

U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU



Acting as a collecting agent for
U.S. Department of Labor
Bureau of Labor Statistics

*Measuring America's
Spending Since 1888*

Your Daily Expenses

Help us learn about the buying habits of people in the United States



When you write down what you purchase in this diary, you will help provide a bigger picture of how U.S. consumers spend their money.

By law (Title 13, U.S. Code), we must keep your information confidential; we use it for statistical purposes only.

If you have comments regarding this survey, please email CEcomments@bls.gov.

Please record your expenses and purchases for the following period

| | Day | Date |
|---|-----|------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |

I will return on: _____

If you have any questions, please call:

| | |
|---|------------|
| Field representative's name: | Telephone: |
| Field representative supervisor's name: | Telephone: |

General Instructions

- Fill out this diary for an entire week, writing down everything you and the people on your list spend money on each day – the products you buy, the services you use, the household expenses you have during the week – no matter how large or small they are.
- We recommend that you record your expenses each day. Think about where you went and what you did.
- Talk to the people on your list every day to find out how they spent their money.

- Include payments by

Cash
Check
SNAP Card
Credit/Debit Card
Money Order
Venmo
Paypal

WIC Voucher
Automatic Withdrawal
Payroll Deduction
Store Charge Card
Gift Card
Cashapp

- Keep receipts and other records so that you will remember to record what you bought or paid for. Use the pocket at the back of the diary to store them.

Some record types include:

Receipts
Bills
Pay Stubs
Bank Statements
Internet/Catalog Purchases
Credit Card Statements

- Include items that you bought for people who are not on your list, such as gifts.

Do NOT record

- Expenses of people on your list while they were away from home overnight
- Business or farm operating expenses
- Sales tax, *except* for Meals, Snacks, and Drinks Away from Home

How to Fill Out Your Diary

The diary is divided into 7 days and each day is divided into 4 parts.

Enter each item in the appropriate part for each day.

1. Food and Drinks for Home Consumption

- Describe the item.
- Mark whether the item was fresh, frozen, bottled/canned, or other.
- Enter the cost **without tax** and deduct any discounts or coupons.
- Enter the name of the store, business, or website where the item was purchased.

2. Meals, Snacks, and Drinks Away from Home

- Enter the name of the restaurant, vendor, or cafeteria. Do **not** include the name of the delivery service.
- Mark one of the four choices that best describes where you made the purchase.
- Enter the total cost **with tax and tip**. Include any **delivery fees** in the total cost.
- Check whether alcoholic beverages were included or not, and if yes, enter the cost of the alcoholic beverages.

3. Clothing, Shoes, Jewelry, and Accessories

- Describe the item and enter the cost **without tax**.
- Mark the appropriate sex and age range of the person for whom the item was bought.
- Enter the name of the store, business, or website where the item was purchased.

4. All Other Products, Services, and Expenses

- Describe the item and enter the total cost **without tax**.
- Enter the name of the store, business, or website where the item was purchased.

See back flap for answers to Frequently Asked Questions

There is an Additional Pages section on pages 18–23 in case you run out of lines on any particular day.

If you are unsure about whether to include an item or where to record an item, write it down wherever it seems best or make a note and ask your field representative.

Thank you for agreeing to fill out this diary.

We understand that this task takes time; however, your information is very important to us and will be used for many purposes that affect all households in the U.S. Among the most important, it is used to help calculate the Consumer Price Index, or CPI. The CPI is *one of the most important tools* used to measure how fast consumer prices are rising or declining.

Here are some of the uses of the Consumer Price Index:

- ◆ Provide cost-of-living wage adjustments for millions of American workers
- ◆ Adjust Social Security payments
- ◆ Adjust Federal income-tax brackets

For more information about the survey, visit: www.bls.gov/cex and www.census.gov/programs-surveys/ce.html



Office Use: Place the barcode label here



Questions?

Some Frequently Asked Questions are answered on the flap attached to the back cover. If you still have questions after reviewing these, please call your field representative.



