

CASE ID: B-___/___/___/___/

Ethnic Entrepreneurship in Chicago
Chatham

Federal Reserve Bank of Chicago
University of Chicago

READ TO RESPONDENTS:

This is a study about success and difficulties of small business owners. It is aimed at identifying those elements that allow small business owners to succeed, as well as those obstacles that prevent them from getting ahead. Your responses will contribute to identify issues that concern business owners. You have been randomly selected to participate in the study. While your participation is voluntary, it is vital to the success of the study. If we should come to any question you do not want to answer, let me know and we will go on to the next question. Feel free to consult any person or records at any time during this interview. You will receive a cash payment of \$50 for your participation in this project. The survey takes about an hour and a half to complete and most people find it pretty interesting.

All the information you give will be held in confidence and will be used for research purposes only. Results of the study will be made public only in summary or statistical form, so that individuals or businesses who participate cannot be identified.

INTERVIEW DATE: /___/___/ /___/___/ 1997
 Month Day

START TIME: /___/___/ /___/___/ AM/PM
 HOUR MINUTES

Contact number:
Consumer and Community Affairs Division
Federal Reserve Bank (312) 322-2350

CHATHAM BUSINESS SURVEY

SECTION A. HOUSEHOLD AND RESPONDENT CHARACTERISTICS

Before we start the interview, I need to list the people who live in your household, and obtain some basic information about each one.

1. First, may I have the names of all the persons who live in your household? Let's start with yourself. IF NECESSARY, READ: A first name or initials are fine. ENTER NAMES IN COLUMN 1 OF HHE GRID BELOW.

Have I missed anyone, such as new babies or small children, roomers or boarders, or other relatives staying in your household? ENTER ADDITIONAL NAMES IN HHE GRID.

Are there any other persons who usually stay there but who are away now on vacation or a business trip, at school, or in the hospital? ENTER ADDITIONAL NAMES IN HHE GRID.

BOX A-1	ASK Q2-7 FOR EACH MEMBER BEFORE PROCEEDING TO THE NEXT MEMBER.
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2. FOR ALL EXCEPT RESPONDENT.: How is (NAME) related to you?
ENTER IN COLUMN 2 ON HHE GRID.
3. [Are you/is (NAME)] male or female? ENTER IN COLUMN 3 ON HHE GRID.
4. How old [were you/was (NAME)] at (your/his/her) last birthday?
ENTER IN COLUMN 4 ON HHE GRID.
5. In what city and state [were you/was (NAME)] born? IF FOREIGN-BORN, RECORD COUNTRY AS WELL. ENTER IN COLUMN 5 ON HHE GRID.
6. Which of the categories on this card best describes [your/(NAME)'s] ethnic background?
CODE ONE ONLY.

HAND CARD A-1	White or Caucasian.....	01 ON GRID
	Black or African-American.....	02 ON GRID
	Asian or Pacific Islander.....	03 ON GRID
	Native American or Alaskan native.....	04 ON GRID
	Hispanic/Latino/Chicano	05 ON GRID
	Other (SPECIFY ON GRID)	06 ON GRID

- 6A. How would you describe your specific ethnic or national background?
RECORD VERBATIM ANSWER

7. What is [your/(NAME)'s] current employment status? CODE ONE ONLY.

HAND CARD A-1	A wage or salary worker.....	01 ON GRID
	Self-employed or Business Owner.....	02 ON GRID
	Unemployed.....	03 ON GRID
	Unpaid Family Worker	04 ON GRID
	Retired.....	05 ON GRID
	Disabled	06 ON GRID
	Keeping house.....	07 ON GRID
	In school.....	08 ON GRID
	Other (SPECIFY ON GRID)	09 ON GRID

BOX A-2	REPEAT Q2 TO 7 FOR NEXT PERSON ON HHE UNTIL YOU HAVE ASKED THEM FOR PERSONS.
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HOUSEHOLD ENUMERATION (HHE) GRID

	(1) NAME	(2) RELATIONSHIP TO R	(3) SEX	(4) AGE	(5) PLACE OF BIRTH	(6) ETHNICITY	(7) EMPLOYMENT
A.	RESP	SELF					
B.							
C.							
D.							
E.							
F.							
G.							
H.							
I.							
J.							
K.							

Now I have a few more specific questions about yourself.

8. Are you currently married, living in a marriage-like relationship, widowed, divorced, separated, or have you never been married" CODE ONE ONLY.

Married.....	1
Marriage-like relationship.....	2
Widowed.....	3
Divorced.....	4
Separated.....	5
Never married	6

9. What is the highest grade or year of regular school that you have completed and gotten credit for? CODE ONE ONLY.

1 ST GRADE.....	01
2 ND GRADE.....	02
3 RD GRADE.....	03
4 TH GRADE.....	04
5 TH GRADE.....	05
6 TH GRADE.....	06
7 TH GRADE.....	07
8 TH GRADE.....	08
9 TH GRADE.....	09
10 TH GRADE.....	10
11 TH GRADE.....	11
12 TH GRADE.....	12
1 ST YEAR OF COLLEGE.....	13
2 ND YEAR OF COLLEGE.....	14
3 RD YEAR OF COLLEGE.....	15
4 TH YEAR OF COLLEGE.....	16
1 ST YEAR BEYOND COLLEGE.....	17
2 ND YEAR BEYOND COLLEGE.....	18
3 RD YEAR BEYOND COLLEGE.....	19
4 TH YEAR BEYOND COLLEGE.....	20

10. What is the name of the highest degree that you have received? CODE ONE ONLY.

HAND CARD A-3	No degree received.....	00 → SKIP TO Q11
	High school diploma (or equivalent)	01 → ASK A
	Associate/Junior College (AA)	02 → ASK A
	Bachelor of Arts (BA).....	03 → ASK A
	Master's Degree (MA, MBA, MS, MSW).....	04 → ASK A
	Doctoral Degree (Ph.D.)	05 → ASK A
	Professional Degree (MD, LLD, DDS).....	06 → ASK A
	Other (SPECIFY)	07 → ASK A

10A. In what country did you receive that degree?

COUNTRY _____

11. In what religion were you raised?

Protestant.....	01 → ASK A
Roman Catholic	02 → SKIP TO Q12
Greek or Russian Orthodox.....	03 → SKIP TO Q12
Jewish.....	04 → SKIP TO Q12
Muslim	05 → SKIP TO Q12
Hindu	06 → SKIP TO Q12
Not raised in any religion/atheist/agnostic.....	07 → SKIP TO Q12
Other (SPECIFY)_____	08 → SKIP TO Q12

11A. What specific denomination is that, if any?

Baptist	01
Methodist	02
Lutheran	03
Presbyterian.....	04
Episcopalian.....	05
United Church of Christ (UCC)	06
African Methodist Episcopal	07
Other (SPECIFY)_____	08

12. Is your current religious preference the same?

Yes	1 → SKIP TO Q14
No.....	2 → ASK 13

13. What is your current religious preference?

Protestant.....	01 → ASK A
Roman Catholic	02 → SKIP TO Q14
Greek or Russian Orthodox.....	03 → SKIP TO Q14
Jewish.....	04 → SKIP TO Q14
Muslim	05 → SKIP TO Q14
Hindu	06 → SKIP TO Q14
Not raised in any religion/atheist/agnostic.....	07 → SKIP TO Q14
Other (SPECIFY)_____	08 → SKIP TO Q14

13A. What specific denomination is that, if any?

Baptist 01
 Methodist 02
 Lutheran 03
 Presbyterian..... 04
 Episcopalian..... 05
 United Church of Christ (UCC) 06
 African Methodist Episcopal 07
 Other (SPECIFY) _____ 08

14. What is your native language?

English 01 → SKIP TO Q15
 Other (SPECIFY) _____ 02 → ASK A

14A. How well do you feel you speak English? Are you. . **CODE ONE ONLY.**

Very proficient 1
 Moderately proficient..... 2
 Not proficient..... 3

BOX A-3	DOES THE RESPONDENT SPEAK WITH A...
	HEAVY ACCENT.....1
	MODERATE ACCENT..... 2
	IMPERCEPTIBLE ACCENT..... 3

15. What language do you usually speak at home? **CODE ONE ONLY.**

English 01 → SKIP TO BOX A-4
 English and something else..... 02 → ASK A
 Something else 03 → ASK A

15A. What language is that? RECORD VERBATIM.

LANGUAGE _____

BOX A-4	SEE RESPONDENT'S PLACE OF BIRTH ON P.1. IF RESPONDENT. WAS BORN IN THE U.S. SKIP TO Q17, OTHERWISE ASK Q16.
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16. In what year did you first come to the United States to live?

19 / ____ / ____ /

BOX A-5	SKIP TO Q18
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17. From what countries or parts of the world did your ancestors come? IF NECESSARY, PROBE FOR AREA SMALLER THAN CONTINENT. RECORD UP TO THREE RESPONSES.

1ST MENTION: _____

2ND MENTION: _____

3RD MENTION: _____

18. How long have you lived in the Chicago area?

____ YEARS or ____ MONTHS

ALL MY LIFE 97

19. What is the name of the community or neighborhood in which you live?

COMMUNITY OR NEIGHBORHOOD: _____ / ____ / ____ /

20. How long have you lived in (READ NAME OF COMMUNITY OR NEIGHBORHOOD FROM Q19)?

____ YEARS or ____ MONTHS

ALL MY LIFE 97

SINCE: 19 / ____ / ____ /

ALL MY LIFE 97

21. Other than the business that we will be talking about, do you have any other ways of making money, such as other businesses, jobs, investments, or something else?

