G. Finally, we have a few additional questions that will help us describe the people who took part in this survey.

- 1. What is your race? Select all that apply.
 - a. White
 - b. Black or African American
 - c. American Indian or Alaskan Native
 - d. Asian or Asian American
 - e. Native Hawaiian or other Pacific Islander
 - f. Other (specify)
 - g. Don't know
 - h. Prefer not to answer
- 2. Are you of Hispanic origin?
 - a. Yes
 - b. No
 - c. Don't know
 - d. Prefer not to answer
- 3. Do you consider yourself to be...
 - a. Heterosexual or straight
 - b. Asexual
 - c. Bisexual
 - d. Gay
 - e. Lesbian
 - f. Pansexual
 - g. Other (specify)
 - h. Don't know
 - i. Prefer not to answer
- 4. What is the highest grade or level of school you completed?
 - a. Less than high school
 - b. Some high school, no diploma
 - c. GED
 - d. High school graduate
 - e. Some college but no degree
 - f. Associate degree occupational/vocational
 - g. Associate degree academic program
 - h. Bachelor's degree (e.g., BA, AB, BS)
 - i. Master's degree (e.g., MA, MS, MEng, Med, MSW)
 - j. Professional school degree (e.g., MD, DDS, DVM, JD)
 - k. Doctorate degree (e.g., PhD, EdD)
 - I. Don't know
 - m. Prefer not to answer

- 5. Thinking about members of your family living in your household, what is the combined annual income, meaning the total pre-tax income from all sources earned in the past year?
 - a. \$0 to \$9,999
 - b. \$10,000 to \$14,999
 - c. \$15,000 to \$19,999
 - d. \$20,000 to \$34,999
 - e. \$35,000 to \$49,999
 - f. \$50,000 to \$74,999
 - g. \$75,000 to \$99,999
 - h. \$100,000 to \$199,999
 - i. \$200,000 or more
 - j. Don't know
 - k. Prefer not to answer
- 6. How would you describe your household's financial situation right now?
 - a. After paying the bills, you still have enough money for special things that you want.
 - b. You have enough money to pay the bills, but little extra money to buy something special that you want.
 - c. You have money to pay the bills, but only because you have cut back on things that you want.
 - d. You are having difficulty paying the bills no matter what you do.
 - e. Don't know
 - f. Prefer not to answer
- 7. What is your current marital status?
 - a. Single, never been married
 - b. Married
 - c. Not married but living together
 - d. Separated
 - e. Divorced
 - f. Widowed
 - g. Other (specify)
 - h. Don't know
 - i. Prefer not to answer
- 8. Are you covered by health insurance or some other kind of health care plan?
 - a. Yes
 - b. No Go to question 10
 - c. Don't know Go to question 10
 - d. Prefer not to answer Go to question 10
- 9. What type of health insurance do you have? Select all that apply.
 - a. Medicaid
 - b. Private health insurance
 - c. Medicare
 - d. Medicare plus a supplemental policy
 - e. Military/VA
 - f. Other (specify)
 - g. Don't know
 - h. Prefer not to answer
- 10. What is your home address? (street, city, state, zip, county)

- 11. Is this your mailing address?
 - a. Yes Go to question 13
 - b. No
- 12. What is your mailing address? (street, city, state, zip)
- 13. Thank you for completing this survey. As a thank you for your time, we would like to send you a \$10 gift card. Please select the type of gift card you would like to receive.

 Store and method of delivery options will be displayed based on information provided by the participant (full mailing address and/or email address). If participants did not provide a mailing address, they will have the option to return to the previous page and provide one in order to receive a mailed gift card.
- 14. May we contact you again in the future to see if some of the things we discussed have changed?
 - a. Yes
 - b. No

Questions 1-14 correspond to Questions 1-14 in section G of the full document "Impact of COVID-19 on Behaviors across the Cancer Control Continuum in Ohio"