Examples

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|----|--|
| | | fresh | frozen | bottled/ canned | other | | | |
| 101 | bread | 1 X | 2 | 3 | 4 | 1 | 49 | Foodway Grocery Store |
| 102 | eggs | 1 X | 2 | 3 | 4 | 1 | 50 | |
| 103 | chicken wings | 1 | 2 X | 3 | 4 | 6 | 78 | |
| 104 | apples | 1 X | 2 | 3 | 4 | 2 | 80 | |
| 105 | beer | 1 | 2 | 3 X | 4 | 4 | 29 | |
| 106 | milk | 1 X | 2 | 3 | 4 | 2 | 99 | |
| 107 | orange juice | 1 | 2 | 3 X | 4 | 3 | 99 | |
| 108 | candy | 1 | 2 | 3 | 4 X | 2 | 50 | |
| 109 | vegetable oil | 1 | 2 | 3 X | 4 | 2 | 99 | |
| 110 | baby food | 1 | 2 | 3 X | 4 | 4 | 95 | |
| 111 | potato chips | 1 | 2 | 3 | 4 X | 2 | 79 | |
| 112 | frozen meals | 1 | 2 X | 3 | 4 | 8 | 97 | |
| 113 | ketchup | 1 | 2 | 3 X | 4 | 1 | 59 | |
| 114 | soup | 1 | 2 | 3 X | 4 | 4 | 96 | |
| 115 | soda | 1 | 2 | 3 X | 4 | 1 | 98 | |
| 116 | pork chops | 1 X | 2 | 3 | 4 | 6 | 36 | |
| 117 | shrimp | 1 | 2 X | 3 | 4 | 11 | 20 | |
| 118 | cookies | 1 | 2 | 3 | 4 X | 3 | 50 | |
| 119 | ground beef | 1 X | 2 | 3 | 4 | 5 | 87 | |
| 120 | carbonated water | 1 | 2 | 3 X | 4 | | 89 | |
| 121 | apple pie | 1 X | 2 | 3 | 4 | 4 | 99 | |
| 122 | ground coffee | 1 | 2 | 3 | 4 X | 2 | 79 | NY Bagel Bakery |
| 123 | bagels | 1 X | 2 | 3 | 4 | 5 | 25 | " |
| 124 | wine | 1 | 2 | 3 X | 4 | 42 | 00 | Total Wine |
| 125 | juice boxes | 1 | 2 | 3 | 4 X | 20 | 85 | Amazon.com |
| 126 | dog food | 1 | 2 | 3 | 4 X | 21 | 45 | Pets&More.com |
| 127 | | 1 | 2 | 3 | 4 | | | |
| 128 | | 1 | 2 | 3 | 4 | | | |
| 129 | | 1 | 2 | 3 | 4 | | | |
| 130 | | 1 | 2 | 3 | 4 | | | |
| 131 | | 1 | 2 | 3 | 4 | | | |
| 132 | | 1 | 2 | 3 | 4 | | | |
| 133 | | 1 | 2 | 3 | 4 | | | |
| 134 | | 1 | 2 | 3 | 4 | | | |
| 135 | | 1 | 2 | 3 | 4 | | | |
| 136 | | 1 | 2 | 3 | 4 | | | |

Use the pocket on the inside of the back cover to store your receipts until you're ready to record your purchases.