Yes 1 → ASK A

No 2 → SKIP TO Q22

21A. What are they? PROBE: IF RESPONDENT NAMES BUSINESS OR PENSION, ASK WHAT TYPE. IF R. NAMES GENERIC INVESTMENT, ASK IF STOCKS, BONDS, OR OTHER.

22. Altogether, counting all your work activities, how many hours do you work, per week, on the average?

/ ____ / ____ / ____ / HOURS PER WEEK

23. Why did you decide to go into business for yourself?

Now let me ask you about your father.

24. What was your father's main occupation when you were growing up at home? What exactly were his duties? PROBE FOR DETAIL.

BOX A-6	IF FATHER WAS DISABLED, CHRONICALLY UNEMPLOYED, OR HAD NO OCCUPATION SKIP TO SECTION B. OTHERWISE ASK A.
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24A. Was your father...

HAND CARD A-4	A wage or salary worker	01
	Self-employed	02
	A business owner	03
	Unpaid family worker	04
	Other (SPECIFY ON GRID).....	05

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SECTION B. ENTREPRENEURIAL DISPOSITION

Now, I have a few questions about how people think about some common problems.

1. How willing would you be to risk your house and all your possessions in borrowing money to start another business? Would you be... **CODE ONE ONLY.**

Not at all willing.....	1
Not very willing	2
Neither willing or unwilling.....	3
Somewhat willing.....	4
Very willing	5

2. How well does this statement fit you?: "I like challenges. Some of the best times in my life are when my heart beats faster and I am fighting to reach a difficult goal". **CODE ONE ONLY.**

It fits me exactly.....	1
It fits me quite well	2
It fits me somewhat	3
It fits me very little	4
It does not fit me at all.....	5

3. Suppose \$20,000 were suddenly to fall into your lap. For which one of the things on this card would you use most of the money? **CODE ONE ONLY**

HAND CARD B-1	Buy a new car	01
	Apply it towards a new house.....	02
	Buy land.....	03
	Put it in the bank	04
	Take a long vacation.....	05
	Donate to my church or favorite charity	06
	Share it with my friends.....	07
	Pay off debts	08
	Invest in a new or existing business.....	09
	Blow it	10
	Other (SPECIFY)_____	11

4. Some people who own a business spend most of their time thinking of ways to make it better. Other people who own a business feel it's more like a job and should be kept in its place. On this scale from 1 to 5, with 1 being to keep it in its place and 5 being to think about it all the time, please tell me which number fits you?

HAND CARD B-2	Keep business in its place					Think about business all the time.
	1	2	3	4	5	

BOX B-1	DID RESPONDENT...
	<p>GIVE ANSWER RIGHT AWAY?..... 1</p> <p>TAKE TIME TO ANSWER? 2</p>

SECTION C. BUSINESS HISTORY

1. Before we get started with questions about your business, could you briefly tell me the history of your own business activity in general and of the current business in particular. FOLLOW INSTRUCTIONS IN THE GUIDE.

SECTION D. LABOR ACTIVITY BEFORE THE CURRENT BUSINESS

1. Have you ever owned any companies --either in the U.S. or elsewhere-- before your current business?

Yes 1 → ASK A
 No..... 2 → SKIP TO Q6

- 1A. How many companies were those?

/ ___ / ___ / #OF BUSINESSES

	OLDEST	2ND OLDEST	3RD OLDEST
2. Please tell me about the (last three/ two) company/ies you owned before the current business. What were their names? (Please start with the oldest business)			
3. What products or services does/did the business provide?			
4. Where is/was the business located? RECORD EXACT ADDRESS/CITY/ STATE/COUNTRY.			
5. What happened to the business?	R sold it..... 1 R closed it 2 R still running it 3 Other (SPECIFY)..... 4 _____	R sold it 1 R closed it..... 2 R still running it..... 3 Other (SPECIFY) 4 _____	R sold it..... 1 R closed it 2 R still running it 3 Other (SPECIFY)..... 4 _____
5A. IS THERE ANOTHER BUSINESS TO ASK ABOUT?	Yes. 1 → BACK TO Q3 No .. 2 → GO TO Q6	Yes.. 1 → BACK TO Q3 No ... 2 → GO TO Q6	No 2 → GO TO Q6

6. Now think about the time right before you started, bought or became a partner in the current business. What were your activities at the times? **CODE ALL THAT APPLY.**

Self-employed in another business 01
 In-school 02
 Worked for someone else in similar business 03
 Worked for someone else in other business 04
 Worked for someone else or relative
 in current business 05
 Other (SPECIFY) _____ 06

BOX D-1	IF 03, 04 OR 05 IS CODED AT Q6, ASK Q7. OTHERWISE SKIP TO SECTION E, P. 17
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7. What was your relationship to the owner of the business?

8. What was the ethnic background of the owner? PROBE FOR NATIONAL ORIGIN.

9. Where was the business located?

CITY: _____

STATE: _____

COUNTRY: _____

BOX D-2	IF BUSINESS LOCATION WAS CHICAGO, ASK Q10. OTHERWISE, SKIP TO Q11.
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10. What was the nearest major intersection?

CORNER OF: _____

AND: _____

- 10A. What was the zip code there?

/ _ / _ / _ / _ / _ /

11. What was your job title in that business?

12. In that job, about how many other people did you supervise who reported directly to you?

/ ___/___/___/ NONE000

13. How long did you stay in that job!

/___/___/ AND /___/___/
YEARS MONTHS

14. In that job, did you acquire any of the skills you currently use in your business?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.E
I already had the skills 3 → SKIP TO SEC.E

14A. What are some of those skills you acquired at that job?

SECTION E. CURRENT BUSINESS: LOCATION AND STARTUP

Now I would like to ask you about your current business. (IF MORE THAN ONE CURRENT BUSINESS, READ: By "current business" I mean the most important or main business you currently own.)

1. What is the name of this business?

2. In what month and year did you start or acquire this business?

/ ____ / ____ / 19 ____ / ____ /
MONTH

3. How did you first acquire this business? Was it ...**READ AND CODE ONE ONLY.**

Bought or invested in 01 → ASK A
Started by you 02 → SKIP TO Q4
Inherited 03 → SKIP TO SEC.F
Given to you..... 04 → SKIP TO Q4
Or something else (SPECIFY _____) 05 → SKIP TO Q4

- 3A. How did you acquire or take over the business?

- 3B. How did you learn that this business was available?

4. Is this business a franchise?

Yes 1
No..... 2

5. How many locations, besides this one, does this business have?

/ ____ / ____ / ____ / ____ / **IF 0 LOCATIONS SKIP TO Q7**

6. Where are they located? IN CHICAGO, PROBE FOR NEAREST MAJOR INTERSECTION. ELSEWHERE, RECORD CITY AND STATE.

A. _____

B. _____

C. _____

7. How did you choose the location for this business?

8. What products or services does your business provide?

9. Are these the products and services this business has always provided?

Yes 1 → SKIP TO Q11

No..... 2 → ASK Q10

10. What services or products did this business use to provide?

11. Is your principal product or service oriented toward a specific ethnic group?

Yes 1 → ASK A

No..... 2 → SKIP TO Q12

- 11A. For which ethnic group are your products or services oriented?

12. Now I would like to ask you about the start-up capital you and your partners needed to begin this business. About how much money did you need for... ASK FOR A-G.

A. Rent	\$ _____
B. Equipment	\$ _____
C. Wages	\$ _____
D. Inventory	\$ _____
E. Other (SPECIFY) _____	\$ _____
F. Other (SPECIFY) _____	\$ _____
G. Other (SPECIFY) _____	\$ _____
TOTAL _____ \$	
(CARRY THE TOTAL TO END OF Q14)	

13. The figures you just gave me add up to (READ TTAL FROM Q 12). Is that about right?

Yes 1
No..... 2

14. How much of your start-up capital did you obtain from each of the following sources?

HAND CARD E-1	A. Loans
	A1. Bank loan..... \$ _____
	A2. Private lenders \$ _____
	A3. Mortgage..... \$ _____
	A4. Government program (SPECIFY) _____ \$ _____
	A5. Borrowed from immediate family (spouse, son, daughter, parents)..... \$ _____
	A6. Borrowed from other relatives (cousin, aunt, uncle)..... \$ _____
	A7. Borrowed from friends or business associates (informally)..... \$ _____
	A8. Supplier's credit..... \$ _____
	A9. Ethnic associations (SPECIFY) _____ \$ _____
A10. Other private sources (foundations)..... \$ _____	
B. Gifts	
B1. Gift from immediate family (spouse, son, daughter, parents)..... \$ _____	
B2. Gift from other relatives \$ _____	
B3. Gift from friends \$ _____	

C. Partner's Contribution \$ _____

D. Personal Resources

D1. Personal savings \$ _____

D2. Credit cards..... \$ _____

E. Others

E1. Investment from venture company..... \$ _____

E2. "Factoring company" \$ _____

E3. Others \$ _____

TOTAL \$ _____
(TOTAL FROM Q12)

BOX E-1	CHECK TOTAL AT Q12 AND AT Q14. IF DIFFERENCE IS MORE THAN 10%. REVIEW BOTH QUESTIONS WITH RESPONDENT AND CORRECT.
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BOX E-2	IF NO LOANS WERE OBTAINED, ASK Q15 OTHERWISE SKIP TO Q15C
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15. Did you **try** to get a loan or some type of financial assistance, when you started your **current** business?

