Thank you for your participation in this important study. Enter your travel information by logging on to:

www.opinionport.com/metrocounciltraveldiary

If you don’t have access to the Internet, don’t worry, someone will call your home in the days following your travel date to collect the information over the phone. Or, if you prefer, you can mail the diary back using the return envelope we provided in the travel packet.
Person Information

Travel: How did you get to Location 12?

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

- 1st
- 2nd (if needed)
- 3rd (if needed)

<table>
<thead>
<tr>
<th>1</th>
<th>Car, van, truck</th>
<th>4</th>
<th>Public Bus</th>
<th>7</th>
<th>Amtrak</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Walk</td>
<td>5</td>
<td>Light Rail (Hiawatha)</td>
<td>8</td>
<td>Bicycle</td>
</tr>
<tr>
<td>3</td>
<td>School Bus</td>
<td>6</td>
<td>Commuter Rail (Northstar)</td>
<td>9</td>
<td>Motorcycle/Moped</td>
</tr>
<tr>
<td>12</td>
<td>Other (specify)</td>
<td></td>
<td></td>
<td></td>
<td></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. Was this vehicle from your household?  
  - Yes
  - No
- C. Did you pay a toll?  
  - Yes
  - No
- D. How much, in total, did you personally pay for parking?  
  - Nothing
  - $ ______. ______. ______ Was the rate . . .?
  - Hourly
  - Daily
  - Monthly
  - Other

4. A. Including yourself, how many people were with you on this trip?  
  - 1
  - 2
  - 3
  - 4+
- B. Including yourself, how many were household members?  
  - 1
  - 2
  - 3
  - 4+
- C. Which household members were with you?  
  - ____________________________
  - ____________________________
  - ____________________________
  - ____________________________

Location 12

5. When did you arrive at Location 12?  
  - ___ : ___ AM
  - ___ : ___ PM

6. Where is this?  
  - Name of Location 12

7. A. What was your primary activity at Location 12? (check only ONE box)

- 1 | Home -- Paid Work
- 8 | Other School Activities
- 2 | Home -- Unpaid Work
- 9 | Quick Stops
- 3 | Home -- Other
- 10 | Personal Business
- 4 | Work
- 11 | Major Shopping
- 8 | Attend Childcare
- 12 | Everyday Shopping
- 6 | Attend School
- 13 | Social
- 7 | Attend College
- 14 | Recreation-Participate
- 8 | Other activities at Location 12, if any?  
  - ____________________________

8. When did you leave Location 12?  
  - ___ : ___ AM
  - ___ : ___ PM
  - Did Not Leave
Instructions for One-Day Travel Diary

- Use this diary on your assigned travel day, shown on your cover letter. Begin at 3:00 AM on your assigned travel day and continue until you go to sleep that night.
- For each stop, even quick stops for coffee or gas, dropping off or picking up someone, or at a drive-thru window, fill out one page for each location. If uncertain whether to include a stop as a location, go ahead and include it.
- 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 21 on Page 4.)
- If you park your car and walk AT LEAST five minutes to your destination, record your transportation as bus 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.
- If children under the age of 6 accompany you on any trip, please include them when reporting on question 4 of each travel section. We want to know about all individuals who travel with you.
- If you make more than 12 trips on your travel day please report all 12 trips in the diary format. For trips 13 and above, please turn to the very last page of the diary and report the additional trips.
- An example of a travel day begins on page 3.

If you have any questions, please call or e-mail: 1-877-699-4344 or MCtravelsurveyhelp@srbi.com

---

Travel: How did you get to Location 11?