Examples

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|-------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | | | |
| 201 | McDonald's | X | | | | 7 25 | | X | |
| 202 | Lupo Verde Italian restaurant | | X | | | 62 23 | X | | 12 00 |
| 203 | Mister Days sports bar | | X | | | 15 00 | X | | 15 00 |
| 204 | YMCA vending machine | | | X | | 1 50 | | X | |
| 205 | Millbrook school cafeteria | | | | X | 45 00 | | X | |
| 206 | Starbucks | X | | | | 2 09 | | X | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|--|------------------|-------------------|--------------|--------------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | dress shirts | 75 00 | 1 | 2 | 3 | 4 | 5 | Dillard's.com |
| 302 | running shoes | 69 00 | 1 | 2 | 3 | 4 | 5 | ↓ Target |
| 303 | wallet | 29 00 | 1 | 2 | 3 | 4 | 5 | |
| 304 | baseball cap | 14 99 | 1 | 2 | 3 | 4 | 5 | Sweet Dreams boutique |
| 305 | bib | 3 50 | | X | | | | Olde Towne jewelry |
| 306 | necklace | 250 00 | 1 | 2 | 3 | 4 | 5 | Walmart.com |
| 307 | non-prescription sunglasses | 59 00 | 1 | 2 | 3 | 4 | 5 | PartySupply.com |
| 308 | child's costume (returned for refund) | 15 00 | 1 | 2 | 3 | 4 | 5 | PartySupply.com |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|----------------------------------|------------------|--|
| 401 | cold medicine (non-prescription) | 6 95 | Walmart |
| 402 | gasoline | 12 86 | Liberty |
| 403 | highway tolls | 2 00 | Tri-River bridge |
| 404 | digital music | 10 99 | Spotify |
| 405 | cigarettes | 8 99 | Jim's Mart |
| 406 | dry cleaning (clothes) | 15 50 | Green cleaners |
| 407 | lottery tickets | 1 00 | Jim's Mart |
| 408 | bus fare | 1 50 | MetroCounty transit |
| 409 | piano lessons | 150 00 | Private Individual |
| 410 | electric drill | 65 00 | Village Hardware |
| 411 | Netflix subscription | 9 99 | Netflix |
| 412 | veterinarian fees | 85 00 | Bay County Vets |



DAY 1

**ENTER
DAY AND
DATE**

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 1

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 2

**ENTER
DAY AND
DATE**

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 2

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 3

**ENTER
DAY AND
DATE**

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 3

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 4

ENTER
DAY AND
DATE

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 4

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | | | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 5

**ENTER
DAY AND
DATE**

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 5

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 6

ENTER
DAY AND
DATE

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|-------------------------------|--------|--------------------|-------|---------------------|--|
| | fresh | frozen | bottled/ canned | other | | |
| 101 | 1 | 2 | 3 | 4 | | |
| 102 | 1 | 2 | 3 | 4 | | |
| 103 | 1 | 2 | 3 | 4 | | |
| 104 | 1 | 2 | 3 | 4 | | |
| 105 | 1 | 2 | 3 | 4 | | |
| 106 | 1 | 2 | 3 | 4 | | |
| 107 | 1 | 2 | 3 | 4 | | |
| 108 | 1 | 2 | 3 | 4 | | |
| 109 | 1 | 2 | 3 | 4 | | |
| 110 | 1 | 2 | 3 | 4 | | |
| 111 | 1 | 2 | 3 | 4 | | |
| 112 | 1 | 2 | 3 | 4 | | |
| 113 | 1 | 2 | 3 | 4 | | |
| 114 | 1 | 2 | 3 | 4 | | |
| 115 | 1 | 2 | 3 | 4 | | |
| 116 | 1 | 2 | 3 | 4 | | |
| 117 | 1 | 2 | 3 | 4 | | |
| 118 | 1 | 2 | 3 | 4 | | |
| 119 | 1 | 2 | 3 | 4 | | |
| 120 | 1 | 2 | 3 | 4 | | |
| 121 | 1 | 2 | 3 | 4 | | |
| 122 | 1 | 2 | 3 | 4 | | |
| 123 | 1 | 2 | 3 | 4 | | |
| 124 | 1 | 2 | 3 | 4 | | |
| 125 | 1 | 2 | 3 | 4 | | |
| 126 | 1 | 2 | 3 | 4 | | |
| 127 | 1 | 2 | 3 | 4 | | |
| 128 | 1 | 2 | 3 | 4 | | |
| 129 | 1 | 2 | 3 | 4 | | |
| 130 | 1 | 2 | 3 | 4 | | |
| 131 | 1 | 2 | 3 | 4 | | |
| 132 | 1 | 2 | 3 | 4 | | |
| 133 | 1 | 2 | 3 | 4 | | |
| 134 | 1 | 2 | 3 | 4 | | |
| 135 | 1 | 2 | 3 | 4 | | |
| 136 | 1 | 2 | 3 | 4 | | |



DAY 6

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | | | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



DAY 7

**ENTER
DAY AND
DATE**

See pages 2-3 for examples. If you need additional space, use pages 18-23.

