

OMB Number: 2528-0288
 Expiration Date: 10/31/2015



Tribal/Tribally-Designated Housing Entity (TDHE) Survey

Telephone Interview

Case #:		
Interviewer Name:		
Interviewer ID #:		
Interview Date:		
Start Time Session 1:		AM PM
Finish Time Session 1:		AM PM
Start Time Session 2: (if applicable)		AM PM
Finish Time Session 2: (if applicable)		AM PM

Tribal Area Contact Information	
Site:	
Contact Name:	
Telephone:	Email:
Address:	

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SCRIPT FOR SETTING UP THE TDHE SURVEY APPOINTMENT:

I am calling to speak with the Tribal Housing Official, **[NAME OF PERSON]**.

Hello, this is **[NAME]** from NORC at the University of Chicago. I am calling in reference to the Assessment of Native American, Alaska Native, and Native Hawaiian Housing Needs Tribal Designated Housing Entity Survey. Recently you should have received a letter from Thomas Kingsley and Carol Hafford regarding the project.

IF THE PERSON REMEMBERS THE LETTER, CONTINUE. IF THEY DO NOT REMEMBER THE LETTER, OFFER TO IMMEDIATELY EMAIL A COPY AND THEN CONTINUE TO INFORM THEM OF THE PROJECT, ANSWER ANY QUESTIONS, AND SET UP AN APPOINTMENT IF POSSIBLE. IF MORE INFORMATION IS REQUESTED, FIND OUT THE BEST TIME TO CALL BACK.

As the letter explains, this study will describe housing needs and socioeconomic conditions in Indian Country. It will provide HUD with information on:

- how current programs are operating,
- the extent to which housing needs are being addressed,
- and demographic and economic trends.

It will also answer questions about home ownership in Indian Country and the impacts of the recent financial crisis.

[NAME OF RESERVATION/VILLAGE] was one of only 80 sampled nationally to participate. The interview will take place on the phone at any time convenient for you. It takes approximately 45 minutes to complete. Are there any questions I could answer for you?

BE PREPARED TO BE FLEXIBLE WHEN SETTING UP A TIME FOR THE INTERVIEW. IF YOU CANNOT BE AVAILABLE AT THE TIME REQUESTED, LET YOUR FIELD PROJECT MANAGER KNOW, AND SHE WILL FIND A PERSON AVAILABLE AT THAT TIME. WHEN ALL QUESTIONS ARE ANSWERED:

What day and time would be good for you to speak with me and complete the interview? I'll send you an email as a reminder.

Date	Time	AM/PM (CIRCLE ONE)
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Email address

Thank you so much for speaking with me today. I look forward to speaking with you again at **[DATE/TIME]** for the interview.

RECORD ALL INFORMATION IN THE CALL RECORDS AND ENTER THE APPOINTMENT ON YOUR CALENDAR.

SCRIPT FOR CONDUCTING THE TDHE SURVEY INTERVIEW:

INTERVIEWER: Hello, my name is [NAME] from NORC at the University of Chicago. I have an appointment with (name) to conduct our HUD-sponsored survey of Indian Housing Block Grant administrators. Can I speak to her/him please?

WHEN CONNECTED: Is this (name)?

IF YES: Do you have any questions about the survey? May I tell you more about the survey?

IF NO:

MAKE INQUIRIES AS NEEDED TO FIND THE RESPONDENT OR RESCHEDULE WITH THE ORIGINAL RESPONDENT. IF THE ORIGINAL RESPONDENT WILL BE UNABLE TO DO THE INTERVIEW AND CAN'T RESCHEDULE, ASK IF SOMEONE ELSE CAN DO IT. SAY: "For the survey, we need to speak with the most senior person other than (name) in charge of administering IHBG funds in your organization. Are you the appropriate person in your organization to answer questions for this survey?"

IF YES: What is your job title? _____

Ask how position relates to the executive director:

IF NO: Would you provide the contact information of the person in your organization that is? **[RECORD INFORMATION]**

Thank you for your time. **[END CALL]**

The survey will take approximately 45 minutes to complete. Is now a good time to speak?

IF NO: When would be a good time for you to speak with me? **[RECORD INFORMATION]**

Best date/time to speak with respondent:

___/___/_____:_____ AM PM
Date Time AM/PM (CIRCLE ONE)
MM/DD/YY HH:DD

Phone number: _____

IF YES: [CONDUCT SURVEY.]

INFORMED CONSENT

As you may have learned from the [**ADVANCE LETTER SENT/MATERIALS SHARED/TRIBAL LETTER/COMMUNITY PRESENTATION HELD**], this survey is conducted to help understand the housing needs of American Indian and Alaska Native families. It is sponsored by the Department of Housing and Urban Development and being conducted across Indian Country.

Your participation is very important to the success of this survey. This survey is voluntary, which means that you don't have to participate and you can decide not to answer any specific questions. You also may end the interview at any point. The interview will take about 45 minutes.

The information you provide will be confidential, and will not be shared with anyone except for research staff working on the study. This includes anything that can identify you such as your name, address, or telephone number. Everyone who works on this survey has signed a legal document stating they will not reveal any of your personal information and can be severely penalized if they do.

The survey includes questions on the Tribe/TDHE organization and institutional relationships; staff, training, and procedures for the Tribe/TDHE; perceptions of social/economic conditions, trends and issues in the area; perceptions of resident housing satisfaction and preferences; housing problems and needs; challenges in housing development and operation; IHBG planning and implementation approaches; assessment of rules and procedures under NAHASDA; and assessment of mortgage lending programs (Section 184 and others). The survey is neither an audit nor a compliance review. The information you provide will be helpful to improve housing in your community and other communities in Indian Country.

