TOBACCO SMOKING

26. Do you now smoke cigarettes? [48]

27. If "NO": Have you ever smoked cigarettes? 1 - No 2 - Yes [ ]

28. How old were you when you started smoking regularly? [50]

29. How old were you when you last gave up smoking cigarettes? [52]

_____ years.

List year person last stopped smoking. _____ [54]

30. How much do/did you smoke on the average? _____ [56]

31. Do/did you inhale the cigarette smoke? [58]

1 - No 2 - Yes

32. What do/did you mostly smoke?

Type (1) - filter
(2) - non-filter [59]

Size (1) - regular
(2 - king size
(3) - 100 millimeter [60]

33. Do you smoke a pipe? 1 - No 2 - Yes [61]

34. If "NO": Have you ever smoked a pipe? 1 - No 2 - Yes [ ]

35. How many pipefuls a day do/did you smoke? [63]

36. Do you smoke cigars? 1 - No 2 - Yes [65]

37. If "NO": Have you ever smoked cigars? 1 - No 2 - Yes [66]

38. How many cigars a day/do/did you smoke? [67]

39. Do you chew tobacco? 1 - No 2 - Yes [69]