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

<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>Public Bus</td>
<td>Amtrak</td>
</tr>
<tr>
<td>Walk</td>
<td>Light Rail (Hiawatha)</td>
<td>Bicycle</td>
</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 a car/van/truck or motorcycle/moped for this trip . . .
   A. Were you the . . .?  □ Driver  □ Passenger
   B. Was this vehicle from your household?  □ Yes  □ No
   C. Did you pay a toll?  □ Yes  □ No
   D. How much, in total, did you personally pay for parking?  □ Nothing

4. Including yourself, how many people were with you on this trip?  1  2  3  4+
   A. Including yourself, how many were household members?  1  2  3  4+
   B. Which household members were with you? ___________________  ___________________  ___________________  ___________________

Location 11

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

6. Where is this?
   Name of Location 11 ________________________________
   If address already reported, provide location name and
   GO TO QUESTION 7
   Street Address ________________________________
   Type of Place or Business ________________________________
   City, State, Zip Code ________________________________
   Nearest Cross Streets ________________________________

7. A. What was your primary activity at Location 11? (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 11, if any? __________  __________  __________

8. When did you leave Location 11? ___ ___ : ___ ___  □ AM  □ PM  □ Did Not Leave
**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 his 3 year old son Michael at daycare, have lunch with his mother-in-law, make sure to get gas, stop at the grocery store, and make it home by 7 pm for his favorite television show.

Despite the busy day, Chris diligently records all his 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?
   - 1st: Car, van, truck
   - 2nd (if needed): Public Bus
   - 3rd (if needed): Amtrak
   - 4th (if needed): Taxi/Shuttle
   - 5th (if needed): Walk
   - 6th (if needed): Light Rail (Hiawatha)
   - 7th (if needed): Bicycle
   - 8th (if needed): Commuter Rail (Northstar)
   - 9th (if needed): Bicycle
   - 10th (if needed): Dial-A-Ride
   - 11th (if needed): Car, van, truck
   - 12th (if needed): Other (specify) ____________________

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

4. A. Including yourself, how many people were with you on this trip?  
   - 1
   - 2
   - 3
   - 4+
   - B. Including yourself, how many were household members?  
     - 1
     - 2
     - 3
     - 4+
   - C. Which household members were with you?  
     - ____________________

5. When did you arrive at Location 10?  
   - _____ : _____  
   - AM
   - PM

6. Where is this?  
   - Name of Location 10
   - Street Address
   - Type of Place or Business
   - City, State, Zip Code
   - Nearest Cross Streets

7. A. What was your primary activity at Location 10? (check only ONE box)
   - Home – Paid Work
   - Home – Unpaid Work
   - Home – Other
   - Work
   - Attend Childcare
   - Attend School
   - Attend College
   - Other School Activities
   - Major Shopping
   - Everyday Shopping
   - Social
   - Recreation–Participate
   - Other Business
   - Recreation–Watch
   - Quick Stops
   - Eat Out
   - Religious/Community
   - Pick-Up Passenger
   - Drop-Off Passenger
   - Turn Around
   - Accompany Another Person
   - Other
   - Did Not Leave

8. 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>
<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. Was this vehicle from your household?  □ Yes  □ No
   C. Did you pay a toll?  □ Yes  □ No
   D. How much, in total, did you personally pay for parking?  □ Nothing
      $ ____ _____ : _____ _____ Was the rate...?  □ Hourly  □ Daily  □ Monthly  □ Other

4. A. Including yourself, how many people were with you on this trip?  1  2  3  4+
   B. Including yourself, how many were household members?  1  2  3  4+
   C. Which household members were with you?
      __________________ , __________________ , __________________ , __________________

Location 9

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

6. Where is this?
   Name of Location 9
   ____________________________________________
   If address already reported, provide name and location name and GO TO QUESTION 7
   Street Address
   Type of Place or Business
   City, State, Zip Code
   Nearest Cross Streets

7. 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?  ____ ____ ____

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

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, and the friends or family that went with him. See an example of Chris’ day beginning at 3:00 A.M.
### 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
     - Residential
     - Street Address: Anytown, MN 55401
     - Lovely Lane & Sea Way
     - Type of Place or Business: Residential
     - City, State, Zip Code: Anytown, MN 55401
     - Nearest Cross Streets: Lovely Lane & Sea Way

3. A. What was your primary activity at Location 1? (check only ONE box)
   - □ Home – Paid Work
   - □ Home – Unpaid Work
   - □ Home – Other
   - □ Work
   - □ Attend Childcare
   - □ Attend School
   - □ Attend College
   - □ Recreation–Participate
   - □ Turner 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 8?