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |



DAY 7

FR USE:

- None
 VC

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 202 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 203 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 204 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 205 | | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 206 | | 1 | 2 | 3 | 4 | | 1 | 2 | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



Additional Pages

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 101 | | 1 | 2 | 3 | 4 | | |
| 102 | | 1 | 2 | 3 | 4 | | |
| 103 | | 1 | 2 | 3 | 4 | | |
| 104 | | 1 | 2 | 3 | 4 | | |
| 105 | | 1 | 2 | 3 | 4 | | |
| 106 | | 1 | 2 | 3 | 4 | | |
| 107 | | 1 | 2 | 3 | 4 | | |
| 108 | | 1 | 2 | 3 | 4 | | |
| 109 | | 1 | 2 | 3 | 4 | | |
| 110 | | 1 | 2 | 3 | 4 | | |
| 111 | | 1 | 2 | 3 | 4 | | |
| 112 | | 1 | 2 | 3 | 4 | | |
| 113 | | 1 | 2 | 3 | 4 | | |
| 114 | | 1 | 2 | 3 | 4 | | |
| 115 | | 1 | 2 | 3 | 4 | | |
| 116 | | 1 | 2 | 3 | 4 | | |
| 117 | | 1 | 2 | 3 | 4 | | |
| 118 | | 1 | 2 | 3 | 4 | | |
| 119 | | 1 | 2 | 3 | 4 | | |
| 120 | | 1 | 2 | 3 | 4 | | |
| 121 | | 1 | 2 | 3 | 4 | | |
| 122 | | 1 | 2 | 3 | 4 | | |
| 123 | | 1 | 2 | 3 | 4 | | |
| 124 | | 1 | 2 | 3 | 4 | | |
| 125 | | 1 | 2 | 3 | 4 | | |
| 126 | | 1 | 2 | 3 | 4 | | |
| 127 | | 1 | 2 | 3 | 4 | | |
| 128 | | 1 | 2 | 3 | 4 | | |
| 129 | | 1 | 2 | 3 | 4 | | |
| 130 | | 1 | 2 | 3 | 4 | | |
| 131 | | 1 | 2 | 3 | 4 | | |
| 132 | | 1 | 2 | 3 | 4 | | |
| 133 | | 1 | 2 | 3 | 4 | | |
| 134 | | 1 | 2 | 3 | 4 | | |
| 135 | | 1 | 2 | 3 | 4 | | |
| 136 | | 1 | 2 | 3 | 4 | | |
| 137 | | 1 | 2 | 3 | 4 | | |



Additional Pages

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | 1 | 2 | |
| 201 | | | | | | | | | |
| 202 | | | | | | | | | |
| 203 | | | | | | | | | |
| 204 | | | | | | | | | |
| 205 | | | | | | | | | |
| 206 | | | | | | | | | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 301 | | | 1 | 2 | 3 | 4 | 5 | |
| 302 | | | 1 | 2 | 3 | 4 | 5 | |
| 303 | | | 1 | 2 | 3 | 4 | 5 | |
| 304 | | | 1 | 2 | 3 | 4 | 5 | |
| 305 | | | 1 | 2 | 3 | 4 | 5 | |
| 306 | | | 1 | 2 | 3 | 4 | 5 | |
| 307 | | | 1 | 2 | 3 | 4 | 5 | |
| 308 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 401 | | | |
| 402 | | | |
| 403 | | | |
| 404 | | | |
| 405 | | | |
| 406 | | | |
| 407 | | | |
| 408 | | | |
| 409 | | | |
| 410 | | | |
| 411 | | | |
| 412 | | | |
| 413 | | | |



