

understand the preferences of today's smokers. And you could be eligible for future offers of special interest to smokers.

15 Esther Avenue
Binghamton, NY 13903-2021

By responding to this survey and signing below, I certify that I am a cigarette smoker 21 years of age or older. I am also willing to receive free samples of cigarettes and incentive items in the mail, subject to applicable state and federal law.

Signature (required)

X

Birthdate (required)

Mo. / Day. / Yr.

1. What is your regular brand of cigarettes—that is, the brand you smoke most often?

(brand)

2. Is your regular brand...? (Check one.)

☐ Regular King Size ☐ 100's or ☐ 120's

3. Is your regular brand...? (Check one.)

☐ Menthol or ☐ Non-Menthol

4. Is your regular brand...? (Check one.)

☐ Filter or ☐ Non-Filter

5. Is your regular brand...? (Check one.)

☐ Lowest/1 mg Tar ☐ Medium
☐ Ultra/Extra Low Tar ☐ Full Flavor
☐ Light/Mild

6. Do you usually buy it by the ...?

☐ Pack ☐ Carton ☐ Both Ways

7. How long have you smoked this brand?

☐ Less than 1 year ☐ 2 to 3 years
☐ 1 to 2 years ☐ 3 to 5 years
☐ Over 5 years

8. What, if any, was your previous brand?

(brand)

9. The next time you go to the store, if your regular brand were not available, what would you do? (Check one.)

☐ Go to another store to buy my regular brand.
☐ Buy another type or length of my regular brand.
☐ Wait until the store has my regular brand.
☐ Buy a different brand entirely.

10. Which of the following statements best describes the way you use cigarette coupons? (Check one.)

☐ I use almost any cigarette coupon I get.
☐ I occasionally use coupons for cigarettes, even if they are not for my regular brand.
☐ I only use coupons if they are for my regular brand.
☐ I never use coupons to buy cigarettes.

11. How often do you use special in-store cigarette offers, such as a free gift with purchase, a 2 for 1, or special prices?

Frequently: Occasionally: Never:
I look for special offers for my regular brand... ☐ ☐ ☐

I take advantage of special offers for brands other than my regular brand... ☐ ☐ ☐

12. If your regular brand were not available, what other brands would you consider buying?

(Check all that apply.)

<input type="checkbox"/> Alpine	<input type="checkbox"/> Doral	<input type="checkbox"/> Now
<input type="checkbox"/> Basic	<input type="checkbox"/> GPC	<input type="checkbox"/> Parliament
<input type="checkbox"/> Benson & Hedges	<input type="checkbox"/> Kent	<input type="checkbox"/> Pyramid
<input type="checkbox"/> Best Buy	<input type="checkbox"/> Kool	<input type="checkbox"/> Raleigh Extra
<input type="checkbox"/> Best Value	<input type="checkbox"/> Marlboro	<input type="checkbox"/> Salem
<input type="checkbox"/> Bristol	<input type="checkbox"/> Merit	<input type="checkbox"/> Store Brand/Generic
<input type="checkbox"/> Bucks	<input type="checkbox"/> Misty	<input type="checkbox"/> Superslims
<input type="checkbox"/> Cambridge	<input type="checkbox"/> Monarch	<input type="checkbox"/> True
<input type="checkbox"/> Camel	<input type="checkbox"/> Montclair	<input type="checkbox"/> Vantage
<input type="checkbox"/> Capri	<input type="checkbox"/> More	<input type="checkbox"/> Viceroy
<input type="checkbox"/> Carlton	<input type="checkbox"/> Newport	<input type="checkbox"/> Virginia Slims
		<input type="checkbox"/> Winston

13. Please list all the brands of cigarettes you smoked at least one pack of in the past two weeks. How many packs did you smoke of each brand? (Use as many lines as you need. Write in exact number of packs for each brand below. Note: 1 carton = 10 packs.)

(brand)	# of Packs
(brand)	# of Packs
(brand)	# of Packs
(brand)	# of Packs

14. Which of the following best describes you? (Check one.)

☐ White ☐ Asian
☐ African-American ☐ American Indian
☐ Hispanic ☐ Other

15. Is there another smoker in your household 21 years of age or older? Please print full name, birthdate and regular brand.

First Name	M.I.	Last Name
Birthdate	Regular Brand	

16. Would you be interested in receiving information about issues that affect smokers?

☐ Yes ☐ No

17. Would you be interested in joining a smokers' group to help protect your right to smoke?

☐ Yes ☐ No

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Detach at perforation.

Take a moment to tell us about your smoking preferences.

Please take a moment to fill out
the postage-paid survey below and
drop it in the mail today.

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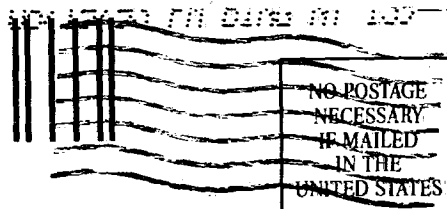
Print corrections below.

Your answers will help us to better

Ms. Lorraine Wheeler

To mail survey:
Fold along dotted lines
shown below. Moisten
glue strip to seal.

FOLD



BUSINESS REPLY MAIL

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