Yes 1 → ASK A

No..... 2 → SKIP TO Q40

15A. What was the result of the request?

Granted..... 1 → ASK B

Turned down 2 → SKIP TO Q32

Other (SPECIFY) _____ 3 → ASK B

15B. What type of financial assistance did you get? Was it

A loan..... 1 → ASK C

A gift..... 2 → SKIP TO Q41

Other (SPECIFY) _____ 3

15C. For the loans you received, please give me a name or initial to refer to each of the three institutions or persons who provided you with most of the funds. RECORD NAME OF UP TO THREE LENDERS ON TOP LINE OF GRID ON NEXT PAGE. THEN ASK Q16 THROUGH Q24A FOR EACH LENDER

	LENDER #1 Name: _____	LENDER #2 Name: _____	LENDER #3 Name: _____
16. Why did you choose this source of funds?	_____ _____	_____ _____	_____ _____
17. Where is (LENDER) located? RECORD EXACT ADDRESS/CITY/ STATE/COUNTRY			
18. Was the person or institution you dealt with of your same ethnic group?	Yes..... 1 →SKIP TO Q19 No 2 →ASK A	Yes..... 1 →SKIP TO Q19 No 2 →ASK A	Yes1 →SKIP TO Q19 No2 →ASK A
18A. What is their ethnic background?	_____	_____	_____
19. Was that person or institution related to you or your family?	Yes..... 1 →ASK A No 2 →SKIP TO Q20	Yes..... 1 →ASK A No 2 →SKIP TO Q20	Yes1 →ASK A No2 →SKIP TO Q20
19A. How is that person related to you or your family?	_____	_____	_____
20. What was the rate of interest for your loan?	____ ____ % IF 00 ASK A, OTHERWISE SKIP TO Q21	____ ____ % IF 00 ASK A, OTHERWISE SKIP TO Q21	____ ____ % IF 00 ASK A, OTHERWISE SKIP TO Q21

20A. Why was the loan free of interest?	_____	_____	_____
21. Was a specific amount of time agreed upon to repay the loan?	Yes..... 1 →ASK A No 2 →SKIP TO Q22	Yes..... 1 →ASK A No 2 →SKIP TO Q22	Yes 1 →ASK A No 2 →SKIP TO Q22
21A. What was the length of time?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Years Months	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Years Months	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Years Months
22. Did you have to put something up against the loan or financial assistance?	Yes..... 1 →ASK A No 2 →SKIP TO Q23	Yes..... 1 →ASK A No 2 →SKIP TO Q23	Yes 1 →ASK A No 2 →SKIP TO Q23
22A. What was it?	_____	_____	_____
22B. What was its value?	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP
23. What was the amount of the loan?	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ROUND CENTS UP
24. Were there cosigners?	Yes..... 1 →ASK A No 2 →SKIP TO Q25	Yes..... 1 →ASK A No 2 →SKIP TO Q25	Yes 1 →ASK A No 2 →SKIP TO Q25
24A. How many cosigners did you have?	<input type="text"/> # of CO-SIGNERS	<input type="text"/> # of CO-SIGNERS	<input type="text"/> # of CO-SIGNERS
25. IS THERE ANOTHER LENDER TO ASK ABOUT?	Yes..... 1 →RETURN TO Q16 No 2 →GO TO BOX E-3	Yes..... 1 →RETURN TO Q16 No 2 →GO TO BOX E-3	No 2 →GO TO BOX E-3

BOX E-3	IF RESPONDENT HAD AT LEAST ONE CO-SIGNER, CONTINUE BELOW. OTHERWISE- SKIP TO BOX E-4.
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	CO-SIGNER #1	CO-SIGNER #2	CO-SIGNER #3
26. First please give me his/her first name or some other way in which I can refer to him/her.	_____	_____	_____
27. How is (CO-SIGNER) related to you	_____	_____	_____
28. Is (CO-SIGNER) of your same ethnic group?	Yes..... 1 →SKIP TO Q29 No 2 →ASK A	Yes..... 1 →SKIP TO Q29 No 2 →ASK A	Yes 1 →SKIP TO Q29 No 2 →ASK A
28A. What is his/her ethnic background?	_____	_____	_____
29. Where is she/he located? RECORD EXACT ADDRESS/CITY/ STATE/COUNTRY			
30. IS THERE ANOTHER CO-SIGNER TO ASK ABOUT?	Yes..... 1 →RETURN TO Q26 No 2 →GO TO BOX E-4	Yes..... 1 →RETURN TO Q26 No 2 →GO TO BOX E-4	No 2 →GO TO BOX E-4

BOX E-4	CONTINUE ON THE NEXT PAGE. WHENEVER POSSIBLE, ASK ABOUT CONTACT PERSON RATHER THAN THE INSTITUTION.
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Now I would like to ask you about the persons or institutions from which you tried to get financing.

31. Please tell me (again), during your startup phase, did you try to get a loan or some other type of financial assistance, but were turned down?

Yes..... 1 → ASK Q32

No 2 → SKIP TO Q41

	NON-LENDER #1	NON-LENDER #2	NON-LENDER #2
32. First, please give me the first name of each of those persons or institutions (or some other way in which I can refer to them).	_____	_____	_____
33. Why did you choose (PERSON OR INSTITUTION)?	_____	_____	_____
34. How is (PERSON/ INSTITUTION) related to you?	_____	_____	_____
35. Is (PERSON/ INSTITUTION) of your same ethnic group?	Yes 1 →SKIP TO Q36 No 2 →ASK A	Yes.....1 →SKIP TO Q36 No2 →ASK A	Yes.....1 →SKIP TO Q36 No2 →ASK A
35A. What is his/her ethnic background?	_____	_____	_____
36. Where is he/she located? RECORD EXACT ADDRESS/ CITY/ STATE/COUNTRY			

37. What was the amount you tried to get?	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP
38. Why was your request turned down?	_____ _____	_____ _____	_____ _____
39. IS THERE ANOTHER NON-LENDER TO ASK ABOUT?	Yes.....1 →RETURN TO Q33 No2 →SKIP TO Q41	Yes.....1 →RETURN TO Q33 No2 →SKIP TO Q41	Yes.....1 →RETURN TO Q33 No2 →SKIP TO Q41

40. Why did you not ask for financial assistance? _____

41. When you (started/brought) your business, what were the most serious difficulties you had to overcome? _____

42. Thinking back to the time when you were trying to start your current business, did you encounter any type of financial barriers?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.F

42 A. Please tell me about the kind of financial barriers you encountered.

SECTION F. PARTNERS

Now I have a few questions about the startup group for your current business.

1. Did you have any partners or investors when you started the current business?

Yes1 → ASK A

No2 → SKIP TO Q8

1A. How many partners or investors did you have? / ____ / ____ /

	STARTUP PARTNER #1	STARTUP PARTNER #2	STARTUP PARTNER #3	STARTUP PARTNER #4
2. Please give me the names of your 4 major partners, or some other way to refer to them.	_____	_____	_____	_____
3. How was (PARTNER) related to you?	_____	_____	_____	_____
3A. FOR NON-FAMILY: How did you find him/her?	_____	_____	_____	_____
4. Is (PARTNER) of your same ethnic group?	Yes 1 →SKIP TO Q5 No 2 →ASK A	Yes 1 →SKIP TO Q5 No 2 →ASK A	Yes 1 →SKIP TO Q5 No 2 →ASK A	Yes 1 →SKIP TO Q5 No 2 →ASK A
4A. What is his/her ethnic background?	_____	_____	_____	_____
5. What share of the business did (PARTNER) OWN?	____ ____ SHARE	____ ____ SHARE	____ ____ SHARE	____ ____ SHARE

6. Was (PARTNER) active in the business?	Yes 1 No..... 2	Yes..... 1 No.....2	Yes.....1 No2	Yes 1 No..... 2
6A. ANOTHER PARTNER TO ASK ABOUT?	Yes 1 →RETURN Q3 No..... 2	Yes.....1 →RETURN Q3 No.....2	Yes.....1 →RETURN Q3 No2	No..... 2

7. What percent of the business did you personally own when you began the business?

PERCENTAGE: / ____ / ____ / ____ / %

BOX F-1	SUM UP TOTAL OF SHARES IN Q5 ABOVE AND PERCENTAGE OWNED IN Q7. IF IT DOES NOT ADD TO 100%, MAKE THE RESPONDENT GO OVER IT AGAIN, UNLESS THERE ARE MORE THAN 4 PARTNERS.
----------------	--

8. Do you currently have any partners or investors?

Yes 1 → GO TO BOX F-2
No..... 2 → SKIP TO SEC.G

BOX F-2	TURN BACK TO P. 27. SHOW RESPONDENT LIST OF STARTUP PARTNERS AND READ QUESTION BELOW. IF NO PARTNERS AT STARTUP SKIP TO 9B.
----------------	--

9. Here (is/are) the partner(s) or investor(s) you had in the startup phase of your business. (Are/Is) **(all of)** your current partner(s) or investor(s) the same as those you had in that early phase?

Yes 1 → SKIP TO Q16
No..... 2 → ASK A

9A. Why are they no longer with you? _____

- 9B. How many partners or investors do you currently have?