The information that you provide will be kept private. You will not be quoted by name and no names will be included in the summary reports. A report will be shared with the tribe/native village at a later date. It will summarize the findings, without giving names or other information that would identify you or the tribe/native village.

At the end of the study we will prepare a summary of all of the responses to the survey in a computer data file. The summary will include responses from people in many tribal communities. The summary is called a public use file. It will not contain any names or addresses or other information that could identify you or your tribe. The summary will be carefully protected. We will give it to the federal Department of Housing and Urban Development. We are required to give it to them. Other researchers who are interested in housing needs may use the public use file someday. The (name of Tribe/Native Village) may ask us to give back the responses from your community. If they do, we will give them a summary of responses in a computer file. That computer file will not have names or addresses. We will hide or take out any information that may identify you or anyone in your household, such as the number of persons who live there. This is done to protect your confidentiality. But there is always a slight chance that tribal officials or administrators will be able to identify people based on the responses. It is possible, but not likely. We are very careful about protecting your personal information.

If you have questions about your rights as a survey participant, please call the IRB Human Subjects Protection hotline, toll-free, at (866) 309-0542. You may also email native-housing@norc.org or visit www.norc.org.

Assessment of Native American, Alaska Native, and Native Hawaiian Housing Needs

Do I have your permission to begin the interview?

IF YES, Let's begin. [**CERTAIN TRIBES MAY REQUIRE WRITTEN CONSENT**]

IF NO, ask:

Are there any questions I can answer for you?

What is the reason you prefer not doing the interview?

When is a good time to come back?

Date: ___/___/_____

Time: ___:___ ___ AM/PM (circle)

A. TRIBE/TDHE ORGANIZATION AND INSTITUTIONAL RELATIONSHIPS

<p>A1. Before we start, I'd like to know how you refer to your organization so I can use the correct term. Is your organization an office of the tribal government, a separate Tribal Designated Housing Entity, or something else?</p>	<p><input type="checkbox"/> Office of tribal government <input type="checkbox"/> Separate Tribal Designated Housing Entity (TDHE) <input type="checkbox"/> Something else (SPECIFY): _____</p> <p style="text-align: center;">IF 'TDHE', CONTINUE TO A1a.</p> <p style="text-align: center;">IF 'OFFICE OF TRIBAL GOVERNMENT' OR 'SOMETHING ELSE', SKIP TO A2.</p>
<p>A1a. If a TDHE, is your organization currently, or was it ever, considered an "Indian Housing Authority"?</p>	<p>YES NO DON'T KNOW REFUSED</p>
<p>A2. This survey pertains to your work in administering Indian Housing Block Grant, IHBG, funds for the [NAME OF RESERVATION]. I would like to know, however, if your organization also administers IHBG grants for other tribal areas as well?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>[IF YES]: For how many other tribal areas? _____</p>
<p>A3. Has your organization always managed the IHBG grants for this reservation,¹ or has administration of the block grant transferred from a different organization since 1998?</p>	<p><input type="checkbox"/> Always managed the IHBG grants for this tribal area <input type="checkbox"/> Administration of the block grant transferred <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p> <p style="text-align: center;">IF 'ALWAYS', SKIP TO A4. IF 'TRANSFERRED'/DK/REF, CONTINUE TO A3a.</p>
<p>A3a. [IF NOT THE ORIGINAL ADMINISTRATOR OF IHBG FUNDS]: In what year did your organization begin to administer the IHBG for this reservation?</p>	<p>YEAR: _____</p>

¹ This form of the survey assumes the sampled tribal area is a "reservation." Names of other tribal area types will be inserted in other versions of the instrument as appropriate.

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<p>A4. What is the name, title and organizational affiliation of the person your organization reports to in administering IHBG funds in this reservation?</p>	<p>Name: _____</p> <p>Title: _____</p> <p>Organizational affiliation: _____</p>
<p>A5. How is the executive director of your organization selected?</p>	<p><input type="checkbox"/> Selected by tribal government</p> <p><input type="checkbox"/> Selected by your organization’s own Board of Directors</p> <p><input type="checkbox"/> Other (SPECIFY): _____</p> <p><input type="checkbox"/> DON’T KNOW</p> <p><input type="checkbox"/> REFUSED</p>
<p>A6. How many executive directors has your organization had over the past ...</p>	<p>3 years? _____</p> <p>5 years? _____</p> <p><input type="checkbox"/> DON’T KNOW</p> <p><input type="checkbox"/> REFUSED</p>
<p>A7. Does your organization have its own board of directors or commissioners?</p>	<p>YES NO DON’T KNOW REFUSED</p>
<p>A8. Do you partner or collaborate with any other public agencies or nonprofit organizations in providing housing services in conjunction with the use of IHBG funds?</p>	<p>YES NO DON’T KNOW REFUSED</p> <p style="text-align: center;">IF YES, <u>CONTINUE TO A9a.</u> IF NO/DK/REF, <u>SKIP to B1.</u></p>
<p>A9a. If yes, what organizations do you partner or collaborate with? READ LIST OUT LOUD TO RESPONDENT.</p>	
✓	Partner Organization
<input type="checkbox"/>	Non-tribal local jurisdiction
<input type="checkbox"/>	Local non-tribal Public Housing Authority
<input type="checkbox"/>	Local nonprofits and service providers
<input type="checkbox"/>	Other tribal programs (e.g., IHS, economic development, education, TANF)
<input type="checkbox"/>	Other (SPECIFY): _____
<input type="checkbox"/>	DON’T KNOW
<input type="checkbox"/>	REFUSED