Additional Pages

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 138 | | 1 | 2 | 3 | 4 | | |
| 139 | | 1 | 2 | 3 | 4 | | |
| 140 | | 1 | 2 | 3 | 4 | | |
| 141 | | 1 | 2 | 3 | 4 | | |
| 142 | | 1 | 2 | 3 | 4 | | |
| 143 | | 1 | 2 | 3 | 4 | | |
| 144 | | 1 | 2 | 3 | 4 | | |
| 145 | | 1 | 2 | 3 | 4 | | |
| 146 | | 1 | 2 | 3 | 4 | | |
| 147 | | 1 | 2 | 3 | 4 | | |
| 148 | | 1 | 2 | 3 | 4 | | |
| 149 | | 1 | 2 | 3 | 4 | | |
| 150 | | 1 | 2 | 3 | 4 | | |
| 151 | | 1 | 2 | 3 | 4 | | |
| 152 | | 1 | 2 | 3 | 4 | | |
| 153 | | 1 | 2 | 3 | 4 | | |
| 154 | | 1 | 2 | 3 | 4 | | |
| 155 | | 1 | 2 | 3 | 4 | | |
| 156 | | 1 | 2 | 3 | 4 | | |
| 157 | | 1 | 2 | 3 | 4 | | |
| 158 | | 1 | 2 | 3 | 4 | | |
| 159 | | 1 | 2 | 3 | 4 | | |
| 160 | | 1 | 2 | 3 | 4 | | |
| 161 | | 1 | 2 | 3 | 4 | | |
| 162 | | 1 | 2 | 3 | 4 | | |
| 163 | | 1 | 2 | 3 | 4 | | |
| 164 | | 1 | 2 | 3 | 4 | | |
| 165 | | 1 | 2 | 3 | 4 | | |
| 166 | | 1 | 2 | 3 | 4 | | |
| 167 | | 1 | 2 | 3 | 4 | | |
| 168 | | 1 | 2 | 3 | 4 | | |
| 169 | | 1 | 2 | 3 | 4 | | |
| 170 | | 1 | 2 | 3 | 4 | | |
| 171 | | 1 | 2 | 3 | 4 | | |
| 172 | | 1 | 2 | 3 | 4 | | |
| 173 | | 1 | 2 | 3 | 4 | | |
| 174 | | 1 | 2 | 3 | 4 | | |



Additional Pages

Meals, Snacks, and Drinks Away from Home

| Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | 1 | 2 | 3 | 4 | | 1 | 2 | |
| 207 | | | | | | | | |
| 208 | | | | | | | | |
| 209 | | | | | | | | |
| 210 | | | | | | | | |
| 211 | | | | | | | | |
| 212 | | | | | | | | |

Clothing, Shoes, Jewelry, and Accessories

| What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| | | 1 | 2 | 3 | 4 | 5 | |
| 309 | | | | | | | |
| 310 | | | | | | | |
| 311 | | | | | | | |
| 312 | | | | | | | |
| 313 | | | | | | | |
| 314 | | | | | | | |
| 315 | | | | | | | |
| 316 | | | | | | | |

All Other Products, Services, and Expenses

| What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|------------------------------|------------------|--|
| 414 | | |
| 415 | | |
| 416 | | |
| 417 | | |
| 418 | | |
| 419 | | |
| 420 | | |
| 421 | | |
| 422 | | |
| 423 | | |
| 424 | | |
| 425 | | |
| 426 | | |



Additional Pages

Food and Drinks for Home Consumption

| | What did you buy or pay for? | Is this item: Mark (X) one | | | | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|-------------------------------|--------|--------------------|-------|---------------------|--|
| | | fresh | frozen | bottled/ canned | other | | |
| 175 | | 1 | 2 | 3 | 4 | | |
| 176 | | 1 | 2 | 3 | 4 | | |
| 177 | | 1 | 2 | 3 | 4 | | |
| 178 | | 1 | 2 | 3 | 4 | | |
| 179 | | 1 | 2 | 3 | 4 | | |
| 180 | | 1 | 2 | 3 | 4 | | |
| 181 | | 1 | 2 | 3 | 4 | | |
| 182 | | 1 | 2 | 3 | 4 | | |
| 183 | | 1 | 2 | 3 | 4 | | |
| 184 | | 1 | 2 | 3 | 4 | | |
| 185 | | 1 | 2 | 3 | 4 | | |
| 186 | | 1 | 2 | 3 | 4 | | |
| 187 | | 1 | 2 | 3 | 4 | | |
| 188 | | 1 | 2 | 3 | 4 | | |
| 189 | | 1 | 2 | 3 | 4 | | |
| 190 | | 1 | 2 | 3 | 4 | | |
| 191 | | 1 | 2 | 3 | 4 | | |
| 192 | | 1 | 2 | 3 | 4 | | |
| 193 | | 1 | 2 | 3 | 4 | | |
| 194 | | 1 | 2 | 3 | 4 | | |
| 195 | | 1 | 2 | 3 | 4 | | |
| 196 | | 1 | 2 | 3 | 4 | | |
| 197 | | 1 | 2 | 3 | 4 | | |
| 198 | | 1 | 2 | 3 | 4 | | |
| 199 | | 1 | 2 | 3 | 4 | | |