/ ____ / ____ /

	NEW PARTNER #1	NEW PARTNER #2	NEW PARTNER #3	NEW PARTNER #4
10. Who are your 4 major new partners or investors? Please give me names or some other way I can refer to them.	_____	_____	_____	_____
11. How is PARTNER) related to you?	_____	_____	_____	_____
11A. IF NON-FAMILY: How did you find him/her?	_____	_____	_____	_____
12. Is (PARTNER) of your same ethnic group?	Yes 1 →SKIP TO Q13 No 2 →ASK A	Yes 1 →SKIP TO Q13 No 2 →ASK A	Yes 1 →SKIP TO Q13 No 2 →ASK A	Yes 1 →SKIP TO Q13 No 2 →ASK A
12A. What is his/her ethnic background?	_____	_____	_____	_____
13. What share of the business does (PARTNER) OWN?	____ ____ SHARE	____ ____ SHARE	____ ____ SHARE	____ ____ SHARE
14. Is (partner) active in the business?	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2
15. IS THERE ANOTHER NEW PARTNER TO ASK ABOUT?	Yes 1 RETURN TO Q11 No 2	Yes 1 RETURN TO Q11 No 2	Yes 1 RETURN TO Q11 No 2	No 2

16. What percent of the business do you yourself own now, under the current arrangement?

PERCENTAGE: / ____ / ____ / ____ /%

BOX F-4	SUM UP TOTAL OF SHARES IN Q13 ABOVE AND PERCENTAGE OWNED IN Q 16. IF IT DOES NOT ADD TO 100%, MAKE THE RESPONDENT GO OVER IT AGAIN, UNLESS THERE ARE MORE THAN 4 NEW PARTNERS.
----------------	---

17. Do you and your partner(s) or investors have some special way to divide the work?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.G

17A. How do you and your partner(s) or investor(s) divide the work?

RECORD VERBATIM.

SECTION G. USE OF CREDIT

BOX G-1	SEE Q2 IN SECTION E. IF BUSINESS WAS STARTED OR ACQUIRED LESS THAN TWO YEARS AGO, READ OPTION 1 BELOW. OTHERWISE READ OPTION 2.
----------------	--

1. **OPTION 1:** Since you started your business... **OPTION 2:** Within the last two years.....
have you **applied** for a loan for the business, even if you did not get it? Please do not include any startup loans you may have told me about already and disregard applications for general purpose credit cards.

Yes.....1 → ASK Q2
No2 → SKIP TO Q19

	LENDER #1	LENDER #2	LENDER #3
2. To which institutions or persons did you apply?	_____	_____	_____
3. Why did you choose (LENDER)?	_____ _____	_____ _____	_____ _____
4. WHERE IS (LENDER) located? RECORD EXACT ADDRESS/ CITY/STATE/COUNTRY			
5. Was the person or institution you dealt with of your ethnic group?	Yes.....1 → SKIP TO Q6 No2 → ASK A	Yes.....1 → SKIP TO Q6 No2 → ASK A	Yes1 → SKIP TO Q6 No.....2 → ASK A

5A. What was his/her ethnic background?	_____	_____	_____
6. How was that person related to you?	_____	_____	_____
7. For what purposes did you apply for the loan?	_____ _____	_____ _____	_____ _____
8. How much did you request?	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ _ ROUND CENTS UP
9. What was the result of the request?	Granted.....1 → ASK Q10 Denied.....2 → ASK A Other3 → SKIP TO Q14 _____	Granted.....1 → ASK Q10 Denied.....2 → ASK A Other3 → SKIP TO Q14 _____	Granted.....1 → ASK Q10 Denied.....2 → ASK A Other3 → SKIP TO Q14 _____
9A. Why did they turn down your request?	_____ _____	_____ _____	_____ _____
10. What was the rate of interest for your loan?	_ _ _ % IF 00 ASK A, OTHERWISE SKIP TO Q11	_ _ _ % IF 00 ASK A, OTHERWISE SKIP TO Q11	_ _ _ % IF 00 ASK A, OTHERWISE SKIP TO Q11
10A. Why was the loan free of interest?	_____	_____	_____
11. Was a specific amount of time agreed upon to repay the loan?	Yes1 → ASK Q11A No.....2 → SKIP TO Q12	Yes1 → ASK Q11A No2 → SKIP TO Q12	Yes1 → ASK Q11A No2 → SKIP TO Q12
11A. What was the length of time?	_ _ _ _ _ _ Years Months	_ _ _ _ _ _ Years Months	_ _ _ _ _ _ Years Months
12. Did you have to put something up as collateral?	Yes1 → ASK Q12A No.....2 → SKIP TO Q13	Yes1 → ASK Q12A No2 → SKIP TO Q13	Yes1 → ASK Q12A No2 → SKIP TO Q13

12A. What was it?	_____	_____	_____
12B. What was its value?	\$ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ ROUND CENTS UP	\$ _ _ _ _ _ _ _ ROUND CENTS UP
13. Were there co-signers?	Yes1 → ASK Q13A No2 → SKIP TO Q14	Yes1 → ASK Q13A No2 → SKIP TO Q14	Yes1 → ASK Q13A No2 → SKIP TO Q14
13A. How many co-signers did you have?	_ # Co-signers	_ # Co-signers	_ # Co-signers
14. IS THERE ANOTHER LENDER TO ASK ABOUT?	Yes1 → RETURN TO Q3 No2 → GO TO BOX G-2	Yes1 → RETURN TO Q3 No2 → GO TO BOX G-2	Yes1 → RETURN TO Q3 No2 → GO TO BOX G-2

BOX G-2	CONTINUE BELOW, IF RESPONDENT HAD AT LEAST ONE CO-SIGNER. OTHERWISE SKIP TO SECTION H.
----------------	---

For each co-signer, I will ask you a set of questions.

	CO-SIGNER #1	CO-SIGNER #2	CO-SIGNER #3
15. First, please give their first names or some other way in which I can refer to them.	_____	_____	_____
16. How is (CO-SIGNER) related to you?	_____	_____	_____
17. Is (CO-SIGNER) of your same ethnicity?	Yes1 → SKIP TO 18 No2 → ASK A	Yes1 → SKIP TO 18 No2 → ASK A	Yes1 → SKIP TO 18 No2 → ASK A
17A. What is his/her ethnic background?	_____	_____	_____

18. Where is he/she located? RECORD EXACT ADDRESS/CITY/STATE/ COUNTRY)			
19. IS THERE ANOTHER CO- SIGNER TO ASK ABOUT?	Yes 1 → RETURN TO Q16 No 2 → GO TO Q20	Yes 1 → RETURN TO Q16 No 2 → GO TO Q20	Yes 1 → RETURN TO Q16 No 2 → GO TO Q20

20. Have you used credit cards to finance business purchases?

Yes 1 → ASK A
No 2 → SKIP TO SEC.H

20A. What was the amount financed?

\$
ROUND UP CENTS

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SECTION H. FAMILY MEMBERS' LABOR ACTIVITY

1. During the first year of the **current** business did **you** or members of your **immediate family**, living in your **household** have other ways of earning money outside of your business?

Yes.....1 → ASK Q2

No2 → SKIP TO Q5

	NAME #1	NAME #2	NAME #3	NAME #4
2. Which members of the family were they? Please give me their first names	SELF	_____	_____	_____
3. How is (NAME) related to you?	SELF	_____	_____	_____
4. How did (NAME) make money?	SELF	_____	_____	_____

	NAME #5	NAME #6	NAME #7	NAME #8
2. Which members of the family were they? Please give me their first names	_____	_____	_____	_____
3. How is (NAME) related to you?	_____	_____	_____	_____
4. How did (NAME) make money?	_____	_____	_____	_____

5. Do family members work in your business now?

Yes 1 → SKIP TO Q7

No..... 2 → ASK A

5A. Why not?

6. About how many hours per week do you work in the business?

/ ___ / ___ / ___ /
HRS/WEEK

BOX H-1	SKIP TO Q13
----------------	--------------------

	NAME #1	NAME #2	NAME #3	NAME #4
7. Please give me the names of all family members who work in the business now .	RESP. _____	_____ _____	_____ _____	_____ _____
8. How is (NAME) related to you?	SELF _____	_____ _____	_____ _____	_____ _____
9. What are (your/NAME's) duties in the business?	_____ _____ _____	_____ _____ _____	_____ _____ _____	_____ _____ _____
10. About how many hours per week [do you/does (NAME)] work in the business?	____ ____ ____ HRS/WEEK	____ ____ ____ HRS/WEEK	____ ____ ____ HRS/WEEK	____ ____ ____ HRS/WEEK
11. [Do you/does (NAME)] get paid for that work?	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2
12. IS THERE ANOTHER FAMILY MEMBER TO ASK ABOUT?	Yes 1 → ASK Q8 No 2 → ASK Q13	Yes 1 → ASK Q8 No 2 → ASK Q13	Yes 1 → ASK Q8 No 2 → ASK Q13	No 2 → ASK Q13

13. Do you have any foreign-born immediate relatives living outside the U.S.?

Yes 1 → ASK A
No..... 2 → SKIP TO Q14

13A. Have any of them come from their home country and are working here in your business?

Yes 1 → ASK B
No..... 2 → SKIP TO Q14

13B. Who was that?

13C. Do you plan to bring members of your family from their home country to work in your business?

Yes 1
No..... 2
Other (SPECIFY) _____ 3

14. In addition to those already mentioned, do you have any relatives or friends who help out in your business on a regular basis without pay?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.I

14A. How many people is that?

/ ____ / ____ /

14B. On the average, how often do they come?

