

## Global Opinion Panels

	YOUR BABY'S BIR	Job No. R868-BS OMB # 0910-0558 Expiration Date: 12/31/2007
Please answer these questions for your baby that was due last month or the month before. If you were not expecting a baby at that time, please check here $\Box$ and return this questionnaire in the postage paid envelope enclosed.		
1. Has	your baby been born?	
Ye	es □ No □ → (Thank you, Please Paid envelope)	RETURN QUESTIONNAIRE IN THE ENCLOSED POSTAGE
2. Wha	t is the baby's birthday?	
r	MONTH DAY	
3. How	much did your baby weigh at birth?	
F	POUNDSAND OUNCES	
4. Did y	you have twins or more than one baby?	
Yes	s, 2 or more D N	o 🗆
5. Did y	you have any medical problems that prevented you from feedi	ng your baby for more than a week?
No	Yes D Please	e explain briefly
6. Did y	our baby have to stay in an intensive care unit?	
No	Yes, 3 days or less	
7. Does	s your baby have any special needs or medical problems that	might affect his or her feeding?
No	Yes D Please	e explain briefly
THANK YOU! PLEASE ALSO COMPLETE THE OTHER QUESTIONNAIRE ENCLOSED AND RETURN BOTH IN THE ENVELOPE PROVIDED.		