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

<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>Public Bus</td>
<td>Amtrak</td>
</tr>
<tr>
<td>Walk</td>
<td>Light Rail (Hiawatha)</td>
<td>Bicycle</td>
</tr>
<tr>
<td>School Bus</td>
<td>Commuter Rail (Northstar)</td>
<td>Motorcycle/Moped (specify)</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. Was this vehicle from your household? □ Yes □ No

   C. Did you pay a toll? □ Yes □ No

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

4. A. Including yourself, how many people were with you on this trip? 1 2 3 4+

   B. Including yourself, how many were household members? 1 2 3 4+

   C. Which household members were with you? ___________________________ , ___________________________ , ___________________________ , ___________________________

### Location 8

5. When did you arrive at Location 8? _____ : ___ ___ AM □ PM

6. **Where** is this?

   Name of Location 8: ___________________________

   If address already reported, provide location name and **GO TO QUESTION 7**

   Street Address: ___________________________

   Type of Place or Business: ___________________________

   City, State, Zip Code: ___________________________

   Nearest Cross Streets: ___________________________

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

<table>
<thead>
<tr>
<th>1st</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home – Paid Work</td>
<td>Other School Activities</td>
<td>Recreation–Watch</td>
</tr>
<tr>
<td>Home – Unpaid Work</td>
<td>Quick Stops</td>
<td>Eat Out</td>
</tr>
<tr>
<td>Home – Other</td>
<td>Personal Business</td>
<td>Religious/Community</td>
</tr>
<tr>
<td>Work</td>
<td>Major Shopping</td>
<td>Accompany Another Person</td>
</tr>
<tr>
<td>Attend Childcare</td>
<td>Everyday Shopping</td>
<td>Pick-Up Passenger</td>
</tr>
<tr>
<td>Attend School</td>
<td>Social</td>
<td>Drop-Off Passenger</td>
</tr>
<tr>
<td>Attend College</td>
<td>Recreation–Participate</td>
<td>Turner Around</td>
</tr>
</tbody>
</table>

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

8. When did you leave Location 8? _____ : ___ ___ 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>
<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 . . .
   - Were you the . . .?
     - [ ] Driver  
     - [ ] Passenger
   - Was this vehicle from your household?  
     - [ ] Yes  
     - [ ] No
   - Did you pay a toll?  
     - [ ] Yes  
     - [ ] No
   - How much, in total, did you personally pay for parking?  
     - [ ] Nothing
     - $ _____ . _____ Was the rate . . .?  
       - [ ] Hourly  
       - [ ] Daily  
       - [ ] Monthly  
       - [ ] Other

4. A. Including yourself, how many people were with you on this trip?  
   - 1 2 3 4+
   B. Including yourself, how many were household members?  
   - 1 2 3 4+
   C. Which household members were with you?  
   ______________________ ,   ______________________ ,  ______________________ , ______________________

### Location 7

5. When did you arrive at Location 7?  
   ___ : ___  
   [ ] AM  
   [ ] PM

6. Where is this?  
   Name of Location 7: ______________________
   Street Address: ______________________  
   Type of Place or Business: ______________________
   If address already reported, provide location name and GO TO QUESTION 7

   City, State, Zip Code: ______________________  
   Nearest Cross Streets: ______________________

7. A. What was your primary activity at Location 7? (check only ONE box)
   - [ ] Home – Paid Work  
   - [ ] Home – Unpaid Work  
   - [ ] Home – Other  
   - [ ] Work  
   - [ ] Attend Childcare  
   - [ ] Attend School  
   - [ ] Attend College  
   - [ ] Recreation–Participate  
   - [ ] Religious/Community  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Recreation–Participate  
   - [ ] Religious/Community  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Recreation–Participate
   B. Other activities at Location 7, if any?  
   ______________________ ,   ______________________ ,  ______________________ , ______________________