Every day 01
A few times a week..... 02
Once a week..... 03
A few times a month..... 04
Once a month..... 05
Other (SPECIFY) _____ 06

SECTION I. EMPLOYEES

Now I'd like to ask you about your employees.

1. Do you currently have in your business any full-time , part time, or temporary **non-family** employees?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.J

- 1A. Approximately how many full-time, part-time, or temporary **non-family** employees do you currently have in your business?

/ ____ / ____ / ____ /

2. How many of your current employees are.....

A. Full-time..... / ____ / ____ / ____ /
B. Part-time..... / ____ / ____ / ____ /
C. Temporary..... / ____ / ____ / ____ /

3. How many of your employees are....

A. Black or African-American..... / ____ / ____ / ____ /
B. White..... / ____ / ____ / ____ /
C. Mexican..... / ____ / ____ / ____ /
D. Puerto Rican..... / ____ / ____ / ____ /
E. Other Hispanic or Latino (SPECIFY)
_____ / ____ / ____ / ____ /
F. Korean..... / ____ / ____ / ____ /
G. Chinese..... / ____ / ____ / ____ /
H. Filipino..... / ____ / ____ / ____ /
I. Other Asian (SPECIFY)
_____ / ____ / ____ / ____ /
J. Native American..... / ____ / ____ / ____ /
K. Polish..... / ____ / ____ / ____ /
L. Other Eastern European..... / ____ / ____ / ____ /
M. Other (SPECIFY)
_____ / ____ / ____ / ____ /

BOX I-1

CHECK Q1A ABOVE. IF RESPONDENT HAS AT LEAST 3 EMPLOYEES, GO TO BOX I-2. IF RESPONDENT HAS LESS THAN 3 EMPLOYEES, SKIP TO Q6.

BOX I-2	<p>IF AT LEAST HALF OF THE EMPLOYEES BELONG TO THE OWNER'S ETHNIC GROUP, GO TO Q4.</p> <p>IF AT LEAST HALF OF THE EMPLOYEES BELONG TO A SINGLE ETHNIC GROUP THAT IS NOT THE SAME AS THE OWNER'S SKIP TO Q5.</p> <p>IF HALF THE EMPLOYEES BELONG TO THE OWNER'S ETHNIC GROUP AND HALF BELONG TO A SINGLE OTHER ETHNIC GROUP, GO TO Q4.</p> <p>OTHERWISE, SKIP TO Q6.</p>
----------------	---

4. Which of the reasons on this card explain why most of your employees are (RESPONDENT'S ETHNICITY)? CODE ALL THAT APPLY.

<p>HAND CARD I-1</p>	<p>They can be hired for less wages 01</p> <p>They establish rapport with my clients 02</p> <p>They bring job specific skills that I need 03</p> <p>They are the main applicants 04</p> <p>They are less expensive than non-minority workers..... 05</p> <p>Other (SPECIFY) 06</p>
------------------------------	--

BOX I-3	SKIP TO Q6
----------------	-------------------

5. Why are most of your employees (ETHNICITY FROM Q3)? CODE ALL THAT APPLY.

<p>HAND CARD I-1</p>	<p>They can be hired for less wages 01</p> <p>They establish rapport with my clients 02</p> <p>They bring job specific skills that I need 03</p> <p>They are the main applicants 04</p> <p>They are less expensive than non-minority workers..... 05</p> <p>Other (SPECIFY) 06</p>
------------------------------	--

6. Do most of your employees live in the neighborhood where your business is located?

Yes 1 → SKIP TO Q7

No..... 2 → ASK A

- 6A. In general, do they all live pretty much in the same area?

Yes 1 → SKIP TO Q7

No..... 2 → ASK B

6B. Approximately where do they live? PROBE FOR NEAREST MAJOR INTERSECTION.

7. How do you usually recruit workers? CODE ALL THAT APPLY.

HAND CARD I-2	Recommendations from other workers	01
	Recommendations from relatives	02
	Recommendations from customers	03
	Recommendations from suppliers.....	04
	Ads	05
	Walk-ins off the street.....	06
	Public agencies.....	07
	Private agencies	08
	Other (SPECIFY).....	09

8. Why do you recruit that way? ASK FOR THE TWO METHODS RESPONDENT. USES MOST FREQUENTLY.

9. How long does it take for your average employee to be ready to do the job him or herself?

- A. / ___ / ___ / DAYS
- B. / ___ / ___ / MONTHS
- C. / ___ / ___ / YEARS

BOX I-4	CHECK Q2, SECTION E, ON P. 17. IF BUSINESS WAS ACQUIRED TWO YEARS AGO OR EARLIER, ASK Q10. OTHERWISE SKIP TO Q11
----------------	---

10. On the average how long does a worker remain employed here?

/ / /
YEARS MONTHS

11. Among workers who leave, if any, what is the major reason for leaving?

12. As far as you know, have any former employees subsequently opened their own business?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.J

12A. What type of businesses did they open?

TYPE OF BUSINESS
DON'T KNOW 98

12B. Did you assist them in any way?

Yes 1 → ASK C
No..... 2 → SKIP TO SEC.J

12C. How did you assist them?

SECTION J. USE OF SERVICES

Many businesses make use of an array of services to carry out their affairs. We are now interested in knowing if you or your business employ, or depend upon, any of the following professional or business services. ASK QS. BELOW FOCUSING ON CONTACT PERSON AT INSTITUTION.

	Accountant	Attorney	Insurance Agent	Janitorial Service	Other (SPECIFY)
1. Does your business use the services of a (SERVICE SUPPLIER)? ASK FOR EACH SERV. SUPP., THEN ASK Q2-5. FOR "YES"s.	Yes 1 No..... 2	Yes 1 No..... 2	Yes 1 No 2	Yes 1 No..... 2	Yes 1 No..... 2
2. Where is (Service Supplier) located? RECORD EXACT ADDRESS/CITY/ STATE/COUNTRY					
3. Was the person from (SERVICE SUPPLIER) you dealt with of your ethnic group?	Yes1 → ASK Q4 No.....2 → ASK A	Yes 1 → ASK Q4 No..... 2 → ASK A	Yes 1 → ASK Q4 No 2 → ASK A	Yes 1 → ASK Q4 No..... 2 → ASK A	Yes 1 → ASK Q4 No..... 2 → ASK A
3A. What is his/her ethnic background?	_____	_____	_____	_____	_____

4. How is that person related to you?	_____	_____	_____	_____	_____
4A. IF NON-FAMILY: How did you find him/her?	_____	_____	_____	_____	_____
5. How long have you relied on the services of (SERVICE SUPPLIER)?	/ ____ / ____ / MOS. / ____ / ____ / YRS. GO TO NEXT SERV.SUPP.	/ ____ / ____ / MOS. / ____ / ____ / YRS. GO TO NEXT SERV.SUPP.	/ ____ / ____ / MOS. / ____ / ____ / YRS. GO TO NEXT SERV.SUPP.	/ ____ / ____ / MOS. / ____ / ____ / YRS. GO TO NEXT SERV.SUPP.	/ ____ / ____ / MOS. / ____ / ____ / YRS. GO TO BOX J-1

BOX J-1	<p>IF AT LEAST TWO SERVICE SUPPLIERS ARE OF THE SAME ETHNIC GROUP AS OWNER, CONTINUE BELOW.</p> <p>IF AT LEAST TWO SERVICE SUPPLIERS BELONG TO ONE SAME ETHNIC GROUP OTHER THAN THE OWNER'S, SKIP TO Q6B.</p> <p>IF AT LEAST TWO SERVICE SUPPLIERS BELONG TO THE OWNER'S ETHNIC GROUP AND AT LEAST TWO BELONG TO A SINGLE OTHER ETHNIC GROUP, CONTINUE BELOW</p> <p>OTHERWISE, SKIP TO SECTION K</p>
----------------	--

6. So you are using the services of some providers that are from your same ethnic background. In general, do you employ professional and business services of your own ethnic background?

Yes 1
No..... 2

- 6A. Why do you (not) employ professional and business services of (RESPONDENT'S ETHNICITY) origin?

BOX J-2	SKIP TO SECTION K, P. 48
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- 6B. Why do you employ professional and business services of (ETHNICITY IDENTIFIED IN Q3A, P. 45)?

- 6C. Are there any (RESPONDENT'S ETHNIC GROUP) (accountants/attorneys/insurance companies) available?

Yes 1 → ASK D
No..... 2 → SKIP TO SEC.K

- 6D. What are the reasons why you do not use them?

