Comments (optional) |
| | |
| | low often do you or people that live with you spend the night at a friend or relativ |
| | ce in your area? |
| ola | ce in your area? |
| ola O | ce in your area? Never |
| ola o | Ce in your area? Never Once a year |
| ola o o | Ce in your area? Never Once a year 2-3 times a year |

| | Never | |
|------|--|--|
| 0 | Once a year | |
| 0 | 2-3 times a year | |
| 0 | 4-6 times a year | |
| 0 | More than 6 times a year | |
| Add | itional Comments (optional) | |
| | | |
| | low often do you or anyone that live with you purchase or receive used furniture thing? | |
| 0 | Never | |
| 0 | Once a year | |
| 0 | 2-3 times a year | |
| 0 | 4-6 times a year | |
| | | |
| 0 | More than 6 times a year | |
| | More than 6 times a year itional Comments (optional) | |
| | | |
| Add | | |
| Add | itional Comments (optional) | |
| Add | Do you apply pesticides inside your home (select all that apply)? | |
| Add | Do you apply pesticides inside your home (select all that apply)? I / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year | |
| Add | Do you apply pesticides inside your home (select all that apply)? I / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year I / We apply 2-3 different pesticides purchased from retail stores per year | |
| Add | Do you apply pesticides inside your home (select all that apply)? 1 / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year 1 / We apply 2-3 different pesticides purchased from retail stores per year 1 / We apply more than 3 different pesticides purchased from retail stores per year | |
| 6. I | Do you apply pesticides inside your home (select all that apply)? I / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year I / We apply 2-3 different pesticides purchased from retail stores per year I / We apply more than 3 different pesticides purchased from retail stores per year Bomb place of residence with bug bombs purchased from a retail store | |
| 6. I | Do you apply pesticides inside your home (select all that apply)? 1 / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year 1 / We apply 2-3 different pesticides purchased from retail stores per year 1 / We apply more than 3 different pesticides purchased from retail stores per year Bomb place of residence with bug bombs purchased from a retail store A pest control company applies pesticides every month | |
| 3. I | Do you apply pesticides inside your home (select all that apply)? I / We apply pesticides purchased from a retail store for specific problems (e.g. Ants, cockroaches, etc.) not more than once a year I / We apply 2-3 different pesticides purchased from retail stores per year I / We apply more than 3 different pesticides purchased from retail stores per year Bomb place of residence with bug bombs purchased from a retail store A pest control company applies pesticides every month A pest control company applies pesticides only when needed (not every month, unless they are needed every month) | |

| 7. Do you do certain things in an attempt to avoid acquiring bed bugs? Tell us what you do | | | | |
|--|---------------|--|--|--|
| now that you know bed bugs are an increasing problem, e.g. avoid renting furniture, avoid | | | | |
| second hand clothes or furniture, etc. | | | | |
| C Yes | | | | |
| O No | | | | |
| C Not sure | | | | |
| If you selected "Yes" please tell us what you do differently to avoid bed bugs | | | | |
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Demographic Information 1. What is your age? 18 to 25 C 26 to 30 O 31 to 40 C 41 to 50 C 51 to 60 © 61 to 70 Over 70 years of age 2. What is your gender? Female Male 3. Number of adults in household 4. Number of children under 5 in household 5. Number of children 5-18 in household 6. What is your yearly household income? © \$0-\$10,999 © \$11,000-\$19,999 © \$20,000-\$29,999 © \$30,000-\$39,999 © \$40,000-\$49,999 © \$50,000-\$59,999 © \$60,000-\$69,999 © \$70,000-\$79,999 © \$80,000-\$89,999

\$90,000 and up

| 0 | |
|---------|---|
| | egally blind |
| 0 | lse a wheelchair |
| 0 | risit medical facilities once or more a week |
| 0 | lousebound |
| 0 | Other disabilities |
| B. \ | hich best describes your current living situation? |
| 0 | Renting |
| 0 | Own or buying a home |
| 0 | Medical facility / assisted living |
| 0 | Staying with family and / or friends |
| 0 | ive in vehicle |
| | |
| 0 | ive in a shelter |
| 0 | ive in a shelter ive in a shelter when possible or homeless other times |
| O Othe | ive in a shelter when possible or homeless other times domeless please describe) what ZIP code is your home located? (enter 5-digit ZIP code; for example, 005) |
| O Other | ive in a shelter when possible or homeless other times domeless please describe) what ZIP code is your home located? (enter 5-digit ZIP code; for example, 005) |
| O Other | ive in a shelter when possible or homeless other times lomeless (please describe) what ZIP code is your home located? (enter 5-digit ZIP code; for example, 005 5) f you have additional comments, please write them here. |

| Thank You! | | | | |
|-----------------------------------|--|--|--|--|
| Thank you for taking this survey. | | | | |
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