



MARTIN FOCUS GROUP SERVICES - RICHMOND

4101 Cox Road • Suite #130 • Glen Allen, VA 23060 • (804) 935-0203 • Fax (804) 935-0567

Date: _____

Name (Last, First): _____ Male Female

Spouse Name (If Interested) _____ Male Female

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Spouse Work: _____

Cell Phone: _____ Email: _____ Spouse Email: _____

All information is kept confidential in our database. We do not sell our database to anyone. We need to know the following household demographics for our research studies.

- 1. Date of Birth ... Spouse Date of Birth ...
2. Marital Status: Single Married Divorced Living with Partner Widowed
3. Do you have any dependent children at home? Yes No Birth Dates: ... M/F
4. Which of the following categories best describes the household's total annual income
5. Highest level of education completed: YOU SPOUSE
6. What is your Ethnic Background? YOU SPOUSE
7. What is the name of your primary bank? Spouse/partner primary bank?
8. How many hours a week do you spend on the internet?

9. Do you have health insurance? **Yes No** Does your spouse have health insurance? **Yes No**
10. What type of coverage? **YOU SPOUSE**
- | | | |
|--|-----|-----|
| A. Individual – Your purchase it directly through a healthcare company | [] | [] |
| B. Group - You get coverage at a group rate through an employer | [] | [] |
| C. Medicare | [] | [] |
| D. Medicare Supplement, Carrier Name: _____ | [] | [] |
| E. Medicaid | [] | [] |
11. What is the name of your health insurance carrier? _____ Your spouse's? _____
12. Do you have: **HMO** [] **PPO** [] **Other** _____ Does your spouse have: **HMO** [] **PPO** [] **Other** _____
14. Do you own or rent your residence? **Own Rent Live with Parent**
15. Do you own a cell phone? If so, who is your service provider? _____
16. What are your favorite FM radio stations for Music? _____, _____, _____, _____
 What are your spouse's favorite FM radio stations for Music? _____, _____, _____, _____
16. Are you a registered voter in the State of Virginia? **Yes No**
- With which political party do you most closely identify? **Democrat Republican Independent**
 With which political party does your spouse most closely identify? **Democrat Republican Independent**
17. Your Employment Status: **Full-time Part-time Retired Homemaker Unemployed Student**
18. What is your job title? _____ Industry: _____
 Name of the Business: _____
 Is it: **Government Non-profit Association Private**
 If a teacher, please specify the grade and subject taught. _____
19. Your Spouse Employment Status: **Full-time Part-time Retired Homemaker Unemployed Student**
20. What is your job title? _____ Industry: _____
 Name of the Business: _____
 Is it: **Government Non-profit Association Private**
 If a teacher, please specify the grade and subject taught. _____
23. Who referred you to Martin Focus Group Services? _____

THANK YOU FOR FILLING OUT OUR QUESTIONNAIRE.
Please mail to: 4101 Cox Road, Suite 130, Glen Allen, VA 23060
Or
Fax to: 804-935-0567

If you have any friends, family or co-workers who are interested in participating in market research studies, please have them go to our website and download a form.

www.martinfocus.com

Go to "Contact Us" Click on the Richmond link and download form at the bottom of the page.