B. STAFF, TRAINING, AND PROCEDURES

B1. How many full-time staff members does your organization currently have?	_____ (number of FT staff) DON'T KNOW REFUSED			
B2. Has the number of staff increased, stayed the same, or decreased over the past 3 years?	<input type="checkbox"/> Increased <input type="checkbox"/> Stayed the same <input type="checkbox"/> Decreased <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED			
B2. How many of them have been working for your organization for 3 years or more?	_____ (number working 3 years or more) DON'T KNOW REFUSED			
B3. How many part-time staff members do you have?	_____ (number of PT staff) DON'T KNOW REFUSED			
B4. We are interested in learning how generalized or specialized your staff is. Do any of your staff members work <u>only</u> on the following tasks? IF CURRENT FULL-TIME STAFF IS 2 OR LESS: DO NOT ASK THIS QUESTION, SKIP TO B5. IF CURRENT FULL-TIME STAFF IS 3 OR MORE: READ THE FOLLOWING LIST OUT LOUD TO RESPONDENT.	YES	NO	DON'T KNOW	REFUSED
Administrative tasks, such as record keeping and organizing, preparing documents	YES	NO	DK	REF
PR/Communications with the public	YES	NO	DK	REF
Finances, Budget	YES	NO	DK	REF
Case management with residents	YES	NO	DK	REF
Construction	YES	NO	DK	REF
Building management	YES	NO	DK	REF
Building maintenance	YES	NO	DK	REF
Contracts	YES	NO	DK	REF
Information management/ computer systems	YES	NO	DK	REF
Other (SPECIFY): _____	YES	NO	DK	REF

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<p>B5. Do you contract out to for-profit companies or nonprofit organizations to provide services to your organization on a regular basis?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES, <u>CONTINUE TO B5a.</u> IF NO/DK/REF, <u>SKIP TO B6a.</u></p>
<p>B5a. The following is a list of possible functions that you might contract out to other entities. Which of these do you outsource on a routine basis?</p> <p>READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.</p> <p>SELECT ALL THAT APPLY.</p>	<p><input type="checkbox"/> Legal help</p> <p><input type="checkbox"/> Finance/Accounting</p> <p><input type="checkbox"/> Information management/IT/computer systems</p> <p><input type="checkbox"/> Building management/ operations</p> <p><input type="checkbox"/> Rent Collection</p> <p><input type="checkbox"/> Maintenance</p> <p><input type="checkbox"/> Construction</p> <p><input type="checkbox"/> Other (SPECIFY): _____</p> <p><input type="checkbox"/> DON'T KNOW</p> <p><input type="checkbox"/> REFUSED</p>

REFER RESPONDENT TO SHOWCARD A

We are interested in the most effective methods that you use to communicate with tribal members about the programs you offer. Identify your top three choices from the list I will read to you.

- A. Brochures
- B. Word of mouth
- C. Handbooks
- D. Flyers
- E. Newspaper notices
- F. Website
- G. Community meetings
- H. Other (SPECIFY: _____)
- I. DON'T KNOW
- J. REFUSED

WRITE IN THE RESPONDENT'S THREE TOP CHOICES IN THE FOLLOWING SPACES

B6a. Of these methods, what is the most effective?

B6b. What is the second most effective?

B6c. What is the third most effective?

B8. There are always improvements organizations can make to become more effective. Examples might include more and better staff training, computer systems, increase in size of staff, or increased funding. What do you see as the highest priorities for improving the effectiveness of your organization?

(OPEN-ENDED)

Record verbatim response:

B9. What types of training would you most like to obtain for you and/or your staff? Identify your top three choices from the list I will read to you.

REFER RESPONDENT TO SHOWCARD B.

- A. Administrative tasks, such as record keeping and organizing, preparing documents
- B. PR/Communications with the public
- C. Finances, Budget
- D. Case management with residents
- E. Construction Management/ building management
- F. Building maintenance
- G. Contracts
- H. Information management/ computer systems
- I. Other (SPECIFY): _____
- J. DON'T KNOW
- K. REFUSED

B9a. What is your top choice?

B9b. What is your second choice?

B9c. What is your third choice?

C. PERCEPTIONS OF SOCIAL/ECONOMIC TRENDS AND ISSUES

<p>C1. How weak or strong would you say the economy in this reservation is, considering such things as strength of private businesses, government employment, and the financial stability of households?</p> <p>READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.</p>	<p><input type="checkbox"/> Very strong <input type="checkbox"/> Somewhat strong <input type="checkbox"/> Neither strong nor weak <input type="checkbox"/> Somewhat weak <input type="checkbox"/> Very weak <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>C2. How would you compare the current economic conditions of this reservation to conditions 5 years ago?</p> <p>READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.</p>	<p><input type="checkbox"/> Better <input type="checkbox"/> Worse <input type="checkbox"/> No Change <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>C3. Of all the residents of this reservation that have jobs, what percent would you estimate work for private businesses?</p> <p>C3a. What are the major types of businesses that provide these jobs? (OPEN-ENDED)</p>	<p>Percent estimate: _____ %</p> <p>Types of Business: _____ _____ _____</p>
<p>C4. Have there been any significant expansions in the tribal economy, or tribal economic development, over the past 5 years such as the development of new businesses or the development of gaming?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES: Could you provide some details about this? _____ _____ _____</p>
<p>C5. Have there been any significant losses in the tribal economy, or tribal economic development, over the past 5 years such as plant closings, loss of employer bases?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES: Could you provide some details about this? _____ _____ _____</p>

