

52. Do you smoke? (X ONE Box)

- | | |
|--|---|
| 01 <input type="checkbox"/> Never smoked → Skip to Q.53 | 06 <input type="checkbox"/> I smoke about 11 to 20 cigarettes a day |
| 02 <input type="checkbox"/> Hardly smoke | 07 <input type="checkbox"/> I smoke about 21 to 30 cigarettes a day |
| 03 <input type="checkbox"/> Occasionally smoke | 08 <input type="checkbox"/> I smoke about 31 to 40 cigarettes a day |
| 04 <input type="checkbox"/> I smoke about 1 to 5 cigarettes a day | 09 <input type="checkbox"/> I smoke 41 cigarettes or more a day |
| 05 <input type="checkbox"/> I smoke about 6 to 10 cigarettes a day | 10 <input type="checkbox"/> I used to smoke, but I quit |

If you answered 2 to 10 for Q.52, please continue. Otherwise, skip to Q.53.

52a. How old were you when you started smoking?

About _____ years old

52b. How long does it take to get to a smoking area in your work place? If you are not working, please answer about smoking at the place you spend most of the day. (X ONE Box)

- | | |
|---|--|
| 1 <input type="checkbox"/> 0 minutes (I can smoke right at my seat) | 4 <input type="checkbox"/> 6-10 minutes |
| 2 <input type="checkbox"/> 1-2 minutes | 5 <input type="checkbox"/> 11 minutes or more |
| 3 <input type="checkbox"/> 3-5 minutes | 6 <input type="checkbox"/> Smoking is not allowed at all at my workplace |

If you answered 10 for Q.52, please continue. Otherwise, skip to Q.53.

52c. When is the last time you smoked? (approximately) (Write in)

MM YY
around() / ()

52d. How long did it take for you to quit smoking once you decided to quit? (Write in number)

About _____ days about _____ months about _____ years

53. Do you exercise? (X ONE Box)

- | | |
|---|--|
| 1 <input type="checkbox"/> Almost everyday | 4 <input type="checkbox"/> About once a month |
| 2 <input type="checkbox"/> A few times a week | 5 <input type="checkbox"/> Don't exercise at all |
| 3 <input type="checkbox"/> About once a week | |

54. Do you drink alcoholic beverages? (X ONE Box)

- 1 Don't drink at all
 2 Hardly drink (a few times a month)
 3 Drink sometimes(a few times a week)
 4 A can of beer (350ml.) or its equivalent a day, everyday
 5 3 cans of beer (350ml. x 3) or its equivalent a day, everyday
 6 5 cans of beer (350ml. x 5) or its equivalent a day, everyday

55. Do you gamble in lotteries or at casinos or bet on sporting events or horse races?

- 1 I have never gambled.
 2 I used to gamble, but have quit.
 3 Hardly gamble
 4 Several times a year or so
 5 Once a month or so
 6 Once a week or so
 7 Almost everyday

56. Please indicate if you are affiliated with any of the following religions. (X ONE Box)

- 1 None
 2 Catholic
 3 Protestant
 4 Other Christian
 5 Judaism
 6 Islam
 7 Hinduism
 8 Buddhism
 9 Others

Thank you very much for your help with this study.