Additional Pages

Meals, Snacks, and Drinks Away from Home

| | Name of Restaurant or Vendor | Mark (X) one that best describes where you made this purchase | | | | Total Cost with tax & tip | Were alcoholic beverages included? | | Enter the total cost of the alcohol |
|-----|------------------------------|---|---------------------|--|------------------------------|---------------------------|------------------------------------|----|-------------------------------------|
| | | Fast Food Take-out Delivery Concession | Full Service Places | Vending Machines or Mobile Vendors / Food Trucks | Employer or School Cafeteria | | Yes | No | |
| | | | | | | | | | |
| 213 | | | | | | | | | |
| 214 | | | | | | | | | |
| 215 | | | | | | | | | |
| 216 | | | | | | | | | |
| 217 | | | | | | | | | |
| 218 | | | | | | | | | |

Clothing, Shoes, Jewelry, and Accessories

| | What did you buy or pay for? | Cost without tax | Was the item for: | | | | | Name of Store or Website where purchased |
|-----|------------------------------|------------------|-------------------|----------|-----------|---------------|-----------------|--|
| | | | Child Under 2 | Boy 2-15 | Girl 2-15 | Man 16 & over | Woman 16 & over | |
| 317 | | | 1 | 2 | 3 | 4 | 5 | |
| 318 | | | 1 | 2 | 3 | 4 | 5 | |
| 319 | | | 1 | 2 | 3 | 4 | 5 | |
| 320 | | | 1 | 2 | 3 | 4 | 5 | |
| 321 | | | 1 | 2 | 3 | 4 | 5 | |
| 322 | | | 1 | 2 | 3 | 4 | 5 | |
| 323 | | | 1 | 2 | 3 | 4 | 5 | |
| 324 | | | 1 | 2 | 3 | 4 | 5 | |

All Other Products, Services, and Expenses

| | What did you buy or pay for? | Cost without tax | Name of Store or Website where purchased |
|-----|------------------------------|------------------|--|
| 427 | | | |
| 428 | | | |
| 429 | | | |
| 430 | | | |
| 431 | | | |
| 432 | | | |
| 433 | | | |
| 434 | | | |
| 435 | | | |
| 436 | | | |
| 437 | | | |
| 438 | | | |
| 439 | | | |



Keep your records in this pocket.

(These records are only for your reference; we will not keep them.)

- Receipts
- Bills
- Pay Stubs
- Bank Statements
- Catalog/Internet Purchases
- Credit Card Statements

Frequently Asked Questions

(continued on other side)

11. What about gift cards or gift certificates?

If you buy a gift card or gift certificate to give to someone, write down its cost under the appropriate section (e.g., a gift card to a clothing store would go under *Clothing, Shoes, Jewelry, and Accessories* and a gift card to a department store would go under *All Other Products, Services, and Expenses*). If you use a gift card, write down the full amount for your purchase as if paid with cash.

12. What do I do about returns & exchanges?

If an item is bought and returned during the diary week, it can be erased or crossed out. If it was bought outside the week and returned during the week, do not make an entry. If an item is exchanged during the week, erase or cross out the item that was returned and enter the new item and its cost on the day the exchange was made.

13. How do I categorize the establishment for Meals, Snacks, and Drinks Away from Home?

- **Fast Food, Take-out, Delivery, Concession**
You pay BEFORE you eat/drink
- **Full Service Places**
You pay AFTER you eat/drink if you eat/drink at the establishment
- **Vending Machines or Mobile Vendors / Food Trucks**
Include vending machines, carts, and food trucks that move from place to place
- **Employer and School Cafeterias**
Include school meal plans and pre-payments, and school lunch bills

14. What's the difference between a concession stand and a mobile vendor?

A concession stand has to stay in a permanent location and a mobile vendor does not. Some mobile vendors may seem permanent because they are usually in the same location, but they are still considered mobile vendors because they have the option to change locations.

