

FORM **RMM-2**
(7-2-90)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR
OHIO STATE UNIVERSITY

NOTICE — All information which would permit identification of the individual will be held strictly confidential, will be used only by persons engaged in and for the purposes of the survey and will not be disclosed or released to others without the consent of the individual in accordance with Title 13, Sections 8 and 9.

1990 RESURVEY OF MATURE MEN

PGM 2

METHODS OF LOCATING RESPONDENT WHO HAS MOVED	RECORD OF CALLS			
<i>(Fill only if respondent has MOVED.)</i> Successful Unsuccessful <input type="checkbox"/> 0001 1 <input type="checkbox"/> 2 <input type="checkbox"/> New occupants <input type="checkbox"/> 0002 3 <input type="checkbox"/> 4 <input type="checkbox"/> Neighbors <input type="checkbox"/> 0003 5 <input type="checkbox"/> 6 <input type="checkbox"/> Landlord or apartment manager <input type="checkbox"/> 0004 7 <input type="checkbox"/> 8 <input type="checkbox"/> Post office <input type="checkbox"/> 0005 1 <input type="checkbox"/> 2 <input type="checkbox"/> Telephone company (including directory and information operator) <input type="checkbox"/> 0006 3 <input type="checkbox"/> 4 <input type="checkbox"/> Persons listed on back of record card <input type="checkbox"/> 0007 5 <input type="checkbox"/> 6 <input type="checkbox"/> Computer printout <input type="checkbox"/> 0008 7 <input type="checkbox"/> 8 <input type="checkbox"/> Other — <i>Specify</i> _____	Date	Time	Comments	
			a.m. p.m.	
			a.m. p.m.	
			a.m. p.m.	
			a.m. p.m.	
			a.m. p.m.	
			a.m. p.m.	
			a.m. p.m.	

PGM 3 RECORD OF INTERVIEW				
Method of interview <input type="checkbox"/> Telephone <input type="checkbox"/> Personal visit <input type="checkbox"/> Both 0009	Date completed Month Day Year 0010	Length of interview <i>(Minutes)</i> 0011	Interview time Began Ended a.m. a.m. p.m. p.m.	
Regional Office code _____ 00	Interviewed by Name			Code

NONINTERVIEW REASON
<input type="checkbox"/> 0012 1 <input type="checkbox"/> Unable to locate sample person (no good address) <input type="checkbox"/> 2 <input type="checkbox"/> Able to locate sample person, unable to contact <input type="checkbox"/> 3 <input type="checkbox"/> Sample person refused — <i>Give full explanation</i> _____ <input type="checkbox"/> 4 <input type="checkbox"/> Sample person mentally or physically incapable, not institutionalized, no proxy available or proxy refused <input type="checkbox"/> 5 <input type="checkbox"/> Sample person mentally or physically incapable, is institutionalized, no proxy available or proxy refused <input type="checkbox"/> 6 <input type="checkbox"/> Sample person mentally or physically incapable, is institutionalized, institution refused to cooperate <input type="checkbox"/> 7 <input type="checkbox"/> Sample person temporarily absent, no proxy available or proxy refused — <i>Give return date</i> <i>(Month, Day, Year)</i> _____ <input type="checkbox"/> 8 <input type="checkbox"/> Sample person moved outside the U.S., no proxy available or proxy refused — <i>Give full explanation</i> _____ <input type="checkbox"/> 9 <input type="checkbox"/> Other — <i>Specify</i> _____

<p>R1. Address where sample person living at time of interview — <i>Transcribe information for this item from RMM-1 record card item 1b.</i></p> <p><input type="checkbox"/> 0013 1 <input type="checkbox"/> Same as questionnaire label — <i>GO to R2</i> 2 <input type="checkbox"/> Different from questionnaire label — <i>Transcribe</i> ✓</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td colspan="2">Number and street</td></tr> <tr><td colspan="2">City or Post Office name</td></tr> <tr><td>State</td><td>ZIP Code</td></tr> </table>	Number and street		City or Post Office name		State	ZIP Code	<p>R2. Sample person's permanent address — <i>Transcribe information from RMM-1 record card item 1d.</i></p> <p><i>Enter permanent address in box ONLY if different from R1. ✓</i></p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td colspan="2">Number and street</td></tr> <tr><td colspan="2">City or Post Office name</td></tr> <tr><td>State</td><td>ZIP Code</td></tr> </table>	Number and street		City or Post Office name		State	ZIP Code
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Section 5 – RECREATION, FAMILY, AND SOCIAL RELATIONSHIPS

CHECK ITEM VV

Sample person lives –

0362

- 1 In institution – *SKIP to Check Item WW, page 30*
- 2 All others – *ASK 59*

59. We are interested in how you spend your leisure time. During the course of the last 12 months –

0363

a. Have you participated in any sports or exercise, such as golf, tennis, biking, swimming, bowling, jogging, or any others?

- 1 Yes – *ASK 59b*
- 2 No – *SKIP to 60a*

Show Flashcard J.

b. About how many hours would you say you spent on these kinds of activities during the past 12 months? Select one of the categories shown on this card.

0364

- 1 Less than 20 hours
- 2 20 to 39 hours
- 3 40 to 79 hours
- 4 80 to 159 hours
- 5 160 hours or more

60a. Did you yourself do any work around the house, like painting or doing repairs on your home, working in the yard or garden, or repairing or maintaining a car or truck that you (or your spouse) own?

0365

- 1 Yes – *ASK 60b*
- 2 No – *SKIP to 61a*

Show Flashcard J.

b. About how many hours did you spend on these kinds of activities during the past 12 months?

0366

- 1 Less than 20 hours
- 2 20 to 39 hours
- 3 40 to 79 hours
- 4 80 to 159 hours
- 5 160 hours or more

61a. Have you helped friends, neighbors or relatives (who do not live with you) without being paid? I am thinking of such things as providing transportation, running errands, helping them work on their homes or cars, providing childcare, and so forth.

0367

- 1 Yes – *ASK 61b*
- 2 No – *SKIP to 62a*

Show Flashcard J.

b. About how many hours did you spend on these kinds of activities during the past 12 months?

0368

- 1 Less than 20 hours
- 2 20 to 39 hours
- 3 40 to 79 hours
- 4 80 to 159 hours
- 5 160 hours or more

62a. Have you done any volunteer work for a religious organization, an educational organization, a political group or labor union, a senior citizen group, a hospital, or any other organization?

0369

- 1 Yes – *ASK 62b*
- 2 No – *SKIP to 63a*

Show Flashcard J.

b. About how many hours did you spend on these kinds of activities during the past 12 months?

0370

- 1 Less than 20 hours
- 2 20 to 39 hours
- 3 40 to 79 hours
- 4 80 to 159 hours
- 5 160 hours or more

63a. Have you gone to movies, plays, concerts, sporting events, or other paid entertainment?

0371

- 1 Yes – *ASK 63b*
- 2 No – *SKIP to 64a*

Show Flashcard J.

b. About how many hours did you spend at such entertainment during the past 12 months?

0372

- 1 Less than 20 hours
- 2 20 to 39 hours
- 3 40 to 79 hours
- 4 80 to 159 hours
- 5 160 hours or more

64a. Have you taken a trip away from home lasting longer than one day?

0373

- 1 Yes – *ASK 64b*
- 2 No – *SKIP to 65, page 30*

b. About how many days were you away from home on such trips? Would you say less than 7 days, 7–13 days, 14–20 days, 21–27 days, or 28 days or more?

0374

- 1 Less than 7 days
- 2 7–13 days
- 3 14–20 days
- 4 21–27 days
- 5 28 days or more