D. TRIBE/TDHE PERCEPTIONS OF RESIDENT HOUSING SATISFACTION AND PREFERENCES

D1. For each of the types of housing in your reservation I am about to read to you, please tell me whether residents are very satisfied, satisfied, or not satisfied with their current housing situation.					
READ LIST OUT LOUD TO RESPONDENT.	VERY SATISFIED	SATISFIED	NOT SATISFIED	DON'T KNOW	REFUSED
Formula Current Assisted Stock (FCAS) Mutual Help housing	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF
FCAS rental housing	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF
IHBG owner-occupied housing	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF
IHBG rental housing	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF
Private owner-occupied housing	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF
Other (Specify):	VERY SATISFIED	SATISFIED	NOT SATISFIED	DK	REF

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D2. On a scale from 1 to 5, with 1 being “low priority” and 5 being “high priority,” what priority do you think the residents of the <i>rental</i> units you operate would assign to each of the following? READ LIST OUT LOUD TO RESPONDENT.	1 LOW	2	3	4	5 HIGH	DK	REF
Finding better locations	1	2	3	4	5	DK	REF
Constructing different types of structures	1	2	3	4	5	DK	REF
Improving the external appearance of their structures	1	2	3	4	5	DK	REF
Improving the quality of construction	1	2	3	4	5	DK	REF
Providing more culturally sensitive designs	1	2	3	4	5	DK	REF
Improving the quality of upkeep	1	2	3	4	5	DK	REF
Constructing larger units	1	2	3	4	5	DK	REF
Using a different configuration of rooms	1	2	3	4	5	DK	REF
Using larger lot sizes	1	2	3	4	5	DK	REF
Reducing crime and drug activity in area	1	2	3	4	5	DK	REF
Providing (or linking to) better or more accessible social services	1	2	3	4	5	DK	REF
Improving the landscaping	1	2	3	4	5	DK	REF
Something else? (SPECIFY):_____	1	2	3	4	5	DK	REF

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D3. On a scale from 1 to 5, 1 being “low priority” and 5 being “high priority,” what priority do you think the residents of the <i>owner-occupied</i> units you operate would give to each of the following types of improvements?							
READ LIST OUT LOUD TO RESPONDENT.	1 LOW	2	3	4	5 HIGH	DK	REF
Finding better locations	1	2	3	4	5	DK	REF
Constructing different types of structures	1	2	3	4	5	DK	REF
Improving the external appearance of their structures	1	2	3	4	5	DK	REF
Improving the quality of construction	1	2	3	4	5	DK	REF
Providing more culturally sensitive designs	1	2	3	4	5	DK	REF
Improving the quality of upkeep	1	2	3	4	5	DK	REF
Constructing larger units	1	2	3	4	5	DK	REF
Using a different configuration of rooms	1	2	3	4	5	DK	REF
Using larger lot sizes	1	2	3	4	5	DK	REF
Reducing crime and drug activity in area	1	2	3	4	5	DK	REF
Providing (or linking to) better or more accessible social services	1	2	3	4	5	DK	REF
Improving the landscaping	1	2	3	4	5	DK	REF
Something else? (SPECIFY):_____	1	2	3	4	5	DK	REF

E. TRIBE/TDHE PERCEPTIONS OF HOUSING PROBLEMS AND NEEDS

<p>E1. In general, would you say there is a high unmet need for affordable housing units in this reservation, a moderate unmet need, or a low unmet need for affordable housing units?</p>	<p><input type="checkbox"/> High need <input type="checkbox"/> Moderate need <input type="checkbox"/> Low need <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>E2. Would you say the level of unmet need for affordable housing units in this reservation has increased in the past three years, decreased, or stayed about the same?</p>	<p><input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>E3. Do you maintain a waiting list of households seeking to get assistance through IHBG-funded programs or services?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES, <u>CONTINUE TO E3a.</u> IF NO/DK/REF, <u>SKIP TO E4.</u></p>
<p>E3a. To your knowledge, has the number on the waiting list increased, decreased, or stayed about the same in the past 3 years?</p>	<p><input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>E4. Homelessness can mean many different things. For example, sometimes families double or triple up and live in the same unit, sometimes they live in places that are not meant for people to live in, and sometimes people go to homeless shelters. Can you tell me whether this occurs in your community? For example:</p>	
<p>E4a. Doubling up?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES, <u>CONTINUE TO E4b.</u> IF NO/DK/REF, <u>SKIP TO E4c.</u></p>
<p>E4b. How serious of a problem is doubling up?</p>	<p><input type="checkbox"/> Major <input type="checkbox"/> Moderate <input type="checkbox"/> Minor <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>E4c. Living in places not meant for human habitation?</p>	<p>YES NO DON'T KNOW REF</p> <p>IF YES, <u>CONTINUE TO E4d.</u> IF NO/DK/REF, <u>SKIP TO E4e.</u></p>
<p>E4d. What types of places? FOR EXAMPLE, CARS, ABANDONED BUILDINGS,</p>	<p>SPECIFY: _____ _____</p>