15. Should I record subsidized/reimbursed expenses?

Yes, but only record the portion that you or someone on your list has paid.

16. What should I do about shipping & handling costs?

Include the shipping & handling cost in the total price of the item. If the shipping & handling covered multiple items, include the shipping & handling in the total price of one item from the order.

Frequently Asked Questions

(continued on other side)

1. How detailed should my descriptions be?

Refer to pages 2–3 for examples of the level of detail needed in each part. Do not rely solely on brand names.

2. How should I record multiple quantities?

You may group identical items on the same line and enter a total cost of all the items, or you may write each item on a separate line with the individual cost.

3. How should I record pre-payments such as a subway fare card?

Record the expense when you pay for it, not when you use it.

4. How should I record credit card purchases?

Record the purchase on the day that you use your credit card to pay for it, not on the day you receive or pay your credit card bill.

5. Should I record automatic deductions taken from my paycheck or bank account?

Yes, record automatic deductions (such as health insurance premiums taken out of your account or paycheck) only if they are deducted that week. Write them in the section called *All Other Products, Services, and Expenses*.

6. Should I record typical monthly bills?

Yes, record typical monthly bills only if you pay them during the week that you have the diary. Write them in the section called *All Other Products, Services, and Expenses*.

7. What should I do when I use coupons, discount cards, or loyalty cards?

Subtract the discount from the original price and write the amount that you paid.

8. Can I just give you receipts instead of writing the information down?

No, we need you to write the information in the diary. We encourage you to save your receipts to review them with your field representative at the end of the week. You can use the pocket on the inside of the back cover to store your receipts until you're ready to record your purchases.

9. How should I record an item if I don't know if it includes tax?

Write down the amount paid.

10. What if I make a contribution or charitable donation?

Record money contributions or donations in the section called *All Other Products, Services, and Expenses*.

(continued on other side)



Daily Reminder List

Please review the list of expenses below with the people on your list at the end of each day. If you have forgotten to record any expense, please do so on the appropriate page.

Did you or anyone on your list pay for . . .

- meals, drinks, or snacks from restaurants, fast food, cafeterias, vending machines, concession stands, etc.?
- catered events or meal plans?
- food & drinks from a grocery store or other speciality food store such as a bakery, candy shop, or liquor store?
- clothing, shoes, jewelry, accessories or clothing services such as dry cleaning?
- personal care items or services such as cosmetics, soaps, haircuts, etc.?
- housekeeping supplies or services for home decoration/maintenance?
- toys, books, electronics, hobby supplies, etc.?
- cigarettes, tobacco, or other smoking supplies?
- commuting costs such as public transportation, parking fees, gasoline, or tolls?
- medicine or medical/dental services?
- entertainment or recreational activities?
- typical bills such as utility bills, cable bills, telephone bills, etc.?
- automatic deductions from a paycheck such as insurance premiums?
- bank/ATM service fees?
- credit card interest or finance charges?
- internet or catalog orders?
- fees for lessons or instructions?
- gifts, contributions, or donations?

FR USE: Use the example below to transcribe the Control Number:

| RO code | Control Number | | | | | | | | | | Week | |
|---------|-------------------|-----------------|------------------|-----------|---------------------------|---------------------|---------------------|-------------|----------------|---------------------------|------|---|
| | Survey code (1-2) | PSU state (3-4) | PSU county (5-7) | Frame (8) | Sample Designation (9-11) | Sequence #1 (12-15) | Sequence #2 (16-17) | HH No. (18) | CU No. (19-20) | Spinoff Indicator (21-22) | 1 | 2 |
| 21 | 04 | 26 | 999 | U | D15 | 0001 | 01 | 1 | 01 | 00 | | |

| RO code | Control Number | | | | | | | | | | Week | |
|---------|-------------------|-----------------|------------------|-----------|---------------------------|---------------------|---------------------|-------------|----------------|---------------------------|------|---|
| | Survey code (1-2) | PSU state (3-4) | PSU county (5-7) | Frame (8) | Sample Designation (9-11) | Sequence #1 (12-15) | Sequence #2 (16-17) | HH No. (18) | CU No. (19-20) | Spinoff Indicator (21-22) | 1 | 2 |
| | | | | | | | | | | | | |