8. When did you leave Location 7?  
   ___ : ___  
   [ ] 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>
<tr>
<th>1st</th>
<th>2nd (if needed)</th>
<th>3rd (if needed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Car, van, truck</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 . . .
   - Were you the . . .?
     - [ ] Driver  
     - [ ] Passenger
   - Was this vehicle from your household?  
     - [ ] Yes  
     - [ ] No
   - Did you pay a toll?  
     - [ ] Yes  
     - [ ] No
   - How much, in total, did you personally pay for parking?  
     - [ ] Nothing
     - $ _____ . _____ Was the rate . . .?  
       - [ ] Hourly  
       - [ ] Daily  
       - [ ] Monthly  
       - [ ] Other

4. A. Including yourself, how many people were with you on this trip?  
   - 1 2 3 4+
   B. Including yourself, how many were household members?  
   - 1 2 3 4+
   C. Which household members were with you?  
   ______________________ ,   ______________________ ,  ______________________ , ______________________

### Location 2

5. When did you arrive at Location 2?  
   ___ : ___  
   [ ] AM  
   [ ] PM

6. Where is this?  
   Name of Location 2: ______________________
   Street Address: ______________________  
   Type of Place or Business: ______________________
   If address already reported, provide location name and GO TO QUESTION 7

   City, State, Zip Code: ______________________  
   Nearest Cross Streets: ______________________

7. A. What was your primary activity at Location 2? (check only ONE box)
   - [ ] Home – Paid Work  
   - [ ] Home – Unpaid Work  
   - [ ] Home – Other  
   - [ ] Work  
   - [ ] Attend Childcare  
   - [ ] Attend School  
   - [ ] Attend College  
   - [ ] Recreation–Participate  
   - [ ] Religious/Community  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Recreation–Participate  
   - [ ] Religious/Community  
   - [ ] Major Shopping  
   - [ ] Social  
   - [ ] Accompany Another Person  
   - [ ] Pacific Shopping  
   - [ ] Drop-Off Passenger  
   - [ ] Recreation–Participate
   B. Other activities at Location 2, if any?  
   ______________________ ,   ______________________ ,  ______________________ , ______________________

8. 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**

5. When did you arrive at Location 6? _____ : _____ **AM** **PM**

6. Where is this?

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

7. 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? _____ _____ _____

8. When did you leave Location 6? _____ : _____ **AM** **PM**

---

### Travel: How did you get to Location 6?

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

<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</td>
<td>8 Bicycle</td>
</tr>
<tr>
<td>School Bus</td>
<td>6 Commuter Rail</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. Was this vehicle from your household? ☐ Yes ☐ No
   - C. Did you pay a toll? ☐ Yes ☐ No
   - D. How much, in total, did you personally pay for parking? ☐ Nothing

4. A. Including yourself, how many people were with you on this trip? 1 2 3 4+
   - B. Including yourself, how many were household members? 1 2 3 4+
   - C. Which household members were with you?

   _____________________, _____________________, _____________________, _____________________

5. When did you arrive at Location 6? _____ : _____ **AM** **PM**

6. Where is this?
   - Name of Location 6
   - Street Address
   - Type of Place or Business
   - City, State, Zip Code
   - Nearest Cross Streets

7. 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? _____ _____ _____

8. When did you leave Location 6? _____ : _____ **AM** **PM**

---
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>
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</tr>
<tr>
<td>Walk</td>
<td>5 Light Rail (Hiawatha)</td>
<td>8 Bicycle</td>
</tr>
<tr>
<td>3 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  □ 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. Was this vehicle from your household? □ Yes □ No
C. Did you pay a toll? □ Yes □ No
D. How much, in total, did you personally pay for parking? □ Nothing
   $ __________ $ __________ Was the rate...? □ Hourly □ Daily □ Monthly □ Other

4. A. Including yourself, how many people were with you on this trip? 1 2 3 4+
   B. Including yourself, how many were household members? 1 2 3 4+
   C. Which household members were with you?