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ETC				
E4e. Does this occur in your community -- use of homeless shelters?	YES	NO	DON'T KNOW	REF
	IF YES, <u>CONTINUE TO E4f</u>			
	IF NO, <u>SKIP TO E5</u>			
E4f. How many homeless shelters are there in this reservation?	Number of homeless shelters: ____			
E5. Now I am going to read a list of items that may or may not be a need in this reservation. For each, please tell me how much of a need you think there is: a high need, some need, or little or no need.				
	High Need	Some Need	Little or No Need	
A. New construction of housing units	3	2	1	
B. Rehabilitation or modernization of existing units	3	2	1	
C. Subsidized homeownership opportunities	3	2	1	
D. Subsidized rent	3	2	1	
E6. About what proportion of assisted rental units within this reservation are in need of major repair or modernization?	<input type="checkbox"/> Not applicable <input type="checkbox"/> 0-10% <input type="checkbox"/> 10-25% <input type="checkbox"/> 25-50% <input type="checkbox"/> Over 50%			
E7. About what proportion of assisted owner-occupied units in this reservation are in need of major repair or modernization?	<input type="checkbox"/> Not applicable <input type="checkbox"/> 0-10% <input type="checkbox"/> 10-25% <input type="checkbox"/> 25-50% <input type="checkbox"/> Over 50% <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED			
E8. What types of repairs have you had to make frequently over the past 3 years for the housing units your organization administers? Refer to List E8 in the materials that were sent to you. REFER RESPONDENT TO SHOWCARD C. SELECT ALL THAT APPLY.	<input type="checkbox"/> a. Roof <input type="checkbox"/> b. Electrical <input type="checkbox"/> c. Plumbing <input type="checkbox"/> d. Interior walls <input type="checkbox"/> e. Exterior surface (not roof) <input type="checkbox"/> f. Property infrastructure, such as sewers, driveways/ parking lots <input type="checkbox"/> g. Other (SPECIFY): _____ <input type="checkbox"/> h. None <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED			

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<p>E9. What type of capital improvements have you made over the past 3 years for the housing units your organization administers? Refer to List E9 in the materials that were sent to you.</p> <p>REFER RESPONDENT TO SHOWCARD D.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a. Roof <input type="checkbox"/> b. Electrical <input type="checkbox"/> c. Plumbing <input type="checkbox"/> d. Interior walls <input type="checkbox"/> e. Exterior surface (not roof) <input type="checkbox"/> f. Asbestos removal <input type="checkbox"/> g. Lead paint abatement <input type="checkbox"/> h. Property infrastructure, such as sewers, driveways/ parking lots <input type="checkbox"/> i. Other (SPECIFY): _____ <input type="checkbox"/> j. None <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED
<p>E10. Are there repairs and improvements to the stock of housing your organization administers that you would currently like to make, but haven't?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p align="center">IF YES, <u>CONTINUE TO E10a.</u> IF NO/DK/REF, <u>SKIP TO E11.</u></p>
<p>E10a. Why haven't you made these changes? Refer to List E10a in the materials that were sent to you.</p> <p>REFER RESPONDENT TO SHOWCARD E.</p> <p>MARK ALL THAT APPLY.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a. Lack of funding <input type="checkbox"/> b. Equipment not available/ Lack of affordable materials <input type="checkbox"/> c. Lack of maintenance professionals/ industries in the area <input type="checkbox"/> d. Difficulties overseeing projects due to limited technical capacity <input type="checkbox"/> e. Difficulties accessing units, such as inadequate road or size of area served <input type="checkbox"/> f. Age of housing stock (too old to repair/renovate) <input type="checkbox"/> g. Harsh climate, recent natural disasters <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED
<p>E11. About how often do you conduct formal inspections of the housing units your organization administers? Refer to List E11 in the materials that were sent to you.</p> <p>REFER RESPONDENT TO SHOWCARD F.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a. Once-when unit is put into service but not after that <input type="checkbox"/> b. When there is new tenant but not after that <input type="checkbox"/> c. Regularly, about once a year <input type="checkbox"/> d. Regularly, about twice a year <input type="checkbox"/> e. Regularly, and more than twice a year <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED

E12. What housing quality standards do you use when assessing housing conditions? Refer to List E12 in the materials that were sent to you.

REFER RESPONDENT TO SHOWCARD G.

- a. Those of a specific housing code adopted by this tribe
- b. Those of a housing code used by neighboring local jurisdiction
- c. Those of state code
- d. Those of a model housing model code
- e. Those used by HUD for the Section 8 program, called Housing Quality Standards (HQS)
- f. There is no set of standards that we use
- DON'T KNOW
- REFUSED

F. APPROACH TO STRATEGY IN INDIAN HOUSING BLOCK GRANT PROGRAM PLANNING AND IMPLEMENTATION

F1. Please tell me which of the groups I am about to read to you, if any, you consult with each year when you prepare your Indian Housing Plan (IHP)? If you do consult with a particular group, please tell me whether you have extensive consultation, some consultation, or no consultation.

READ LIST OUT LOUD TO RESPONDENT.

	EXTENSIVE CONSULTATION	SOME CONSULTATION	NO CONSULTATION
IHBG housing residents	3	2	1
Other community residents	3	2	1
Infrastructure planners (ICDBG and others)	3	2	1
Local nonprofits and service providers	3	2	1
Tribal council	3	2	1
Non-tribal local jurisdiction	3	2	1
State government entity or official	3	2	1
Private land owners	3	2	1
Local housing advocates and experts	3	2	1
ONAP Regional staff or HUD staff	3	2	1

F2. What methods do you use to obtain input from groups in this reservation?

READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.

- Community meetings
- Informal visits and discussions
- Formal recommendations provided in reports, letters or plans
- Voting on program options
- Other (SPECIFY): _____
- DON'T KNOW
- REFUSED

F3. Do you conduct or utilize a formal needs assessment as a basis for your IHP?

- YES the Tribe/TDHE conducts a needs assessment
- YES we utilize the needs assessment conducted by the state agency
- NO we do not conduct or utilize a needs assessment
- DON'T KNOW
- REFUSED

**IF YES, CONTINUE TO F3a.
IF NO/DK/REF, SKIP TO F3c.**

F3a. When was the most recent formal needs assessment conducted?