SECTION K. SUPPLIERS

Now I would like to ask you about your suppliers. **ASK Q1. RECORD UP TO THREE SUPPLIERS, THEN ASK Q2 THROUGH 10 FOR EACH ONE. IF SUPPLIER IS LARGE FIRM, FOCUS ON CHARACTERISTICS OF CONTACT PERSON.**

1. Who are your three major suppliers of goods? Please tell me their names.	SUPPLIER #1 _____	SUPPLIER #2 _____	SUPPLIER #3 _____
2. Where is (SUPPLIER) located? (RECORD ADDRESS/CITY/ STATE/COUNTRY)	_____ _____	_____ _____	_____ _____
3. Was the person from (SUPPLIER) you dealt with of your ethnic group	Yes..... 1 → SKIP TO Q4 No..... 2 → ASK A	Yes..... 1 → SKIP TO Q4 No..... 2 → ASK A	Yes 1 → SKIP TO Q4 No 2 → ASK A
3A. What is his/her ethnic background?	_____	_____	_____
4. How is that person related to you?	_____	_____	_____
4A. How did you find him/her?	_____ _____	_____ _____	_____ _____
5. How long have you relied on the services of (SUPPLIER)?	_____ MONTHS _____ YEARS	_____ MONTHS _____ YEARS	_____ MONTHS _____ YEARS

6. Does (SUPPLIER) provide merchandise or equipment on credit?	Yes..... 1 → ASK A No..... 2 → SKIP TO Q9	Yes..... 1 → ASK A No..... 2 → SKIP TO Q9	Yes 1 → ASK A No 2 → SKIP TO Q9
6A. How much do you presently owe (SUPPLIER)?	\$ _____ GO TO Q7	\$ _____ GO TO Q7	\$ _____ GO TO Q7
7. Under which terms does (SUPPLIER) provide credit?	_____ _____	_____ _____	_____ _____
7A. What is the interest rate?	_____ %	_____ %	_____ %
7B. What is the term of the loan?	_____ DAYS _____ MONTHS	_____ DAYS _____ MONTHS	_____ DAYS _____ MONTHS
8. What are the terms if you exceed the time limit?	_____ _____	_____ _____	_____ _____
9. Does (SUPPLIER) loan you money not necessarily for supplies?	Yes..... 1 → ASK A No..... 2 → SKIP TO Q10	Yes..... 1 → ASK A No..... 2 → SKIP TO Q10	Yes 1 → ASK A No 2 → SKIP TO Q10
9A. How much money does (SUPPLIER) loan to you?	\$ _____	\$ _____	\$ _____

9B. Under which terms does (SUPPLIER) provide credit?	_____	_____	_____
9C. What is the interest rate?	_____ %	_____ %	_____ %
9D. What is the term of the loan?	_____ DAYS _____ MOS	_____ DAYS _____ MOS	_____ DAYS _____ MOS
9E. What are the terms if you exceed the time limit?	_____ _____	_____ _____	_____ _____
10. IS THERE ANOTHER SUPPLIER TO ASK ABOUT?	Yes..... 1 → ASK Q2 No..... 2 → GO TO BOX K-1	Yes..... 1 → ASK Q2 No..... 2 → GO TO BOX K-1	No2 → GO TO BOX K-1

BOX K-1	<p>CHECK Q3 ABOVE. IF AT LEAST TWO SUPPLIERS ARE OF THE SAME ETHNIC GROUP AS THE OWNER, ASK Q11.</p> <p>IF AT LEAST TWO SUPPLIERS BELONG TO ONE SAME ETHNIC GROUP, OTHER THAN THE OWNER'S, SKIP TO Q11B.</p> <p>OTHERWISE, SKIP TO SECTION L.</p>
----------------	--

11. I noticed (some/all) of your suppliers are (RESPONDENT'S ETHNICITY). In general, do you work with suppliers of your own ethnic group?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.L

11A. Why do you work with suppliers of you own ethnic group?

BOX K-2	SKIP TO SECTION L
----------------	--------------------------

11B. Why do you work with suppliers of (ETHNICITY FROM Q3A ABOVE)?

SECTION L. CREDITORS

1. At present, do you have any creditors or people to whom you owe money, other than your suppliers?

Yes..... 1 → ASK Q2

No 2 → SKIP TO SEC.M

2. Who are your three major creditors? Please give me their names or some other way I can refer to them. RECORD NAMES OF UP TO 3 CREDITORS THEN ASK QS. 3-8 FOR EACH.	CREDITOR #1 _____	CREDITOR #2 _____	CREDITOR #3 _____
3. Is (CREDITOR) related to you?	Yes 1 → ASK A No 2 → SKIP TO Q4	Yes..... 1 → ASK A No 2 → SKIP TO Q4	Yes 1 → ASK A No 2 → SKIP TO Q4
3A. How is (CREDITOR) related to you?	_____	_____	_____
4. Is (CREDITOR) of your same ethnic group?	Yes 1 → SKIP TO Q5 No 2 → ASK A	Yes..... 1 → SKIP TO Q5 No 2 → ASK A	Yes..... 1 → SKIP TO Q5 No 2 → ASK A
4A. What is his ethnic background?	_____	_____	_____
5. Where is he/she located? (RECORD ADDRESS/CITY/ STATE/COUNTRY)			
6. How long have you relied on (CREDITOR)?	_____ YEARS & MONTHS	_____ YEARS & MONTHS	_____ YEARS & MONTHS

6A. IS THERE AN-OTHER CREDITOR TO ASK ABOUT?	Yes 1 → ASK Q3 No.....2 → GO TO Q7	Yes.....1 → ASK Q3 No.....2 → GO TO Q7	No 2 → GO TO Q7
--	---	---	-----------------------

7. Do any of these creditors play a role in your current business?

Yes..... 1 → ASK Q8

No 2 → SKIP TO SEC.M

8. Which of them play a role in the business?
RECORD NAMES BELOW.

9. And what role does (CREDITOR) play? RECORD BELOW.

A. NAME: _____ →

ROLE: _____

B. NAME: _____ →

ROLE: _____

C. NAME: _____ →

ROLE: _____

SECTION M. ORGANIZATIONAL PARTICIPATION - USE OF INSTITUTIONAL SERVICES

1. Do you belong to any associations of business people such as chambers of commerce or trade associations for people in the same business as you?

Yes..... 1 → ASK Q2

No 2 → SKIP TO Q7

2. For each association you belong to I'll ask a set of questions. Can you tell me their names? RECORD UP TO 3 NAMES, THEN ASK QS. 3 TO 6A FOR EACH.	ASSOC. #1 _____	ASSOC. #2 _____	ASSOC. #3 _____
3. Where is (ASSOC.) located? (RECORD ADDRESS/CITY/STATE/COUNTRY)			
4. To what ethnic group do most of (ASSOC.)'s members belong to? PROBE FOR SPEC. ETHNIC GROUP	_____	_____	_____
5. What type of programs or services does (ASSOCIATION) provide?	_____ _____	_____ _____	_____ _____
6. Which of those did you use?	_____	_____	_____
6A. IS THERE ANOTHER ASSOC. TO ASK ABOUT?	Yes..... 1 → ASK Q3 No 2 → GO TO Q8	Yes..... 1 → ASK Q3 No 2 → GO TO Q8	No 2 → GO TO Q8

7. Is there any reason why you do not belong to associations of business people?

8. Do you know about any programs or services designed to help business owners?

Yes 1 → ASK A
 No..... 2 → SKIP TO SEC.N, P. 57

8A. What are they?

8B. Did you use any of these programs or services?

Yes 1 → ASK Q9
 No..... 2 → SKIP TO Q11

9. Please tell me the name of the center, agency, or institution whose programs or services you used. RECORD UP TO 3 NAMES, THEN ASK A-C.	PROG/SERV #1 <hr/>	PROG/SERV #2 <hr/>	PROG/SERV #3 <hr/>
9A. Where is it located? RECORD EXACT ADDRESS/CITY/ STATE/COUNTRY			
9B. What did they do for you?	<hr/>	<hr/>	<hr/>
9C. How would you rate this assistance? Would you say it was...	Extremely helpful.....1 Very helpful2 Somewhat helpful.....3 Neutral.....4 Somewhat harmful5 Very harmful6 Extremely harmful7	Extremely helpful.....1 Very helpful2 Somewhat helpful.....3 Neutral.....4 Somewhat harmful5 Very harmful6 Extremely harmful7	Extremely helpful.....1 Very helpful2 Somewhat helpful.....3 Neutral.....4 Somewhat harmful5 Very harmful6 Extremely harmful7
10. IS THERE ANOTHER PROG./ SERV. TO ASK ABOUT?	Yes 1 → ASK 9A No. 2 → GO TO SEC. N	Yes 1 → ASK 9A No. 2 → GO TO SEC. N	No. 2 → GO TO SEC. N

11. Why did you not use the services?

SECTION N. SOCIAL NETWORKS IN DOING BUSINESS

In this next set of questions, we want to know how business people get their information. For example, business people may talk to their spouses, loan officers, neighbors, lawyers, accountants, fellow church-members, and so forth, depending on what they want to know and whom they trust.

1. When you first started or got involved in your current business, what types of people did you talk to about starting this business? (**PROBE:** Did you talk to relatives or friends?)

We are interested in asking you about the three people with whom you had the most contact in that regard.

2. Can you tell me their first name(s)? RECORD UP TO 3 NAMES, THEN ASK QS. 3-8 FOR EACH.	PERSON #1 _____	PERSON #2 _____	PERSON #3 _____
3. How is (PERSON) related to you?	_____	_____	_____
4. IF NON-FAMILY: How did you find him/her?	_____	_____	_____
5. Is (PERSON) of your same ethnic group?	Yes.....1 → SKIP TO Q6 No.....2 → ASK A	Yes.....1 → SKIP TO Q6 No.....2 → ASK A	Yes.....1 → SKIP TO Q6 No.....2 → ASK A
5A. What is his/her ethnic background?	_____	_____	_____
6. Where is he/she located? (RECORD ADDRESS/ CITY/STATE/ COUNTRY)	_____	_____	_____
7. What did you talk about?	_____ _____	_____ _____	_____ _____
8. Where did you meet to talk?	_____ _____ BACK TO Q3	_____ _____ BACK TO Q3	_____ _____ GO TO Q9

9. At present, is there a group of business owners with whom you talk regularly about business issues?

Yes 1 → ASK A
 No..... 2 → SKIP TO SEC.O

9A. How many are they? _____

9B. How often do you talk with these people about business?

