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PROVIDE EMPIRICAL SURVEY DATASETS ABOUT THE NORTH AMERICAN JEWISH COMMUNITY FROM NATIONAL AND LOCAL SOCIO-DEMOGRAPHIC STUDIES AS WELL AS OTHER TYPES OF CONTEMPORARY AND HISTORICAL SOCIAL SCIENCE RESEARCH.

MAKE AVAILABLE SUBSTANTIVE AND METHODOLOGICAL REPORTS ON THE JEWISH COMMUNITY, IN PARTICULAR, REPORTS BASED ON DATASETS THAT ARE PART OF THE ARCHIVE.

PROMOTE THE DATA BANK TO JEWISH FEDERATIONS, COMMUNAL ORGANIZATIONS, FOUNDATIONS AND OTHER GROUPS INTERESTED IN RESEARCH CONCERNING JEWISH LIFE IN NORTH AMERICA.

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PROVIDE TECHNICAL ASSISTANCE AND ADVICE TO JEWISH FEDERATIONS, RESEARCHERS, COMMUNAL PROFESSIONALS, JOURNALISTS AND OTHERS INTERESTED IN RESEARCH ON THE JEWISH COMMUNITY.

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Phone Number:	Replicate #	Page #	Date:	Interviewer:
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Editor:	ID Number:	Area:	Source:	
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The Jewish
Community
Federation
of Greater
Richmond
1994

Jewish Community Study

Anonymous
The Jewish Community Federation of Richmond
5403 Monument Avenue
Richmond VA 23226
Phone: (804) 288-0045 • Fax (804) 282-7507

INTRODUCTION

Hello, my name is _____. I am calling on behalf of the population study for the Jewish community sponsored by The Jewish Community Federation of Richmond. We are NOT asking for contributions. We're interviewing households with one or more Jewish persons.

Was anyone in your household born or raised Jewish?

<p>YES</p> <p>↓</p> <p>The information will be used to identify needs and to plan better services. Your answers will be completely anonymous: We do <i>NOT</i> know your name or address.</p>	<p><i>IF NO:</i></p> <hr style="border-top: 1px dashed black;"/> <p>Are there any Jewish persons or persons who consider themselves Jewish living in this household?</p> <p><i>IF NO:</i> Thank you for your help.</p> <p><i>IF YES:</i> The information will be used to identify needs and to plan better services. Your answers will be completely anonymous: We do NOT know your name or address.</p>
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RESIDENCY

1. For how many years have you been living in the greater Richmond area? _____ Years
(Year 19____) (6-7)


2. For how many years are you living **at your current address**? _____ Years
(Year 19____) (8-9)

3. Do you generally spend more than two months of the year away from your permanent residence? (10)

1. Yes

2. No

9. DK/NR

<p>4. NOW, will you: (11)</p> <p>1. Definitely -----</p> <p>2. Probably -----</p> <p>3. Probably not, or (GO TO NEXT PAGE)</p> <p>4. Definitely not (GO TO NEXT PAGE)</p> <p style="text-align: center;">MOVE in the next three years?</p> <p style="text-align: center;">9. DK/NR</p>	<p style="text-align: center;"> <i>IF DEFINITELY OR PROBABLY MOVING:</i></p> <hr style="border-top: 1px dashed black;"/> <p>5. Where do you expect to move? (12) <i>PROMPT IF NECESSARY or IF ANSWER IS DK</i></p> <p>1. Same neighborhood</p> <p>2. Different neighborhood in Richmond area</p> <p>3. Other Virginia</p> <p>4. Other State _____</p> <p>5. Foreign country _____</p> <p>9. DK/NR</p>
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DEMOGRAPHICS

6. Now, including yourself, how many people live in your household? _____ (13)

Person #	7. What is the relationship of the other people in the household to you?	8. And how old are you? And your _?	9. Sex	10. What is the highest level of education you have completed? And your _____?	11. In what state or foreign country were you born? <i>IF VA:</i> In what county or city?	12. Was everyone in your household born Jewish? <i>IF NO:</i> Who was not?	13. Is everyone in your household currently Jewish? <i>IF NO:</i> Who is not?
Respondent	Respondent	(14 - 15)	M F (16)	(17 - 18)	(19 - 20)	1. Yes 2. No (21)	1. Yes 2. No (22)
Adult 2	(23)	(24 - 25)	M F (26)	(27 - 28)	(29 - 30)	1. Yes 2. No (31)	1. Yes 2. No (32)
Adult 3	(33)	(34 - 35)	M F (36)	(37 - 38)	(39 - 40)	1. Yes 2. No (41)	1. Yes 2. No (42)
Adult 4	(43)	(44 - 45)	M F (46)	(47 - 48)	(49 - 50)	1. Yes 2. No (51)	1. Yes 2. No (52)
Child 1		(1 - 2)	M F (3)		(4 - 5)	1. Yes 2. No (6)	1. Yes 2. No (7)
Child 2		(8 - 9)	M F (10)		(11 - 12)	1. Yes 2. No (13)	1. Yes 2. No (14)
Child 3		(15 - 16)	M F (17)		(18 - 19)	1. Yes 2. No (20)	1. Yes 2. No (21)
Child 4		(22 - 23)	M F (24)		(25 - 26)	1. Yes 2. No (27)	1. Yes 2. No (28)
Age 19 and over is an adult. 18 and under is a child.	H = Husband W = Wife M = Mother F = Father	ASK FOR EXACT AGE. USE CATEGORIES ONLY IF NECESSARY: <i>Under 20,</i> 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80-84, 85-89, 90+		PROMPT IF NECESSARY. 1. Less than high school 2. Graduated high school 3. Technical/trade school 4. Some college 5. 2-year college degree (associates—AA) 6. 4-year college degree (bachelors—BA, BS, etc.) 7. Some graduate school 8. Master's degree 9. Ph.D. (Doctorate) (Ed.D.) 10. Reg. Nurse 11. M.D. 12. D.D.S 13. Law 14. Other professional 99. DK/NR	USA is NOT an answer: Get the State! VA is NOT an Answer: Get the County or City!	If respondent US born: 14. Was your mother born in the United States? (Jewish spouse) 1. Yes 2. No 9. DK/NR (29) If respondent not Richmond born: 15. Before you moved here, in what city did you live? _____ (30-31)	

ASK FOR EACH ADULT:

Adult #	16. Are you: And your _____? <i>READ AS NECESSARY</i> 1. married for the first time 2. divorced, REmarried now 3. widowed, REmarried now 4. single, never married 5. currently divorced 6. currently widowed 7. separated 8. other _____ 9. DK/NR	17. Are you currently: And your _____? 1. working full time 2. working part time 3. retired 4. homemaker 5. disabled 6. unemployed 7. a student 8. full-time volunteer 9. DK/NR
Respondent	(32)	(33)
Adult 2	(34)	(35)
Adult 3	(36)	(37)
Adult 4	(38)	(39)

If either head of household age 40 or over and ever married:

18. Are there any adult children from this household who have established their own homes? (40) 1. Yes ----- 2. No 9. DK/NR	19. Do any of them live in the Greater Richmond area? (41) 1. Yes 2. No 9. DK/NR
--	--

If either head of household or spouse age 50 or under:

20. Have you (anyone in your household) ever adopted any children? (42) 1. Yes 2. No ----- 9. DK/NR	21. Have you ever contacted a professional about adopting a child? (43) 1. Yes 2. No 9. DK/NR
--	---

NEIGHBORHOOD

22. Do you rent or own your residence? ⁽⁴⁴⁾ **1. Rent** **2. Own** **9. DK/NR**

23. What is your zip code?	2	3	<i>(should be a 1 or 2) (could be a 0) (45)</i>	(46)	(47)
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JEWISH EDUCATION OF ADULTS

ASK FOR EACH ADULT:					
<p>24. NOW, Did you receive any formal Jewish education as a child (such as Sunday school)?</p> <p>And your ___ ? <i>(Record NO for adults not born/raised Jewish)</i></p>	<p style="text-align: center;">IF YES:</p> <hr style="border-top: 1px dashed black;"/> <p>25. Did you attend a Jewish day school or an afternoon or Sunday school?</p> <p style="text-align: center;">And your ___ ?</p>				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">Respondent</td> <td style="padding: 5px;"> 1. Yes →→→→→→→→ 2. No 9. DK/NR (48) </td> </tr> </table>	Respondent	1. Yes →→→→→→→→ 2. No 9. DK/NR (48)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> 1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli </td> <td style="width: 50%; padding: 5px;"> 2. Tutor 9. DK/NR (49) </td> </tr> </table>	1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (49)
Respondent	1. Yes →→→→→→→→ 2. No 9. DK/NR (48)				
1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (49)				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">Adult 2</td> <td style="padding: 5px;"> 1. Yes →→→→→→→→ 2. No 9. DK/NR (50) </td> </tr> </table>	Adult 2	1. Yes →→→→→→→→ 2. No 9. DK/NR (50)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> 1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli </td> <td style="width: 50%; padding: 5px;"> 2. Tutor 9. DK/NR (51) </td> </tr> </table>	1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (51)
Adult 2	1. Yes →→→→→→→→ 2. No 9. DK/NR (50)				
1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (51)				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">Adult 3</td> <td style="padding: 5px;"> 1. Yes →→→→→→→→ 2. No 9. DK/NR (52) </td> </tr> </table>	Adult 3	1. Yes →→→→→→→→ 2. No 9. DK/NR (52)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> 1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli </td> <td style="width: 50%; padding: 5px;"> 2. Tutor 9. DK/NR (53) </td> </tr> </table>	1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (53)
Adult 3	1. Yes →→→→→→→→ 2. No 9. DK/NR (52)				
1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (53)				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; padding: 5px;">Adult 4</td> <td style="padding: 5px;"> 1. Yes →→→→→→→→ 2. No 9. DK/NR (54) </td> </tr> </table>	Adult 4	1. Yes →→→→→→→→ 2. No 9. DK/NR (54)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> 1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli </td> <td style="width: 50%; padding: 5px;"> 2. Tutor 9. DK/NR (55) </td> </tr> </table>	1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (55)
Adult 4	1. Yes →→→→→→→→ 2. No 9. DK/NR (54)				
1. Day School 3. Afternoon or Sunday school (Hebrew School) 4. Israeli	2. Tutor 9. DK/NR (55)				

✳If no children in the household, go to page 8

line 2



ASK FOR EACH CHILD AGE 0 - 5:		
		IF YES:
	26. NOW, Does your ____ attend any kind of pre-school or day care program? And your _____ ?	27. Is this program offered by a Jewish group?
Child 1	1. Yes →→→→→→→→→→→→ 2. No 9. DK/NR (56)	1. Yes 2. No 9. DK/NR (57)
Child 2	1. Yes →→→→→→→→→→→→ 2. No 9. DK/NR (58)	1. Yes 2. No 9. DK/NR (59)
Child 3	1. Yes →→→→→→→→→→→→ 2. No 9. DK/NR (60)	1. Yes 2. No 9. DK/NR (61)
Child 4	1. Yes →→→→→→→→→→→→ 2. No 9. DK/NR (62)	1. Yes 2. No 9. DK/NR (63)

Go to question 28 or 31



ASK FOR EACH CHILD AGE 5 AND OVER

	<i>ASK IF CHILD NOT IN JEWISH DAY SCHOOL:</i>	<i>IF CHILD NEVER IN JEWISH EDUCATION:</i>	
	<p>28. NOW, Is your _____ currently going to public school, non-Jewish private school, or Jewish day school?</p> <p>And your _____ ?</p>	<p>29. Has your _____ ever been enrolled in any type of formal Jewish education?</p> <p>And your _____ ?</p>	<p>30. Will you definitely, probably, probably not, or definitely not enroll your _____ in the future?</p> <p>And your _____ ?</p>
Child 1	<p>1. Public (1) 2. Non-Jewish Private 3. Jewish Day ↓ <i>GO TO NEXT CHILD OR Q.31</i></p>	<p>1. Yes 2. No →→→→→→→ 9. DK/NR (2)</p>	<p>1. Definitely 2. Probably 3. Probably not, or 4. Definitely not 9. DK/NR (3)</p>
Child 2	<p>1. Public (4) 2. Non-Jewish Private 3. Jewish Day ↓ <i>GO TO NEXT CHILD OR Q. 31</i></p>	<p>1. Yes 2. No →→→→→→→ 9. DK/NR (5)</p>	<p>1. Definitely 2. Probably 3. Probably not, or 4. Definitely not 9. DK/NR (6)</p>
Child 3	<p>1. Public (7) 2. Non-Jewish Private 3. Jewish Day ↓ <i>GO TO NEXT CHILD OR Q. 31</i></p>	<p>1. Yes 2. No →→→→→→→ 9. DK/NR (8)</p>	<p>1. Definitely 2. Probably 3. Probably not, or 4. Definitely not 9. DK/NR (9)</p>
Child 4	<p>1. Public (10) 2. Non-Jewish Private 3. Jewish Day ↓ <i>GO TO NEXT CHILD OR Q. 31</i></p>	<p>1. Yes 2. No →→→→→→→ 9. DK/NR (11)</p>	<p>1. Definitely 2. Probably 3. Probably not, or 4. Definitely not 9. DK/NR (12)</p>

If children age 0-17 in household and none in Day School:

31. Did (Will) you seriously consider sending your children to A Jewish day school? (13)

1. Yes
2. No
3. Will definitely send child
4. Did send children in the past

9. DK/NR

line 3



ASK FOR EACH CHILD AGE 0 - 17:		
		IF YES:
	32. Did your ____ attend a day camp or sleep away camp this past summer? And your _____ ?	33. Was this a Jewish camp with religious services or Jewish content?
Child 1	1. Day Camp →→→→→→→→→→ 2. Sleep Away Camp →→→→→ 3. No 9. DK/NR (14)	1. Yes 2. No 9. DK/NR (15)
Child 2	1. Day Camp →→→→→→→→ 2. Sleep Away Camp →→→→→→ 3. No 9. DK/NR (16)	1. Yes 2. No 9. DK/NR (17)
Child 3	1. Day Camp →→→→→→→→ 2. Sleep Away Camp →→→→→→ 3. No 9. DK/NR (18)	1. Yes 2. No 9. DK/NR (19)
Child 4	1. Day Camp →→→→→→→→ 2. Sleep Away Camp →→→→→→ 3. No 9. DK/NR (20)	1. Yes 2. No 9. DK/NR (21)

34. How important is to you (your husband/wife) for your children to associate with other Jewish children in a Jewish setting: (22) (Ask for Jewish spouse)

- 1. very important
- 2. somewhat important, or
- 3. not at all important
- 9. DK/NR

RELIGIOUS ATTITUDES AND PRACTICES

<i>REPEAT SCALE AS NECESSARY</i>		Always	Usually	Sometimes	Never
35. Now, do you (or does someone in your household) always, usually, sometimes, or never					
a. Light candles Friday night? (23)		1	2	3	4
b. Participate in a Passover Seder? (24)		1	2	3	4
c. Light Hanukkah candles? (25)		1	2	3	4
d. Have a Christmas tree? (26)		1	2	3	4

	<i>IF KEEP KOSHER:</i>	<i>IF KOSHER IN AND OUT</i>
36. Do you keep kosher? (27) 1. Yes ----- 2. No 9. DK/NR	37. Is that: (28) 2. both in and outside the home? ----- or 1. inside the home 9. DK/NR	38. Do you turn lights on and off on the Sabbath? (29) 1. Yes 2. No 9. DK/NR

39. Do you have a mezuzah on your front door? (30) 1. Yes 2. No 9. DK/NR

40. Do you consider yourself: (31)

IF RESPONDENT NOT JEWISH, ASK QUESTION FOR JEWISH SPOUSE

- 1. Orthodox
- 2. Conservative
- 3. Reform
- 4. or Just Jewish?

- DO NOT READ THESE CHOICES:*
- 5. RECONSTRUCTIONIST
 - 6. MESSIANIC (JEWS FOR JESUS, ETC.)
 - 7. HUMANIST
 - 8. OTHER _____
 - 9. DK/NR

line 3

41. How frequently do you attend synagogue services? (32) *ASK FOR JEWISH SPOUSE*
PROMPT AS NECESSARY.

- | | |
|--|--|
| <ul style="list-style-type: none"> 1. Never 2. Never, except for weddings and bar Mitzvahs 3. Only high holidays, weddings/bar Mitzvahs 4. A few times a year 5. About once a month | <ul style="list-style-type: none"> 6. A few times a month 7. Weekly 8. Several times a week or more 9. DK/NR |
|--|--|

	IF NOT CURRENT SYNAGOGUE MEMBER
<p>42. Are you currently paying dues to a temple or synagogue? (33)</p> <p>1. Yes</p> <p style="text-align: center;">2. No →→→→→→→→→→</p> <p style="text-align: center;">9. DK/NR</p>	<p>43. At any time since becoming an adult, have you or any member of your household been a paid up member of a temple or synagogue? (34)</p> <p style="text-align: center;">1. Yes 2. No 9. DK/NR</p> <p>44. Will you: (35)</p> <ul style="list-style-type: none"> 1. definitely 2. probably 3. probably not, or 4. definitely not <p style="text-align: right;">9. DK/NR</p> <p>become a dues-paying member of a temple or synagogue in the future?</p>

45. Is the cost of synagogue membership a: (36)

- 1. very important
 - 2. somewhat important
 - 3. or not at all important
- reason in your decision to join (or not join) a synagogue?
9. DK/NR

ORGANIZATIONAL MEMBERSHIPS/JCC

46. Now, is anyone living in your household currently a member of any Jewish organization (other than a synagogue)? (37)

1. Yes 2. No 9. DK/NR

line 3

47. Are you currently a dues-paying member of the Jewish Community Center of Richmond on Monument Avenue? (38)

1. Yes - GO TO ANTI-SEMITISM SECTION

2. No

9. DK/NR

IF NOT A RICHMOND JCC MEMBER

48. Did anyone in your household attend any program at the Jewish Community Center during 1994? (39)

- 1. Yes
- 2. No
- 9. DK/NR

49. What is the major reason you have not joined the Jewish Community Center? Would you say it is: (40) *CIRCLE ONE ONLY*

- 1. Distance from your home
- 2. Cost
- 3. Quality of the program
- 4. You have no need for the services offered, or
- 5. some other reason _____
- 9. DK/NR

50. Will you: (41)

- 1. definitely
- 2. probably
- 3. probably not, or
- 4. definitely not
- 9. DK/NR

become a dues-paying member of the JCC in the future?

ANTI-SEMITISM

51. How much anti-Semitism would you say there is in Richmond? (42)

- 1. a great deal
- 2. a moderate amount
- 3. a little, or
- 4. none at all
- 9. DK/NR

52. During the past 12 months, did you **personally** experience any anti-Semitism in Richmond? (43)

ASK FOR JEWISH SPOUSE

- 1. Yes
- 2. No
- 9. DK/NR

line 3 - 4

SERVICES

<p>53. Does anyone in your household have any kind of physical, mental, or other health condition which has lasted for 6 months or more, which would limit or prevent employment, educational opportunities, or daily activities?</p> <p>(44) 1. Yes → → → → → → → →</p> <p>2. No-Go to Q. 58 9. DK/NR</p>	IF ANYONE DISABLED:			
	54. Who has this condition?	55. Does this condition require supervision or assistance?	IF YES: 56. How many days per week does this person need help?	
	Respndt	1. Yes 2. No (45)	1. Yes 2. No (46)	(47)
	Adult 2	1. Yes 2. No (48)	1. Yes 2. No (49)	(50)
	Adult 3	1. Yes 2. No (51)	1. Yes 2. No (52)	(53)
	Adult 4	1. Yes 2. No (54)	1. Yes 2. No (55)	(56)
	Child 1	1. Yes 2. No (57)	1. Yes 2. No (58)	(59)
	Child 2	1. Yes 2. No (60)	1. Yes 2. No (61)	(62)
	Child 3	1. Yes 2. No (63)	1. Yes 2. No (64)	(65)
	Child 4	1. Yes 2. No (66)	1. Yes 2. No (67)	(68)
IF DISABLED PERSON AGE 50 AND OVER:				
57. Does this person need help:				
		A. Dressing	1. Yes 2. No (69)	
		B. Bathing	1. Yes 2. No (70)	
		C. Using the toilet	1. Yes 2. No (71)	
		D. Eating	1. Yes 2. No (72)	

	58. During 1994, did any household member need:	59. Did ___ receive the ___ ? (go to singles programs?)	60. Was it provided by a Jewish agency?
A. Marital, family, or individual counseling	1. Yes → → → → → → → → 2. No - GO TO B. (1)	1. Yes → → → → → → → → 2. No - GO TO B. (2)	1. Yes (3) 2. No (3)
B. help in finding a job or choosing an occupation	1. Yes → → → → → → → → 2. No - GO TO C. (4)	1. Yes → → → → → → → → 2. No - GO TO C. (5)	1. Yes (6) 2. No (6)
C. alcohol or drug treatment	1. Yes → → → → → → → → 2. No - GO TO D. (7)	1. Yes → → → → → → → → 2. No - GO TO D. (8)	1. Yes (9) 2. No (9)
IF ANY SINGLE ADULTS:			
D. Programs for singles	1. Yes → → → → → → → → 2. No (10)	1. Yes → → → → → → → → 2. No (11)	1. Yes (12) 2. No (12)
IF CHILDREN IN HOUSEHOLD:			
E. programs for children with learning disabilities	1. Yes → → → → → → → → 2. No (13)	1. Yes → → → → → → → → 2. No (14)	1. Yes (15) 2. No (15)

line 4

IF ANYONE AGE 65 AND OVER

	61. During 1994, did any household member need:	62. Did __ receive the ___?	63. Was it provided by a Jewish agency?
A. senior housing with support services	1. Yes ----- 2. No - GO TO B. (16)	1. Yes ----- 2. No - GO TO B. (17)	1. Yes 2. No (18)
B. senior day care	1. Yes ----- 2. No - GO TO C. (19)	1. Yes ----- 2. No - GO TO C. (20)	1. Yes 2. No (21)
C. home health care	1. Yes ----- 2. No - GO TO D. (22)	1. Yes ----- 2. No - GO TO D. (23)	1. Yes 2. No (24)
D. nursing home care	1. Yes ----- 2. No - GO TO E. (25)	1. Yes ----- 2. No - GO TO E. (26)	1. Yes 2. No (27)
E. transportation for seniors	1. Yes ----- 2. No (28)	1. Yes ----- 2. No (29)	1. Yes 2. No (30)

<i>Skip 65 if respondent is not at all familiar with agency.</i>	64. Now, Are you very, somewhat, or not at all familiar, with:			65. What is your perception of ____ : excellent, good, fair, or poor:				
	Very	Some	Not Stop	Excellent	Good	Fair	Poor	DK
a. Jewish Community Federation of Richmond (31 -32)	1	2	3	1	2	3	4	9
b. Beth Sholom Home of Central Virginia (the Jewish nursing home) (33 - 34)	1	2	3	1	2	3	4	9
c. Beth Sholom Woods (35 - 36)	1	2	3	1	2	3	4	9
d. Jewish Family Services (37 - 38)	1	2	3	1	2	3	4	9
e. Jewish Community Center of Richmond (39 - 40)	1	2	3	1	2	3	4	9
f. Rudlin Torah Academy (41 - 42)	1	2	3	1	2	3	4	9
g Jewish Community Day School of Central Virginia (43 - 44)	1	2	3	1	2	3	4	9

PHILANTHROPY

<p>66. During the past 12 months, did your household contribute to any Jewish charity or philanthropy? (45)</p> <p>1. Yes -----></p> <p>2. No - GO TO Q. 70</p> <p>9. DK/NR - GO TO Q. 70</p>	<p style="text-align: center;">IF GIVE TO JEWISH CHARITIES:</p> <hr style="border-top: 1px dashed black;"/> <p>67. In total, was that amount over \$100 or under \$100? IF OVER: Please stop me when I reach your category. Excluding membership dues, tuition, and Israel Bonds, about how much did your household contribute to ALL Jewish charities? (46)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. \$1 - \$100</td> <td style="width: 50%;">7. \$10,000 - \$25,000</td> </tr> <tr> <td>2. \$100 - \$500</td> <td>8. \$25,000 OR MORE</td> </tr> <tr> <td>3. \$500 - \$1000</td> <td>9. DK/NR</td> </tr> <tr> <td>4. \$1,000 - \$2,500</td> <td></td> </tr> <tr> <td>5. \$2,500 - \$5,000</td> <td></td> </tr> <tr> <td>6. \$5,000 - \$10,000</td> <td></td> </tr> </table>	1. \$1 - \$100	7. \$10,000 - \$25,000	2. \$100 - \$500	8. \$25,000 OR MORE	3. \$500 - \$1000	9. DK/NR	4. \$1,000 - \$2,500		5. \$2,500 - \$5,000		6. \$5,000 - \$10,000	
1. \$1 - \$100	7. \$10,000 - \$25,000												
2. \$100 - \$500	8. \$25,000 OR MORE												
3. \$500 - \$1000	9. DK/NR												
4. \$1,000 - \$2,500													
5. \$2,500 - \$5,000													
6. \$5,000 - \$10,000													

<p>68. During the past 12 months, did you or anyone in your household make a contribution to the Jewish Community Federation/UJA Campaign? (47)</p> <p>1. Yes-in Richmond 2. Yes-elsewhere 3. No 4. Richmond and elsewhere 9. DK/NR</p>			
<p style="text-align: center;">IF GIVE TO FEDERATION</p> <hr style="border-top: 1px dashed black;"/> <p>69. (Please stop me when I reach your category.) Was it under or over \$100: (48) IF OVER: CONTINUE READING CATEGORIES</p> <ol style="list-style-type: none"> 1. \$1 - \$100 2. \$100 - \$500 3. \$500 - \$1000 4. \$1,000 - \$2,500 5. \$2,500 - \$5,000 6. \$5,000 - \$10,000 7. \$10,000 - \$25,000 8. \$25,000 OR MORE 9. DK/NR 	<p style="text-align: center;">IF NOT GIVE TO FEDERATION</p> <hr style="border-top: 1px dashed black;"/> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <p>70. Have you ever been contacted by The Jewish Community Federation of Richmond for the purpose of making a contribution? (49)</p> <p>1. Yes -----></p> <p>2. No - GO TO Q. 72</p> <p>9. DK/NR</p> </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <p>71. Were you contacted during the past 12 months? (50)</p> <p>1. Yes</p> <p>2. No</p> <p>9. DK/NR</p> <p>GO TO Q. 72</p> </td> </tr> </table>	<p>70. Have you ever been contacted by The Jewish Community Federation of Richmond for the purpose of making a contribution? (49)</p> <p>1. Yes -----></p> <p>2. No - GO TO Q. 72</p> <p>9. DK/NR</p>	<p>71. Were you contacted during the past 12 months? (50)</p> <p>1. Yes</p> <p>2. No</p> <p>9. DK/NR</p> <p>GO TO Q. 72</p>
<p>70. Have you ever been contacted by The Jewish Community Federation of Richmond for the purpose of making a contribution? (49)</p> <p>1. Yes -----></p> <p>2. No - GO TO Q. 72</p> <p>9. DK/NR</p>	<p>71. Were you contacted during the past 12 months? (50)</p> <p>1. Yes</p> <p>2. No</p> <p>9. DK/NR</p> <p>GO TO Q. 72</p>		

<p>72. During the past 12 months, did your household contribute to any non-Jewish charities or philanthropies? (51)</p> <p>1. Yes -----></p> <p>2. No 9. DK/NR</p>	<p style="text-align: center;">IF CONTRIBUTE TO NON-JEWISH CHARITIES:</p> <hr style="border-top: 1px dashed black;"/> <p>73. (Please stop me when I reach your category.) In total, was it over or under \$100? (52) IF OVER: CONTINUE READING CATEGORIES</p> <ol style="list-style-type: none"> 1. \$1 - \$100 2. \$100 - \$500 3. \$500 - \$1,000 4. \$1,000 - \$2,500 5. \$2,500 - \$5,000 6. \$5,000 - \$10,000 7. \$10,000 - \$25,000 8. \$25,000 OR MORE 9. DK/NR
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line 4

IF AGE 50 OR OVER

82. Do you have a will with any provision for a Jewish institution? (61)

1. Yes 2. No 9. DK/NR

83. Do you have long-term care insurance? (62)

1. Yes 2. No 9. DK/NR

IF Parent in a Nursing Home

84. Now, do you or your wife/husband have an elderly parent in a nursing home?(63)

1. Yes -----
2. No
9. DK/NR

85. Is that home in the Richmond area? (64)

1. Yes
2. No 9. DK/NR

86. Is that home under Jewish auspices? (65)

1. Yes
2. No 9. DK/NR

87. Are you registered to vote? (66)

1. Yes 2. No 9. DK/NR

FINANCIAL RESOURCES

88. (Please stop me when I reach your category.)

How much do you think the home you live in would sell for if it were for sale? (67)

- | | |
|--------------------------|----------------------------|
| 1. Under \$50,000 | 5. \$250,000 - \$500,000 |
| 2. \$50,000 - \$100,000 | 6. \$500,000 - \$1,000,000 |
| 3. \$100,000 - \$150,000 | 7. Over \$1,000,000 |
| 4. \$150,000 - \$250,000 | 9. DK/NR |

89. (Please stop me when I reach your category.) (68)

Please tell me what your household income was in 1993 before taxes. Was it:

Ask question in a matter of fact manner, but if respondent is reluctant, try: Just let me read you the categories, which are quite broad. If you are still uncomfortable, then you obviously do not have to answer. And please remember that I do not know your name or address.

- | | |
|-------------------------|--------------------------|
| 1. Under \$10,000 | 6. \$100,000 - \$150,000 |
| 2. \$10,000 - \$25,000 | 7. \$150,000 - \$200,000 |
| 3. \$25,000 - \$50,000 | 8. Over \$200,000 |
| 4. \$50,000 - \$75,000 | 9. DK/NR |
| 5. \$75,000 - \$100,000 | |

I would like to thank you on behalf of the entire Jewish community for your cooperation with this study. If you would like any information about the Jewish community you can call the Federation at 288-0045.