- In the past year
- Two to four years ago
- 5 years ago or more
- DON'T KNOW

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	<input type="checkbox"/> REFUSED
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F3b. Which of the following were included in your needs assessment?	YES	NO
READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.		
Data on population growth, family income and other family characteristics	YES	NO
Onsite inspection of housing units	YES	NO
Interviews with local housing advocates/ experts	YES	NO
Interviews with tenants or tenant organizations	YES	NO
Public forums held with community residents	YES	NO
Other (SPECIFY): _____	YES	NO

F3c. Has the tribe conducted a physical assessment of units in your service area in the past five years?	YES	NO	DON'T KNOW	REFUSED
IF YES, CONTINUE TO F3d. IF NO/DK/REF, SKIP TO F3E.				

F3d. Does this assessment occur on a regular basis?	YES	NO	DON'T KNOW	REFUSED
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F3e. Other than the formal needs assessment and physical assessment of units that I just asked about, are you aware of any other surveys done in your area regarding population, housing, or socio-economic data?	YES	NO	DON'T KNOW	REFUSED
IF YES, CONTINUE TO F3d. <input type="checkbox"/> IF NO/DK/REF, SKIP TO F3E.				

F3f. What types of data do these surveys collect?	<input type="checkbox"/> Demographics <input type="checkbox"/> Housing data <input type="checkbox"/> Socio-economic conditions <input type="checkbox"/> Something else (SPECIFY): _____
MARK ALL THAT APPLY	

F4. Does IHP give the highest priority to providing assistance inside the reservation, to providing assistance to other parts of the service area outside the reservation boundary(ies), or about equal priority to both?	<input type="checkbox"/> Highest priority inside the reservation <input type="checkbox"/> Highest priority outside reservation boundaries <input type="checkbox"/> About equal priority to both <input type="checkbox"/> DO not work outside of tribal area boundaries <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED
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REFER RESPONDENT TO SHOWCARD H.

Now, please think about your organization's spending priorities. I'm going to read a list of possible activities. When I finish, please tell me what you think your highest funding priority is for this reservation over the next 3 years.

A. Maintaining and operating existing stock

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- B. Creating new rental units through land acquisition, new construction or rehabilitation
- C. Creating new homeowner units through land acquisition, new construction or rehabilitation
- D. Providing assistance to renters to help pay their monthly rent
- E. Providing assistance to homeowners or those who desire to own homes
- F. Serving special populations, such as the elderly, chronically homeless, veterans
- G. Other (SPECIFY): _____
- H. DON'T KNOW
- I. REFUSED

F5a. What is your highest funding priority?

F5b. What is your second priority?

F5c. What is your third priority?

F6. Do you provide any counseling services for eligible families? If so, what types?

READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.

- YES - General financial literacy
- YES - Becoming a homeowner
- NO
- Other (SPECIFY): _____
- DON'T KNOW
- REFUSED

F7. I am going to read a list of different types of special populations. For each one, please tell me if any of your IHBG funds for housing programs target that population.

READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.

Homeless	YES	NO
Elderly	YES	NO
Disabled	YES	NO
Veterans	YES	NO
Domestic violence/victims	YES	NO
Single parents	YES	NO
Other (SPECIFY): _____	YES	NO

F7a. Does the tribe have an office that maintains population figures, tribal enrollment, and residence?

YES NO DON'T KNOW REFUSED

F8. In the past 5 years, how many housing construction and rehabilitation projects has your organization been working on? _____

F8a. How many of these involved housing subsidies from sources other than IHBG funds? _____

F8b. How many of the total projects above (QUESTION F8) were carried out jointly with private developers who have invested their own capital in the project? _____

F9. If you have not been able to develop projects involving other subsidy programs or private sector investment, what have been the major barriers to doing so? Refer to List F9 in the materials that were sent to you.

**REFER RESPONDENT TO SHOWCARD I.
MARK ALL THAT APPLY**

- a. Lack of availability of programs
- b. Administrative constraints
- c. Lack of interest of other organizations/ financial institutions
- d. Political tensions between tribe, TDHE and other organizations
- e. Differing priorities
- f. Other (SPECIFY): _____
- DON'T KNOW
- REFUSED

G. CHALLENGES IN HOUSING DEVELOPMENT AND OPERATION

<p>G1. We are interested in knowing how development costs per housing unit have changed over the past three years. Have they increased greatly, increased somewhat, decreased somewhat, decreased greatly, or stayed about the same?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Increased greatly <input type="checkbox"/> Increased somewhat <input type="checkbox"/> Decreased somewhat <input type="checkbox"/> Decreased greatly <input type="checkbox"/> Stayed about the same <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED
<p>G2. What are the three most important factors that raise the cost of developing new housing in this reservation?</p> <p>REFER RESPONDENT TO SHOWCARD J.</p> <p>ONLY SELECT THREE OPTIONS TOTAL FOR THIS QUESTION</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a. Developing infrastructure <input type="checkbox"/> b. Environmental conditions <input type="checkbox"/> c. Geography and terrain of area served <input type="checkbox"/> d. Availability of labor and construction professionals <input type="checkbox"/> e. Availability of construction materials <input type="checkbox"/> f. Availability of outside financing <input type="checkbox"/> g. Acquiring/assembling land <input type="checkbox"/> h. Cost of labor <input type="checkbox"/> i. Strict building code requirements <input type="checkbox"/> j. Lack of funds <input type="checkbox"/> k. Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED
<p>G3. What are the three most important factors that lengthen the time it takes to develop new housing in this reservation?</p> <p>REFER RESPONDENT TO SHOWCARD K.</p> <p>ONLY SELECT THREE OPTIONS TOTAL FOR THIS QUESTION</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a. Environmental review process <input type="checkbox"/> b. Developing architectural/engineering plans <input type="checkbox"/> c. Satisfying HUD administrative requirements <input type="checkbox"/> d. Satisfying state or local administrative requirements <input type="checkbox"/> e. Locating and securing outside financial support <input type="checkbox"/> f. Lack of staff <input type="checkbox"/> g. Issues with property rights and leasing land <li style="background-color: #e0f0e0;"><input type="checkbox"/> i. Obtaining easements and access <input type="checkbox"/> h. Transport and delivery of construction/housing materials <input type="checkbox"/> j. Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED

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<p>G4. How serious a constraint is the total development cost in developing housing in this reservation?</p>	<p><input type="checkbox"/> Very serious <input type="checkbox"/> Fairly serious <input type="checkbox"/> A factor, but not very serious <input type="checkbox"/> Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>G5. Does this reservation have a comprehensive land use plan?</p>	<p>YES NO DON'T KNOW REF</p> <p>IF YES/DK/REF: <u>SKIP TO G6.</u> IF NO: <u>CONTINUE TO G5a</u></p>
<p>Q5a. How serious a problem is the lack of a plan in your efforts to develop new housing?</p> <p>READ RESPONSE CHOICES OUT LOUD TO RESPONDENT.</p>	<p><input type="checkbox"/> Very serious <input type="checkbox"/> Fairly serious <input type="checkbox"/> A factor, but not very serious <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>G6. What are the difficulties you face in assembling land to build new IHBG housing?</p>	<p><input type="checkbox"/> Trust Land and related problems <input type="checkbox"/> Tribe not providing enough priority to releasing tribal lands for housing <input type="checkbox"/> Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>G7. What are the <u>three</u> most difficult challenges your organization faces in managing the stock of rental housing you administer?</p> <p>REFER RESPONDENT TO SHOWCARD L. ONLY SELECT THREE CHOICES TOTAL</p>	<p><input type="checkbox"/> a. Lack of trained staff <input type="checkbox"/> b. Performance problems with contractors <input type="checkbox"/> c. Controlling criminal activity <input type="checkbox"/> d. Tenants causing damage to the unit <input type="checkbox"/> e. Tenants not paying rent on time <input type="checkbox"/> f. Lack of operation fund for Indian Housing <input type="checkbox"/> g. Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>

G8. What are the three most difficult challenges your organizations faces in managing your stock of Mutual Help and other homeownership housing you administer?

**REFER RESPONDENT TO SHOWCARD M.
ONLY SELECT THREE CHOICES TOTAL**

- a. Lack of trained staff
- b. Performance problems with contractors
- c. Controlling criminal activity
- d. Residents causing damage to the unit
- e. Residents not making payments on time
- f. Lack of operation fund for Indian Housing
- g. Other (SPECIFY): _____
- DON'T KNOW
- REFUSED

H. ASSESSMENT OF RULES AND PROCEDURES UNDER NAHASDA

<p>H1. How familiar are you with how HUD housing assistance was administered before it was changed to block grants in 1998?</p>	<p> <input type="checkbox"/> Very familiar <input type="checkbox"/> Somewhat familiar <input type="checkbox"/> Not familiar <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED </p> <p>IF 'VERY' OR 'SOMEWHAT FAMILIAR', <u>CONTINUE TO H2.</u></p> <p>IF 'NOT FAMILIAR'/DK/REF, <u>SKIP TO H5.</u></p>
<p>H2. [IF VERY OR SOMEWHAT FAMILIAR]: I'm going to ask you to compare several aspects of the current IHBG program to what existed before NAHASDA. How did you become familiar with how things worked back then?</p> <p>REFER RESPONDENT TO SHOWCARD N.</p>	<p> <input type="checkbox"/> a. Worked on HUD assistance programs at that time <input type="checkbox"/> b. Told about it by co-workers <input type="checkbox"/> c. Told about it in ONAP training sessions <input type="checkbox"/> d. Reviewed administrative records <input type="checkbox"/> e. Other (SPECIFY): _____ <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED </p>
<p>H3. Would you say the administrative procedures under the current IHBG program, such as submitting plans, maintaining records and reporting to HUD require more work than they did prior to NAHASDA, less work, or about the same amount of work?</p>	<p> <input type="checkbox"/> Require more work than they did prior to NAHASDA <input type="checkbox"/> Less work <input type="checkbox"/> About the same amount of work <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED </p>
<p>H4. Would you say your organization's ability to leverage funds with other private sources become easier since the advent of NAHSADA, become harder, or has stayed the same?</p>	<p> <input type="checkbox"/> Easier <input type="checkbox"/> More difficult <input type="checkbox"/> No change, compared to programming prior to NAHASDA <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED </p>
<p>H5. Under NAHASDA, leases for housing activities on restricted or trust land have been extended to 50 years. Is this lease term long enough to create an incentive for the development of housing in your service area?</p>	<p> YES NO DON'T KNOW REFUSED </p> <p>IF YES, <u>SKIP TO H6.</u></p> <p>IF NO/DK/REF, <u>CONTINUE TO H5a.</u></p>
<p>H5a. What should the lease year limit be? (OPEN-ENDED)</p>	<p>_____</p> <p>_____</p> <p>_____</p>

H6. Would you change current IHBG program rules or practices in any of the following areas?

(CHECK BOX FOR YES)

REFER RESPONDENT TO SHOWCARD O.