Every day 1
 A few times a week..... 2
 Once a week..... 3
 A few times a month 4
 Once a month 5
 Other (SPECIFY) _____ 6

10. Please tell me the names of the three you most frequently talk to. RECORD UP TO 3 NAMES, THEN ASK QS. 11-16 FOR EACH.	PERSON #1 _____	PERSON #2 _____	PERSON #3 _____
11. How is (NAME) related to you?	_____	_____	_____
11A. IF NON-FAMILY: How did you find him/her?	_____	_____	_____
12. Is (NAME) of your same ethnic group?	Yes..... 1 → SKIP TO Q13 No..... 2 → ASK A	Yes 1 → SKIP TO Q13 No..... 2 → ASK A	Yes1 → SKIP TO Q13 No2 → ASK A
12A. What is his/her ethnic background?	_____	_____	_____
13. Where is he/she located? (RECORD ADDRESS/ CITY/ STATE/COUNTRY)			
14. What did you talk about?	_____	_____	_____

15. Where did you meet to talk?	_____	_____	_____
16. ANOTHER PERSON?	Yes..1 → ASK Q11 No...2 → GO TO SEC.O	Yes .1 → ASK Q11 No...2 → GO TO SEC.O	Yes .1 → ASK Q11 No ..2 → GO TO SEC.O

SECTION O. CLIENTS

Let us talk about your clients and customers.

1. Who are your primary clients?

Consumers..... 1
 Private businesses 2
 Government..... 3
 Not-for-profit organizations..... 4
 Other (SPECIFY)..... 5

2. What percent of your clients or customers is...

A. Black or African-American..... %
 B. White %
 C. Mexican..... %
 D. Puerto Rican..... %
 E. Other Hispanic or Latino
 (SPECIFY.....) %
 F. Korean..... %
 G. Chinese..... %
 H. Filipino..... %
 I. Other Asian
 (SPECIFY.....) %
 J. Native American..... %
 K. Polish %
 L. Other Eastern European..... %
 M. Other
 (SPECIFY.....) %
TOTAL: %

BOX O-1	ADD Q2 PERCENTAGES. IF TOTAL IS NOT 100%, ASK RESPONDENT TO ADJUST PERCENTAGES.
----------------	--

3. To what extent is the profitability of your business dependent on income levels in your community?
 Would you say it is...

Very dependent 1
 Moderately dependent..... 2
 Somewhat dependent 3
 Not very dependent..... 4
 Not dependent at all 5

4. Do you provide credit to your customers?

Yes 1 → ASK A
No 2 → SKIP TO SEC.P

4A. How do you decide to whom you give credit?

4B. Under what terms do you usually provide credit?

4C. What is the rate of interest you usually charge?

_____ %

4D. What is typically the term of the loan?

MONTHS YEARS

SECTION P. PROBLEMS THE BUSINESS FACES

1. What are the biggest problems your business faces? **CODE ALL THAT APPLY.**

HAND CARD P-1	Cash flow	01
	Decreasing sales volume	02
	Increasing sales volume	03
	Managing rising overhead.....	04
	Managing growth	05
	Affordable employee benefits	06
	Recruitment/retention of qualified employees	07
	Increasing competition	08
	Profits too low	09
	Insufficient sales volume	10
	Other (SPECIFY).....	11

2. What are the major barriers to the growth of your business? **CODE ALL THAT APPLY.**

HAND CARD P-2	Poor demand	1
	Availability of workers	2
	Government regulation	3
	Employee benefits.....	4
	Access to credit	5
	Other (SPECIFY).....	6

3. Is financing an obstacle to expansion?

Yes 1 → ASK A
No..... 2 → SKIP TO SEC.Q

3A. Why is that?

SECTION Q. FUTURE PLANS

Let us talk about the future now.

1. Do you have any specific plans for making this business grow in the next 2-3 years? **CODE ONE ONLY.**

Yes 1 → ASK A
No..... 2 → SKIP TO Q2

- 1A. What kinds of things do you plan to do to make your business grow? (**PROBE:** What else?)

2. As you think ahead to your retirement years, would you like a member of your family to assume ownership of the business when you retire?

Yes 1 → SKIP TO B
No..... 2 → SKIP TO C
It is up to him/her 3 → ASK A
Doesn't plan to retire 4 → SKIP TO SEC.R

- 2A. Would you be happier if he/she assumes ownership of the business, or would you prefer for him to do something else instead?

Prefer that he/she assume ownership 1 → SKIP TO B
Prefer that he/she do something else..... 2 → SKIP TO C
It is up to him/her 3 → SKIP TO Q3

- 2B. Why?

SKIP TO Q3

- 2C. Why not? _____

3. Thinking ahead to your retirement years, what are your plans for retirement?

4. Where do you plan to live after you retire? _____

SECTION R. SALES AND MONEY

Now I have some questions about your business. **[IF BUSINESS BEGAN IN 1997, SKIP TO Q3]**

1. Thinking back to 1996, please give me your **total** sales for the year, from January through December (including all establishments).

1996: \$ _____

BOX R-1	SEE Q2, SECTION E, ON P. 17. IF BUSINESS STARTED IN 1996 OR 1997, SKIP TO Q3. OTHERWISE ASK Q2
----------------	---

2. Going further back now, please give me your **total** sales for 1995, from January through December (including all establishments).

1995: \$ _____

3. How about now? Is the value of gross sales approximately the same month to month?

Yes 1
No 2

4. Do you own or rent the space where your business is located?

Own 1 → SKIP TO Q5, P. 65
Rent 2 → ASK A

- 4A. Is the landlord related to you or your family members?

Yes 1 → ASK B
No 2 → ASK C

- 4B. How is he/she related to you?

- 4C. Is the landlord (RESPONDENT'S ETHNICITY)?

Yes 1 → SKIP TO Q5
No 2 → ASK D

- 4D. What is his/her ethnic background?

5. Now I would like to ask you about the expenses of doing business. Approximately how much did you spend in 1997 on **monthly** basis on each of the following things. **IF NECESSARY**: Just your best estimate will do. **PROBE**: Is that by month, quarterly, by week, or what?

		TIME UNIT	
HAND CARD R-1	A. Purchased goods	\$ _____	_____
	B. Rent (buildings)	\$ _____	_____
	C. Utilities	\$ _____	_____
	D. Insurance	\$ _____	_____
	E. Transportation (includes maintenance, parking)	\$ _____	_____
	F. Wages for workers (payroll)	\$ _____	_____
	G. Owner's salary (not profits)	\$ _____	_____
	H. Interest on loans and bank charges	\$ _____	_____
	I. Equipment rental	\$ _____	_____
	J. Property taxes and fees	\$ _____	_____
	K. Office supplies	\$ _____	_____
	L. Telephone	\$ _____	_____
	M. Advertising	\$ _____	_____
	N. Legal and professional fees	\$ _____	_____
	O. Licensing fees	\$ _____	_____
	P. Maintenance and repair	\$ _____	_____
	Q. Workman's employment benefits	\$ _____	_____
	R. Social security	\$ _____	_____
	S. Other (SPECIFY)	\$ _____	_____
TOTAL		\$ _____	_____

6. Does your business make regular contributions to charities or other worthy causes?

Yes 1 → ASK A
 No 2 → SKIP TO Q7

A. Please tell me to which charities did your business contribute in 1996. [1997 IF NEW BUSINESS]	B. Approximately how much did you contribute to each?
1)	\$
2)	\$
3)	\$

[IF BUSINESS BEGAN IN 1997, SKIP TO Q10]

7. Thinking about 1996 again, what were the business' net profits (beyond owner's salary) last year?

1996: \$ _____ ASK Q8

LOSS/NO PROFIT.....9999999 → ASK Q7A

7A. What was the business' loss last year?

1996: \$ _____

8. What did you do with your profits?

BOX R-2	IF BUSINESS STARTED IN 1996, SKIP TO Q10. OTHERWISE, ASK Q-9.
----------------	--

9. Going back to 1995, what were the business' net profits (beyond owner's salary) for that year?

1995: \$ _____

10. At the present time, what do you estimate are your business' total assets?

\$ _____

11. What share of your current assets are...

	Value check	Percent/share
A. Inventory	_____	____%
B. Physical equipment	_____	____%
C. Property (real estate)	_____	____%
D. People who owe you money	_____	____%
E. Checking and savings accounts	_____	____%
F. Loans to others	_____	____%
G. Other (SPECIFY) _____	_____	____%
TOTAL:	_____	100%

BOX R-3	IF TOTAL VALUE CHECK IN Q11 EQUALS THE TOTAL BUSINESS ASSETS IN Q10, CONTINUE. OTHERWISE, HAVE RESPONDENT GO OVER IT AGAIN.
----------------	--

12. At the present time, what do you estimate are your business' total liabilities?

\$ _____
[IF ZERO, SKIP TO SECTION S, P. 68]

13. What share of your liabilities are...(ASK FOR A-C)? IF NECESSARY, PROBE: Could you give me an estimated average?

	Value check	Percent/share
A. Accounts payable	_____	____%
B. Other loans	_____	____%
C. Other (SPECIFY) _____	_____	____%
TOTAL:	_____	100%

BOX R-4	IF TOTAL VALUE IN Q13 EQUALS THE TOTAL BUSINESS LIABILITIES IN Q12, CONTINUE. OTHERWISE, HAVE RESPONDENT GO OVER IT AGAIN.
----------------	---

SECTION S. INCOME FLUCTUATIONS

1. Please think about the three largest bank accounts this business has. For each of these three accounts, please give me the name of the financial institution and the location.