Location 5

5. When did you arrive at Location 5? __ __ : __ __ □ AM □ PM

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

GO TO QUESTION 7

7. A. What was your primary activity at Location 5? (check only ONE box)
   □ Home – Paid Work □ Home – Unpaid Work □ Home – Other □ Work □ Attend Childcare □ Attend College
   □ Other School Activities □ Quick Stops □ Major Shopping □ Everyday Shopping □ Social
   □ Personal Business □ Religious/Community □ Accompany Another Person □ Pick-Up Passenger □ Recreation–Participate
   □ Recreation–Watch □ Eat Out □ Other □ Other
   B. Other activities at Location 5, if any? __ __ __

8. When did you leave Location 5? __ __ : __ __ □ AM □ PM □ Did Not Leave

Location 2

5. When did you arrive at Location 2? __ __ : __ __ □ AM □ PM

6. Where is this?
   Name of Location 2 ________________________________
   Street Address ________________________________
   Type of Place or Business ________________________________
   City, State, Zip Code ________________________________
   Nearest Cross Streets ________________________________

GO TO QUESTION 7

7. A. What was your primary activity at Location 2? (check only ONE box)
   □ Home – Paid Work □ Home – Unpaid Work □ Home – Other □ Work □ Attend Childcare □ Attend College
   □ Other School Activities □ Quick Stops □ Major Shopping □ Everyday Shopping □ Social
   □ Personal Business □ Religious/Community □ Accompany Another Person □ Pick-Up Passenger □ Recreation–Participate
   □ Recreation–Watch □ Eat Out □ Other □ Other
   B. Other activities at Location 2, if any? __ __ __

8. 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>
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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. Was this vehicle from your household? □ Yes □ No
   
   C. Did you pay a toll? □ Yes □ No
   
   D. How much, in total, did you personally pay for parking? □ Nothing $____ ____ : ____ ____ Was the rate...? □ Hourly □ Daily □ Monthly □ Other

4. A. Including yourself, how many people were with you on this trip? 1 2 3 4+
   
   B. Including yourself, how many were household members? 1 2 3 4+
   
   C. Which household members were with you? ___________________ , ___________________ , ___________________ , ___________________

### Location 3

5. When did you arrive at Location 3? _____ : _____ □ AM □ PM

6. Where is this? ___________________

   Name of Location 3

   If address already reported, provide location name and Nearest Cross Streets

   GO TO QUESTION 7

   Street Address ___________________

   Type of Place or Business

   City, State, Zip Code

   GO TO QUESTION 7

   Name of Location 4

   If address already reported, provide location name and Nearest Cross Streets

   GO TO QUESTION 7

   Street Address ___________________

   Type of Place or Business

   City, State, Zip Code

   Nearest Cross Streets

7. 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? ______ ______ ______

8. 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>
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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. Was this vehicle from your household? □ Yes □ No
   
   C. Did you pay a toll? □ Yes □ No
   
   D. How much, in total, did you personally pay for parking? □ Nothing $____ ____ : ____ ____ Was the rate...? □ Hourly □ Daily □ Monthly □ Other

4. A. Including yourself, how many people were with you on this trip? 1 2 3 4+
   
   B. Including yourself, how many were household members? 1 2 3 4+
   
   C. Which household members were with you? ___________________ , ___________________ , ___________________ , ___________________

### Location 4

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

6. Where is this? ___________________

   Name of Location 4

   If address already reported, provide location name and Nearest Cross Streets

   GO TO QUESTION 7

   Street Address ___________________

   Type of Place or Business

   City, State, Zip Code

   GO TO QUESTION 7

   Name of Location 4

   If address already reported, provide location name and Nearest Cross Streets

   GO TO QUESTION 7

   Street Address ___________________

   Type of Place or Business

   City, State, Zip Code

   Nearest Cross Streets

7. 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? ______ ______ ______

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