FOR EACH CHECKED OFF ITEM , ASK:
What changes would you make? **(OPEN-ENDED)**

**IF RESPONDENT HAS NO SUGGESTIONS, WRITE
"NO SUGGESTIONS FOR CHANGE."**

- a. General program administration
- b. Preparing your Indian Housing Plan
- c. Leveraging funds with private money or partnering with other organizations to provide housing and services
- d. Developing new housing units, including acquiring/ financing land and construction
- e. Encouraging and supporting homeownership
- f. Encouraging and supporting development of housing by private investors

IF CHECKED OFF ABOVE:

General program administration

Preparing your Indian Housing Plan

Leveraging funds with private money or partnering with other organizations to provide housing and services

Developing new housing units, including acquiring/ financing land and construction

Encouraging and supporting homeownership

Encouraging and supporting development of housing by private investors

I. OTHER HOUSING ASSISTANCE PROGRAMS OPERATING IN THE AREA

<p>I1. Does your organization operate any other housing assistance programs in addition to those funded under the IHBG?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES, ASK THEM TO NAME UP TO THREE OF THE LARGEST PROGRAMS AND PROVIDE THE FOLLOWING INFORMATION IN I1a-I1c.</p> <p>IF NO/DK/REF, <u>SKIP TO I2.</u></p>
<p>I1a. Name of program; type of housing; funding source; number of units affected:</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>
<p>I1b. Name of program; type of housing; funding source; number of units affected:</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>
<p>I1c. Name of program; type of housing; funding source; number of units affected:</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>
<p>I1d. Are there any waiting lists associated with any of the programs listed above?</p>	<p>YES NO DON'T KNOW REFUSED</p>

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<p>I2. Are there other housing assistance programs in your area operated by other organizations?</p>	<p>YES NO DON'T KNOW REFUSED</p> <p>IF YES, ASK THEM TO NAME THE PROGRAMS AND PROVIDE THE FOLLOWING INFORMATION IN I2a-I2c.</p> <p style="text-align: center;">IF NO/DK/REF, <u>SKIP TO SECTION I.</u></p>
<p>I2a. Name of program; type; funding source; organization; units affected</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>
<p>I2b. Name of program; type; funding source; organization; units affected</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>
<p>I2c. Name of program; type; funding source; organization; units affected</p>	<p>Name of Program: _____</p> <p>Type of Housing: _____</p> <p>Funding source: _____</p> <p>_____</p> <p>No. units affected: _____</p>

**J. ASSESSMENT OF MORTGAGE LENDING PROGRAMS
(SECTION 184 AND OTHERS)**

<p>J1. How strong would you say is the demand for homeownership opportunities in the area you serve? Is it high, moderate, or low or none?</p>	<p><input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low or none <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>J2. Over the past three years has demand for your organization's homeownership programs increased, decreased, or stayed the same?</p>	<p><input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>J3. What are the 3 most important barriers to getting tribal members living on Indian land to apply for a mortgage?</p> <p>REFER RESPONDENT TO SHOWCARD P. ONLY SELECT THREE CHOICES TOTAL</p>	<p><input type="checkbox"/> a. Potential borrowers are wary of formal institutional lenders <input type="checkbox"/> b. Language issues <input type="checkbox"/> c. Paperwork issues <input type="checkbox"/> d. Limited demand—minimal interest in or familiarity with homeownership <input type="checkbox"/> e. Lack enough savings for down payment <input type="checkbox"/> f. No or blemished credit history <input type="checkbox"/> g. Insufficient income <input type="checkbox"/> h. Other (SPECIFY): _____</p> <p><input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>J4. What are the 3 most important barriers to attracting private lending opportunities for households interested in homeownership?</p> <p>REFER RESPONDENT TO SHOWCARD Q. ONLY SELECT THREE CHOICES TOTAL</p>	<p><input type="checkbox"/> a. Trust land status <input type="checkbox"/> b. Fractional ownership of land available for units <input type="checkbox"/> c. Uncertainty about recovering mortgaged properties in the event of a foreclosure <input type="checkbox"/> d. Other land/title issue <input type="checkbox"/> e. Lender discrimination <input type="checkbox"/> f. Lack of mortgage institutions in your area <input type="checkbox"/> g. Other (SPECIFY): _____</p> <p><input type="checkbox"/> DON'T KNOW <input type="checkbox"/> REFUSED</p>
<p>J5. Do you think that the American Indian and Alaska Native populations experience discrimination based on race when applying for a mortgage? (OPEN-ENDED)</p>	<p>_____ _____ _____ _____</p>

J6. What are the sources of home mortgage lending in your service area?

**REFER RESPONDENT TO SHOWCARD R.
MARK ALL THAT APPLY.**

- a. State agency programs
- b. Rural housing services (formerly Farmers Home)
- c. Federal Home Loan Bank
- d. Private lenders
- e. Tribe and tribal lenders
- f. Other (SPECIFY): _____
- DON'T KNOW
- REFUSED

CONCLUDING THE INTERVIEW

I will be sending this document to the NORC central office in Chicago, so that your responses can be included in this important research. An editor will check to see that I have indicated an answer to all of the appropriate questions. If I mistakenly skipped a question, someone from the NORC central office will call you to fill in the missing information. This is standard procedure to ensure that all of the information needed is provided [quality assurance]. All of our central office employees are bound by the same confidentiality rules that I am.

My office may want to verify that the interview took place. Someone may call you to make sure that I conducted the interview. Please give me your name and telephone number so that my office may contact you.

NAME OF
RESPONDENT:

TELEPHONE NUMBER: ()

MAILING ADDRESS:

ADDRESS

CITY

STATE

ZIP

THANK THE RESPONDENT FOR HIS/HER TIME.

FINISH TIME: _____ AM/PM

TRANSFER FINISH TIME TO FRONT COVER