	INSTITUTION	LOCATION (RECORD ADDRESS/ CITY/STATE/COUNTRY)
1		
2		
3		

HAS NO ACCOUNT..... 9

BOX S-1	SEE Q2, SECTION E, P. 17. IF BUSINESS STARTED AT LEAST 3 YEARS AGO, ASK Q2. OTHERWISE, SKIP TO SECTION T.
----------------	--

2. Every business has periods when business is so bad that the business is in danger of failing. Have you had that kind of experience in the last 3 years?

Yes 1 → ASK A
 No..... 2 → SKIP TO Q22, P. 72

2A. In what year was that? 19 _____

3. What was the nature of the problem?

4. How does your business cope with this kind of situation?

5. Let me review some examples of what others have done. Which of these have you done? CODE ALL THAT APPLY.

- Borrow more 01
- Got gifts or other assistance 02
- Got credit from suppliers 03
- Used cash from suppliers 04
- Sold assets, equipment 05
- Reduce input expenses 06
- Laid-off employees 07
- Work harder/increase hours 08
- Got other job to tied over 09
- Put other family members to work 10
- Reduced household consumption expenditures 11
- Delayed or failed to pay debts 12
- Increased credit card balance 13
- Other (SPECIFY) 14

BOX S-2	IF ANSWER 01, 02, OR 03 IS CODED IN Q5 ABOVE, CONTINUE BELOW. OTHERWISE SKIP TO Q22, P. 72
----------------	---

6. You indicated you sought assistance. To which institution or individual person did you apply for assistance?	ASSISTER #1 _____	ASSISTER #2 _____	ASSISTER #3 _____
7. Where is that (ASSISTER) located? (RECORD ADDRESS/ CITY/STATE/ CNTRY)			
8. Was (ASSISTER) of your ethnic group?	Yes 1 → GO TO Q9 No 2 → ASK A	Yes 1 → GO TO Q9 No..... 2 → ASK A	Yes 1 → GO TO Q9 No..... 2 → ASK A
8A. What is his/her ethnic background?	_____	_____	_____
9. How is (ASSISTER) related to you?	_____	_____	_____
10. What type of assistance did you receive from (ASSISTER)?	_____ _____	_____ _____	_____ _____
11. What was the amount of the loan/gift/ economic assistance?	\$ _____ ROUND CENTS UP IF GIFT SKIP TO Q22, OTHERWISE ASK 12	\$ _____ ROUND CENTS UP IF GIFT SKIP TO Q22, OTHERWISE ASK 12	\$ _____ ROUND CENTS UP IF GIFT SKIP TO Q22, OTHERWISE ASK 12
12. What was the rate of interest for your loan, or other type of economic assistance?	_____ % IF 00 ASK Q13, OTHERWISE SKIP TO Q14	_____ % IF 00 ASK Q13, OTHERWISE SKIP TO Q14	_____ % IF 00 ASK Q13, OTHERWISE SKIP TO Q14

13. Why was the loan free of interest?	_____	_____	_____
14. Was a specific amount of time agreed upon to repay the loan?	Yes 1 → ASK A No 2 → SKIP TO Q15	Yes 1 → ASK A No..... 2 → SKIP TO Q15	Yes 1 → ASK A No..... 2 → SKIP TO Q15
14A. What was the length of time?	_____ YEARS MONTHS	_____ YEARS MONTHS	_____ YEARS MONTHS
15. Did you have to put something up as collateral against the loan?	Yes 1 → ASK A No 2 → SKIP TO Q16	Yes 1 → ASK A No..... 2 → SKIP TO Q16	Yes 1 → ASK A No..... 2 → SKIP TO Q16
15A. What was it?	_____	_____	_____
15B. What was its value?	\$ _____ ROUND CENTS UP	\$ _____ ROUND CENTS UP	\$ _____ ROUND CENTS UP
16. Were there co-signers?	Yes 1 → ASK A No 2 → SKIP TO Q17	Yes 1 → ASK A No..... 2 → SKIP TO Q17	Yes 1 → ASK A No..... 2 → SKIP TO Q17
16A. How many co-signers did you have?	_____	_____	_____
17. IS THERE ANOTHER ASSISTER TO ASK ABOUT?	Yes 1 → BACK TO Q7 No 2 → GO TO BOX S-3	Yes 1 → BACK TO Q7 No..... 2 → GO TO BOX S-3	No..... 2 → GO TO BOX S-3

BOX S-3	IF RESPONDENT HAD AT LEAST ONE CO-SIGNER, CONTINUE. OTHERWISE SKIP TO Q22.
----------------	---

For each co-signer, I will ask you a set of questions.

18. First, please give me their names or some other way to refer to them?	CO-SIGNER #1	CO-SIGNER #1	CO-SIGNER #1
19. How is (CO-SIGNER) related to you?	_____	_____	_____
20. Is (CO-SIGNER) of your same ethnic group?	Yes... 1 → SKIP TO Q21 No 2 → ASK A	Yes... 1 → SKIP TO Q21 No 2 → ASK A	Yes... 1 → SKIP TO Q21 No 2 → ASK A
20A. What is his/her ethnic background?	_____	_____	_____
21. Where is he/she located? (RECORD ADDRESS/CITY/ STATE/COUNTRY)			

22. It is also true that there are years when business is exceptionally good. In those years which of these things listed on this card do you do? **CODE ALL THAT APPLY.**

- Reduce debts, paid off credit line..... 01
- Give more to charity, assistance to others..... 02
- Give more credit to purchases..... 03
- Build up savings account 04
- Acquire equipment or other assets 05
- Increase business expenditures 06
- Build up inventory 07
- Spend less time at work/reduced hours..... 08
- Quit other job 09
- Use family members less 10
- Increase household expenditure 11
- Settle outstanding debts 12
- Expand the business 13
- Acquire new businesses 14
- Other (SPECIFY)..... 15

SECTION T. INSURANCE POLICIES

1. Do you carry any kind of insurance in this business?

Yes 1 → CONTINUE BELOW

No 2 → SKIP TO SEC.U

To make sure we have not left anything out, we will review some kinds of insurance people carry in their business. Looking at the types of insurance listed on this card, please tell me whether or not you currently have each kind.

HAND CARD T-1	2. Do you currently have (INSURANCE)?	3. How much coverage does it provide?	4.How much is the premium?	5.Is that monthly, quarterly, annually, or what?
A. Package (SPECIFY) _____ _____ _____	Yes.....1 No2	\$ _____	\$ _____	_____
B. Fire separately	Yes.....1 No2	\$ _____	\$ _____	_____
C. Theft separately	Yes.....1 No2	\$ _____	\$ _____	\$ _____
D. Liability separately	Yes.....1 No2	\$ _____	\$ _____	\$ _____
E. Medical separately	Yes.....1 No2	\$ _____	\$ _____	\$ _____
F. Business interruption separately	Yes.....1 No2	\$ _____	\$ _____	\$ _____
G. Other (SPECIFY) _____	Yes.....1 No2	\$ _____	\$ _____	\$ _____

SECTION U. HOUSEHOLD SURVEY

These are all questions I have for the survey.

IF RESPONDENT WAS SELECTED FOR HOUSEHOLD SURVEY AND LIVES IN CHATHAM, GO TO Q1. IF RESPONDENT WAS SELECTED FOR HOUSEHOLD SURVEY AND DOES NOT LIVE IN CHATHAM, GO TO Q1A. IF RESPONDENT WAS NOT SELECTED, GO TO Q4.

1. Another aspect of the study we are conducting involves relating household finances to business performance. We have another questionnaire about household finances which we would like to administer to you or someone else in your household. It will take approximately 45 minutes. Will you be responding yourself, or would you like us to interview someone else in your home? If you agree, we will pay you an additional \$25.00 for this interview

Business respondent..... 1 → ASK Q2
Other member of household..... 2 → SKIP TO Q3
SPECIFY NAME _____

RELATIONSHIP TO R _____

R REFUSES PARTICIPATION
IN HOUSEHOLD SURVEY 7 → SKIP TO Q4

- 1A. Another aspect of the study we are conducting involves relating household finances to business performance. We have another questionnaire about household finances, which we would like to administer to you. It will take approximately 45 minutes. If you agree we will pay you an additional \$25.00 for this interview.

Business respondent..... 1 → ASK Q2
R REFUSES PARTICIPATION IN HH SURVEY 7 → SKIP TO Q4

2. When would you like me to conduct the next interview?

BOX U-1	TRY TO SET AN APPOINTMENT FOR ANOTHER TIME.
----------------	--

3. May I please have (his/her) telephone number to call (him/her) to set up appointment for the interview?

(____) _____
AREA CODE

4. May I please have your telephone number in case my office wants to verify that I was here?

(____) _____
AREA CODE

BOX U-2	ENDING TIME _____ AM / PM HOUR MINUTES
----------------	---

BOX U-3	WAS INTERVIEW DIFFICULT1 AVERAGE2 EASY3
----------------	--

5. Thank you very much for your time.

PROJECT #97-109

CASE ID: B- ____

R_NAME:

R_ADDRESS:

R_PHONE: (773)

TODAY'S DATE: ____ / ____ / 97

INTERVIEWER: