Thank you for your participation in this important study.

Abt SRBI, Inc.
Department 5057
P.O. Box ??????
Chicago, IL 60654
Person Information

School Information  □ Not a student – Skip to Work Information  
□ In pre-school/nursery school  □ K-12 student  □ Vocational/Technical  
□ Full-time college/graduate student  □ Part-time college/graduate student  
School/College Name: ______________________________________________________________ 
Location: ____________________________________________  City, State, Zip  

Work Information  □ Not currently employed – Skip to Page 2  

If you have more than one job, please reference the job where you spend the most hours  

Where do you work? ______________________________________________________________ 
Name of Employer: ______________________________________________________________ 
Type of Business: ______________________________________________________________ 
Street Address or Closest Intersection: ____________________________________________  
City, State, Zip: ______________________________________________________________ 

Does your job involve…? □ Evenings (6 PM to 12 AM) □ Overnight shifts (12 AM to 5 AM)  
Does your job usually require you to make 5 or more work-related trips during the course of an average workday? □ No  □ Yes → If yes, how many trips on average? _____ Trips  
Average hours worked per week? ________ Hours  

Which of the following best describes your work schedule?  
□ “I have no flexibility in my work schedule.”  
□ “I have some flexibility in my work schedule.”  
□ “I’m pretty much free to adjust my schedule as I like.”  

Does your employer offer compressed workweek options? (eg 40 hrs in less than 5 days)  
□ Yes □ No □ Don’t know  

What is your employer’s industry?  
□ Agriculture, Forestry, Fishing and Hunting  □ Management of Companies and Enterprises  
□ Mining  □ Administrative and Support and Waste Management and Remediation Services  
□ Utilities  □ Educational Services  
□ Construction  □ Health Care and Social Services  
□ Manufacturing  □ Arts, Entertainment and Recreation  
□ Wholesale Trade  □ Accommodation and Food Services  
□ Retail Trade  □ Public Administration/ Government  
□ Transportation and Warehousing  □ Other Services  
□ Information  □ Military  
□ Finance and Insurance  □ Other _________________ 
□ Real Estate, Rental/Leasing  □ Professional, Scientific and Technical Services  

Travel: How did you get to Location 12?

1. What type(s) of transportation did you use to go to Location 12?  

<table>
<thead>
<tr>
<th>1st</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Car, van, truck</td>
<td>Public Bus</td>
</tr>
<tr>
<td>2</td>
<td>Walk</td>
<td>Light Rail</td>
</tr>
<tr>
<td>3</td>
<td>School Bus</td>
<td>Commuter Rail</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass? □ Yes □ No → How much did you pay? ______ 

3. If you used a car/van/truck or motorcycle/moped for this trip . . .  
A. Were you the . . .? □ Driver □ Passenger  
B. Including yourself, how many people were in the vehicle? 1 2 3 4+  
   Including yourself, how many are household members? 1 2 3 4+  
   Which household members were with you? __________________________________________________________ 
   __________________________________________________________  
   __________________________________________________________  
   __________________________________________________________  
C. Was this vehicle from your household? □ Yes □ No  
D. Did you pay a toll? □ Yes □ No  
E. How much, in total, did you personally pay for parking? □ Nothing □ $ ______ . ______ Was the rate…? □ Hourly □ Daily □ Monthly □ Other  

Location 12  

4. When did you arrive at Location 12? ____ : ____ □ AM □ PM  

5. Where is this?  
Name of Location 12: ______________________________________________________________ 
Street Address or Closest Intersection: ____________________________________________  
City, State, Zip Code: ______________________________________________________________  
Type of Place or Business: ______________________________________________________________  
Nearest Cross Streets: ______________________________________________________________  

6. A. What was your primary activity at Location 12? (check only ONE box)  
□ 1 Home – Paid Work □ 8 Other School Activities □ 15 Recreation--Watch  
□ 2 Home – Unpaid Work □ 9 Quick Stops □ 16 Eat Out  
□ 3 Home – Other □ 10 Personal Business □ 17 Religious/Community  
□ 4 Work □ 11 Major Shopping □ 18 Accompany Another Person  
□ 5 Attend Childcare □ 12 Everyday Shopping □ 19 Pick-Up Passenger  
□ 6 Attend School □ 13 Social □ 20 Drop-Off Passenger  
□ 7 Attend College □ 14 Recreation--Participate □ 21 Turn Around  
B. Other activities at Location 12, if any? ______ ______ ______  

7. When did you leave Location 12? ____ : ____ □ AM □ PM □ Did Not Leave
Travel: How did you get to Location 11?

1. What type(s) of transportation did you use to go to Location 11?

<table>
<thead>
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</tr>
<tr>
<td>School Bus</td>
<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?
- Yes
- No

How much did you pay?_____

3. If you used car/van/truck or motorcycle/moped for this trip . . .

A. Were you the . . .?
- Driver
- Passenger

B. Including yourself, how many people were in the vehicle? 1 2 3 4+

Including yourself, how many are household members? 1 2 3 4+

Which household members were with you?

C. Was this vehicle from your household?
- Yes
- No

D. Did you pay a toll?
- Yes
- No

E. How much, in total, did you personally pay for parking?
- Nothing

$____ . ____ . ____ Was the rate...?
- Hourly
- Daily
- Monthly
- Other

Location 11

4. When did you arrive at Location 11? ___ ___ : ___ ___ AM PM

5. Where is this?

Name of Location 11

If address already reported, provide location name and

GO TO QUESTION 6

Street Address

type of place or business

City, State, Zip Code

Nearest Cross Streets

6. A. What was your primary activity at Location 11? (check only ONE box)
- Home – Paid Work
- Home – Unpaid Work
- Work
- Attend Childcare
- Attend School
- Attend College

B. Other activities at Location 11, if any?

7. When did you leave Location 11? ___ ___ : ___ ___ AM PM Did Not Leave

Instructions for One-Day Travel Diary

- Use this diary on your assigned travel days, shown on your cover letter. Begin at 3:00 AM on your first assigned travel day and continue until you go to sleep that night.

- Fill out one page for EACH location you go to. If uncertain whether to include a location at which you stop, include it.

- Record ALL locations visited, even short stops for coffee or gas.

- Record the EXACT time that you arrive and leave each location.

- Provide as much address information as you can. Include:
  - street address
  - type of place or business
  - nearest cross streets

- Record your primary activity (what you did) at each location. (Refer to Activity Choices on Page 4.)

- If you take a round-trip without stopping at a location (walk the dog or ride around in the car), record the furthest point of the trip as the location and what you do there as TURN AROUND. (Refer to Activity Choice 20 on Page 4.)

- If you park your car and walk AT LEAST five minutes to your destination, record your type of transportation as car first, then walk. If you walk at least five minutes from a bus to your destination, record your transportation as bus first, then walk.

- If your work involves frequent travel - truck driver, sales person, taxi driver, etc. - record where and when you start work and where and when you end work. Do not include work related stops. If you make non-work related stops between work stops, record those locations.

- An example of a travel day begins on page 3.

If you have any questions, please call or e-mail:
1-800-631-0702 or surveyhelp@srbi.com
Example of a Travel Day

Chris has a busy day.

In addition to having to work a full day, he needs to drop off and pick up Michael at daycare, have lunch with his mother-in-law, make sure to get gas, stop at the grocery and make it home by 7 pm for his favorite show on television.

Despite the busy day Chris diligently records all this trips, activities and modes of transportation. This is what it looks like.

Chris’ Day of Travel

Travel: How did you get to Location 10?

1. What type(s) of transportation did you use to go to Location 10?

<table>
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</table>

2. If you used a bus/train for this trip, did you use a pass? ☐ Yes ☐ No ---> How much did you pay?

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .? ☐ Driver ☐ Passenger
   B. Including yourself, how many people were in the vehicle? ☐ 1 ☐ 2 ☐ 3 ☐ 4+
      Including yourself, how many are household members? ☐ 1 ☐ 2 ☐ 3 ☐ 4+
      Which household members were with you?

   C. Was this vehicle from your household? ☐ Yes ☐ No
   D. Did you pay a toll? ☐ Yes ☐ No
   E. How much, in total, did you personally pay for parking? ☐ Nothing $ _____ . _____ Was the rate...? ☐ Hourly ☐ Daily ☐ Monthly ☐ Other

Location 10

4. When did you arrive at Location 10?   ☐ AM ☐ PM

5. Where is this?

   Name of Location 10

   If address already reported, provide location name and type of business

   Street Address

   City, State, Zip Code

   Nearest Cross Streets

6. A. What was your primary activity at Location 10? (check only ONE box)
   ☐ 1 Home – Paid Work ☐ 8 Other School Activities ☐ 15 Recreation–Watch
   ☐ 2 Home – Unpaid Work ☐ 9 Quick Stops ☐ 16 Eat Out
   ☐ 3 Home – Other ☐ 10 Personal Business ☐ 17 Religious/Community
   ☐ 4 Work ☐ 11 Major Shopping ☐ 18 Accompany Another Person
   ☐ 5 Attend Childcare ☐ 12 Everyday Shopping ☐ 19 Pick-Up Passenger
   ☐ 6 Attend School ☐ 13 Social ☐ 20 Drop-Off Passenger
   ☐ 7 Attend College ☐ 14 Recreation–Participate ☐ 21 Turn Around
   B. Other activities at Location 10, if any? ______ ______ ______

7. When did you leave Location 10?   ☐ AM ☐ PM ☐ Did Not Leave
Travel: How did you get to Location 9?

1. What type(s) of transportation did you use to go to Location 9?

<table>
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</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  
   □ Yes □ No  How much did you pay? __________

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .?  □ Driver □ Passenger
   B. Including yourself, how many people were in the vehicle?  1  2  3  4+

   Including yourself, how many are household members?  1  2  3  4+

   Which household members were with you?
   ___________________ ,   ___________________ ,  ___________________ , ___________________

   C. Was this vehicle from your household?  □ Yes □ No

   D. Did you pay a toll?  □ Yes □ No

   E. How much, in total, did you personally pay for parking?  □ Nothing $ _____ . _____ _____ Was the rate...?  □ Hourly □ Daily □ Monthly □ Other

Location 9

4. When did you arrive at Location 9?  ____ ____ : ____ ____ □ AM □ PM

5. Where is this?

   Name of Location 9

   Street Address

   Type of Place or Business

   City, State, Zip Code

   Nearest Cross Streets

Go to QUESTION 6

6. A. What was your primary activity at Location 9? (check only ONE box)
   □ 1 Home – Paid Work □ 8 Other School Activities □ 15 Recreation–Watch
   □ 2 Home – Unpaid Work □ 9 Quick Stops □ 16 Eat Out
   □ 3 Home – Other □ 10 Personal Business □ 17 Religious/Community
   □ 4 Work □ 11 Major Shopping □ 18 Accompany Another Person
   □ 5 Attend Childcare □ 12 Everyday Shopping □ 19 Pick-Up Passenger
   □ 6 Attend School □ 13 Social □ 20 Drop-Off Passenger
   □ 7 Attend College □ 14 Recreation–Participate □ 21 Turn Around

   B. Other activities at Location 9, if any?  __________ __________ __________

7. When did you leave Location 9?  ____ ____ : ____ ____ □ AM □ PM □ Did Not Leave

At each location, Chris had to determine what the primary activity completed and then any other activities. The list below helped in making the determination.

Activity Choices: What you do at locations
1. HOME – PAID WORK
2. HOME – OTHER (sleeping, eating, chores, watching TV, etc.)
3. HOME – UNPAID WORK
4. WORK (employment and job-related activities)
5. ATTEND CHILDCARE (day care, pre-school, etc.)
6. ATTEND SCHOOL (K-12)
7. ATTEND COLLEGE (college or university, graduate or professional school)
8. OTHER SCHOOL ACTIVITIES (performances, meetings)
9. QUICK STOPS (ATM, a cup of coffee)
10. PERSONAL BUSINESS (banking, medical, salon, etc.)
11. MAJOR SHOPPING (appliances, cars, home furnishings, clothes, etc.)
12. EVERYDAY SHOPPING (grocery, drug store, gas, etc.)
13. SOCIAL (visit friends, relatives, etc.)
14. RECREATION – PARTICIPATE (sports, exercise, park, museum, etc.)
15. RECREATION – WATCH (movies, sports events, etc.)
16. EAT OUT (restaurant, drive-thru, etc.)
17. RELIGIOUS/COMMUNITY (worship, wedding, funeral, meetings, etc.)
18. ACCOMPANY ANOTHER PERSON (child accompanies parent to food store, etc.)
19. PICK-UP PASSENGER(S)
20. DROP-OFF PASSENGER(S)
21. TURN AROUND (to travel back from furthest point on dog walk, etc.)

Chris recorded each trip made that day. Where the trip began, the primary activity, the types of transportation, the times the trip began and ended. See an example of the beginning of Chris’ day beginning a 3: 00 A.M.
**DIARY EXAMPLE**

*Where were you at 3:00 AM?*

1. ☐ Traveling – GO TO NEXT TRAVEL  ☑ At a location

2. Where is this?

   Home
   Name of Location 1
   715 Lovely Lane
   Street Address
   Anytown, MN 55401
   Residential
   Lovely Lane & Sea Way
   Type of Place or Business
   Nearest Cross Streets

3. A. What was your primary activity at Location 1? (check only ONE box)

   ☐ 1 Home – Paid Work  ☐ 8 Other School Activities  ☐ 15 Recreation–Watch
   ☐ 2 Home – Unpaid Work  ☐ 9 Quick Stops  ☐ 16 Eat Out
   ☐ 3 Home – Other  ☐ 10 Personal Business  ☐ 17 Religious/Community
   ☐ 4 Work  ☐ 11 Major Shopping  ☐ 18 Accompany Another Person
   ☐ 5 Attend Childcare  ☐ 12 Everyday Shopping  ☐ 19 Pick-Up Passenger
   ☐ 6 Attend School  ☐ 13 Social  ☐ 20 Drop-Off Passenger
   ☐ 7 Attend College  ☐ 14 Recreation–Participate  ☐ 21 Turn Around

   ☐ 14 Recreation–Participate

B. Other activities at Location 1, if any?  _____  _____  _____

4. When did you leave Location 1?  ____ : ____  AM  ☑ PM

---

**Travel: How did you get to Location 8?**

1. What type(s) of transportation did you use to go to Location 8?

<table>
<thead>
<tr>
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<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  ☐ Yes  ☐ No →→ How much did you pay?  _____

3. If you used a car/van/truck or motorcycle/moped for this trip . . .

   A. Were you the . . .?
   ☐ Driver  ☐ Passenger

   B. Including yourself, how many people were in the vehicle?  1  2  3  4+

   C. Was this vehicle from your household?  ☐ Yes  ☐ No

   D. Did you pay a toll?  ☐ Yes  ☐ No

   E. How much, in total, did you personally pay for parking?  ☐ Nothing  $  ____ . ____ . ____ Was the rate . . .?  ☐ Hourly  ☐ Daily  ☐ Monthly  ☐ Other

---

**Location 8**

4. When did you arrive at Location 8?  ____ : ____  AM  ☐ PM

5. Where is this?

   Name of Location 8

   If address already reported, provide location name and GO TO QUESTION 6

   Street Address
   Type of Place or Business
   Nearest Cross Streets

   City, State, Zip Code

6. A. What was your primary activity at Location 8? (check only ONE box)

   ☐ 1 Home – Paid Work  ☐ 8 Other School Activities  ☐ 15 Recreation–Watch
   ☐ 2 Home – Unpaid Work  ☐ 9 Quick Stops  ☐ 16 Eat Out
   ☐ 3 Home – Other  ☐ 10 Personal Business  ☐ 17 Religious/Community
   ☐ 4 Work  ☐ 11 Major Shopping  ☐ 18 Accompany Another Person
   ☐ 5 Attend Childcare  ☐ 12 Everyday Shopping  ☐ 19 Pick-Up Passenger
   ☐ 6 Attend School  ☐ 13 Social  ☐ 20 Drop-Off Passenger
   ☐ 7 Attend College  ☐ 14 Recreation–Participate  ☐ 21 Turn Around

   ☐ 14 Recreation–Participate

B. Other activities at Location 8, if any?  _____  _____  _____

7. When did you leave Location 8?  ____ : ____  AM  ☐ PM  ☐ Did Not Leave
**Travel: How did you get to Location 7?**

1. What type(s) of transportation did you use to go to Location 7?

<table>
<thead>
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<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass? Yes ☐ No ☐

3. If you used a car/van/truck or motorcycle/moped for this trip:
   - A. Were you the... Driver ☐ Passenger ☐
   - B. Including yourself, how many people were in the vehicle? 1 2 3 4+
   - C. Was this vehicle from your household? Yes ☐ No ☐
   - D. Did you pay a toll? Yes ☐ No ☐
   - E. How much, in total, did you personally pay for parking? Nothing ☐

4. When did you arrive at Location 7? ___ ___ : ___ ___ AM ☐ PM ☐

5. Where is this?

**Location 7**

Name of Location 7

Street Address

City, State, Zip Code

**Travel: How did you get to Location 2?**

1. What type(s) of transportation did you use to go to Location 2?

<table>
<thead>
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<td>Commuter Rail (Northstar)</td>
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</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass? Yes ☐ No ☐

3. If you used a car/van/truck or motorcycle/moped for this trip:
   - A. Were you the... Driver ☐ Passenger ☐
   - B. Including yourself, how many people were in the vehicle? 1 2 3 4+
   - C. Was this vehicle from your household? Yes ☐ No ☐
   - D. Did you pay a toll? Yes ☐ No ☐
   - E. How much, in total, did you personally pay for parking? Nothing ☐

4. When did you arrive at Location 2? ___ ___ : ___ ___ AM ☐ PM ☐

5. Where is this?

**Location 2**

Name of Location 2

Street Address

City, State, Zip Code

**Location 2: DIARY EXAMPLE**

4. When did you arrive at Location 2? ___ ___ : ___ ___ AM ☐ PM ☐

5. Where is this?

**Anytown Daycare**

123 Main St

Daycare

Type of Place or Business

6. What was your primary activity at Location 2? (check only ONE box)

☐ 1 Home – Paid Work ☐ 8 Other School Activities ☐ 15 Recreation–Watch

☐ 2 Home – Unpaid Work ☐ 9 Quick Stops ☐ 16 Eat Out

☐ 3 Home – Other ☐ 10 Personal Business ☐ 17 Religious/Community

☐ 4 Work ☐ 11 Major Shopping ☐ 18 Accompany Another Person

☐ 5 Attend Childcare ☐ 12 Everyday Shopping ☐ 19 Pick-Up Passenger

☐ 6 Attend School ☐ 13 Social ☐ 20 Drop-Off Passenger

☐ 7 Attend College ☐ 14 Recreation–Participate ☐ 21 Turn Around

B. Other activities at Location 2, if any? __________

7. When did you leave Location 2? ___ ___ : ___ ___ AM ☐ PM ☐ Did Not Leave
Start Recording Your Travel Here

Record travel for your assigned travel day.

Where were you at 3:00 AM?

1. □ Traveling – GO TO QUESTION 1 ON PAGE 8
   □ At a location

2. Where is this?

   Name of Location 1 ________________________________
   Street Address ________________________________ Type of Place or Business
   City, State, Zip Code ________________________________ Nearest Cross Streets

3. A. What was your primary activity at Location 1? (check only ONE box)
   □ 1 Home – Paid Work
   □ 2 Home – Unpaid Work
   □ 3 Home – Other
   □ 4 Work
   □ 5 Attend Childcare
   □ 6 Attend School
   □ 7 Attend College
   □ 8 Other School Activities
   □ 9 Quick Stops
   □ 10 Personal Business
   □ 11 Major Shopping
   □ 12 Everyday Shopping
   □ 13 Social
   □ 14 Recreation–Participate
   □ 15 Recreation–Watch
   □ 16 Eat Out
   □ 17 Religious/Community
   □ 18 Accompany Another Person
   □ 19 Pick-Up Passenger
   □ 20 Drop-Off Passenger
   □ 21 Turn Around

B. Other activities at Location 1, if any? _____ _____ _____

4. When did you leave Location 1? _____ : _____ AM □ PM □ Did Not Leave

Travel: How did you get to Location 6?

1. What type(s) of transportation did you use to go to Location 6?

<table>
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</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass? □ Yes □ No →→ How much did you pay? _____

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .? □ Driver □ Passenger
   B. Including yourself, how many people were in the vehicle? 1 2 3 4+
      Including yourself, how many are household members? 1 2 3 4+
      Which household members were with you? ________________________ , ________________________ , ________________________ , ________________________
   C. Was this vehicle from your household? □ Yes □ No
   D. Did you pay a toll? □ Yes □ No
   E. How much, in total, did you personally pay for parking? □ Nothing $ _____ . _____ . _____ Was the rate...? □ Hourly □ Daily □ Monthly □ Other

Location 6

4. When did you arrive at Location 6? _____ : _____ □ AM □ PM

5. Where is this?

   Name of Location 6 ________________________________
   Street Address ________________________________ Type of Place or Business
   City, State, Zip Code ________________________________ Nearest Cross Streets

6. A. What was your primary activity at Location 6? (check only ONE box)
   □ 1 Home – Paid Work
   □ 2 Home – Unpaid Work
   □ 3 Home – Other
   □ 4 Work
   □ 5 Attend Childcare
   □ 6 Attend School
   □ 7 Attend College
   □ 8 Other School Activities
   □ 9 Quick Stops
   □ 10 Personal Business
   □ 11 Major Shopping
   □ 12 Everyday Shopping
   □ 13 Social
   □ 14 Recreation–Participate
   □ 15 Recreation–Watch
   □ 16 Eat Out
   □ 17 Religious/Community
   □ 18 Accompany Another Person
   □ 19 Pick-Up Passenger
   □ 20 Drop-Off Passenger
   □ 21 Turn Around

B. Other activities at Location 6, if any? _____ _____ _____

7. When did you leave Location 6? _____ : _____ □ AM □ PM □ Did Not Leave
### Travel: How did you get to Location 5?

1. **What type(s) of transportation did you use to go to Location 5?**
   
<table>
<thead>
<tr>
<th>1st</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Car, van, truck</td>
<td>4 Public Bus</td>
<td>7 Amtrak</td>
</tr>
<tr>
<td>Walk</td>
<td>5 Light Rail (Hiawatha)</td>
<td>8 Bicycle</td>
</tr>
<tr>
<td>School Bus</td>
<td>6 Commuter Rail (Northstar)</td>
<td>9 Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  
   - [ ] Yes  
   - [ ] No  
   How much did you pay?_______

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   
   A. Were you the . . .?  
   - [ ] Driver  
   - [ ] Passenger
   
   B. **Including yourself**, how many people were in the vehicle?  
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4+
   
   Which household members were with you?  
   __________________________, __________________________, __________________________

   C. Was this vehicle from your household?  
   - [ ] Yes  
   - [ ] No

   D. Did you pay a toll?  
   - [ ] Yes  
   - [ ] No

   E. How much, in total, did you personally pay for parking?  
   - [ ] Nothing
   - [ ] $ ______ . ______ Was the rate...?  
   - [ ] Hourly  
   - [ ] Daily  
   - [ ] Monthly  
   - [ ] Other

### Location 5

4. When did you arrive at Location 5?  
   ______ : _____  
   - [ ] AM  
   - [ ] PM

5. Where is this?  
   __________________________

   | Name of Location 5 |
   | __________________________ |

   | Street Address |
   | __________________________ |

   | Type of Place or Business |
   | __________________________ |

   | City, State, Zip Code |
   | __________________________ |

   | Nearest Cross Streets |
   | __________________________ |

   **GO TO QUESTION 6**

6. A. What was your **primary** activity at Location 5? (check only ONE box)
   
   - [ ] 1 Home – Paid Work  
   - [ ] 2 Home – Unpaid Work  
   - [ ] 3 Home – Other  
   - [ ] 4 Work  
   - [ ] 5 Attend Childcare  
   - [ ] 6 Attend School  
   - [ ] 7 Attend College  
   
   B. Other activities at Location 5, if any?  
   __________________________, __________________________, __________________________

7. When did you leave Location 5?  
   ______ : _____  
   - [ ] AM  
   - [ ] PM  
   - [ ] Did Not Leave

### Travel: How did you get to Location 2?

1. **What type(s) of transportation did you use to go to Location 2?**
   
<table>
<thead>
<tr>
<th>1st</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
<tbody>
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<td>7 Amtrak</td>
</tr>
<tr>
<td>Walk</td>
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</tr>
<tr>
<td>School Bus</td>
<td>6 Commuter Rail (Northstar)</td>
<td>9 Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  
   - [ ] Yes  
   - [ ] No  
   How much did you pay?_______

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   
   A. Were you the . . .?  
   - [ ] Driver  
   - [ ] Passenger
   
   B. **Including yourself**, how many people were in the vehicle?  
   - [ ] 1
   - [ ] 2
   - [ ] 3
   - [ ] 4+
   
   Which household members were with you?  
   __________________________, __________________________, __________________________

   C. Was this vehicle from your household?  
   - [ ] Yes  
   - [ ] No

   D. Did you pay a toll?  
   - [ ] Yes  
   - [ ] No

   E. How much, in total, did you personally pay for parking?  
   - [ ] Nothing
   - [ ] $ ______ . ______ Was the rate...?  
   - [ ] Hourly  
   - [ ] Daily  
   - [ ] Monthly  
   - [ ] Other

### Location 2

4. When did you arrive at Location 2?  
   ______ : _____  
   - [ ] AM  
   - [ ] PM

5. Where is this?  
   __________________________

   | Name of Location 2 |
   | __________________________ |

   | Street Address |
   | __________________________ |

   | Type of Place or Business |
   | __________________________ |

   | City, State, Zip Code |
   | __________________________ |

   | Nearest Cross Streets |
   | __________________________ |

   **GO TO QUESTION 6**

6. A. What was your **primary** activity at Location 2? (check only ONE box)
   
   - [ ] 1 Home – Paid Work  
   - [ ] 2 Home – Unpaid Work  
   - [ ] 3 Home – Other  
   - [ ] 4 Work  
   - [ ] 5 Attend Childcare  
   - [ ] 6 Attend School  
   - [ ] 7 Attend College  
   
   B. Other activities at Location 2, if any?  
   __________________________, __________________________, __________________________

7. When did you leave Location 2?  
   ______ : _____  
   - [ ] AM  
   - [ ] PM  
   - [ ] Did Not Leave
Travel: How did you get to Location 3?

1. What type(s) of transportation did you use to go to Location 3?
   
<table>
<thead>
<tr>
<th>1st (if needed)</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
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<td>Amtrak</td>
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</tr>
<tr>
<td>School Bus</td>
<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  □ Yes  □ No → How much did you pay?_____

3. If you used car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .?  □ Driver  □ Passenger
   B. Including yourself, how many people were in the vehicle?  □ 1  □ 2  □ 3  □ 4+
   Which household members were with you?  
   ___________________  ,  ___________________  ,  ___________________  ,  ___________________
   C. Was this vehicle from your household?  □ Yes  □ No
   D. Did you pay a toll?  □ Yes  □ No
   E. How much, in total, did you personally pay for parking?  □ Nothing
   $____  ____ . ____  ____ Was the rate...?  □ Hourly  □ Daily  □ Monthly  □ Other

Location 3

4. When did you arrive at Location 3?  ___ ___ : ___ ___ □ AM  □ PM

5. Where is this?
   ___________________
   Name of Location 3
   ___________________
   Street Address
   ___________________
   Type of Place or Business
   ___________________
   City, State, Zip Code
   Nearest Cross Streets

   GO TO QUESTION 6

6. A. What was your primary activity at Location 3? (check only ONE box)
   □ 1 Home – Paid Work  □ 8 Other School Activities  □ 15 Recreation–Watch
   □ 2 Home – Unpaid Work  □ 9 Quick Stops  □ 16 Eat Out
   □ 3 Home – Other  □ 10 Personal Business  □ 17 Religious/Community
   □ 4 Work  □ 11 Major Shopping  □ 18 Accompany Another Person
   □ 5 Attend Childcare  □ 12 Everyday Shopping  □ 19 Pick-Up Passenger
   □ 6 Attend School  □ 13 Social  □ 20 Drop-Off Passenger
   □ 7 Attend College □ 14 Recreation–Participate □ 21 Turn Around
   B. Other activities at Location 3, if any?  ______  ______  ______

7. When did you leave Location 3?  ___ ___ : ___ ___ □ AM  □ PM  □ Did Not Leave

Travel: How did you get to Location 4?

1. What type(s) of transportation did you use to go to Location 4?
   
<table>
<thead>
<tr>
<th>1st (if needed)</th>
<th>2nd (if needed)</th>
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<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped</td>
</tr>
</tbody>
</table>

2. If you used a bus/train for this trip, did you use a pass?  □ Yes  □ No → How much did you pay?_____

3. If you used a car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .?  □ Driver  □ Passenger
   B. Including yourself, how many people were in the vehicle?  □ 1  □ 2  □ 3  □ 4+
   Which household members were with you?  
   ___________________  ,  ___________________  ,  ___________________  ,  ___________________
   C. Was this vehicle from your household?  □ Yes  □ No
   D. Did you pay a toll?  □ Yes  □ No
   E. How much, in total, did you personally pay for parking?  □ Nothing
   $____  ____ . ____  ____ Was the rate...?  □ Hourly  □ Daily  □ Monthly  □ Other

Location 4

4. When did you arrive at Location 4?  ___ ___ : ___ ___ □ AM  □ PM

5. Where is this?
   ___________________
   Name of Location 4
   ___________________
   Street Address
   ___________________
   Type of Place or Business
   ___________________
   City, State, Zip Code
   Nearest Cross Streets

   GO TO QUESTION 6

6. A. What was your primary activity at Location 4? (check only ONE box)
   □ 1 Home – Paid Work  □ 8 Other School Activities  □ 15 Recreation–Watch
   □ 2 Home – Unpaid Work  □ 9 Quick Stops  □ 16 Eat Out
   □ 3 Home – Other  □ 10 Personal Business  □ 17 Religious/Community
   □ 4 Work  □ 11 Major Shopping  □ 18 Accompany Another Person
   □ 5 Attend Childcare  □ 12 Everyday Shopping  □ 19 Pick-Up Passenger
   □ 6 Attend School  □ 13 Social  □ 20 Drop-Off Passenger
   □ 7 Attend College  □ 14 Recreation–Participate □ 21 Turn Around
   B. Other activities at Location 4, if any?  ______  ______  ______

7. When did you leave Location 4?  ___ ___ : ___ ___ □ AM  □ PM □ Did Not Leave