

(b) (4)

INFORMED CONSENT STATEMENT

INVESTIGATOR:

(b) (4)

You are being invited to take part in a research survey which will take approximately 20 minutes. Taking part in this research is voluntary. Whether you take part is up to you. You can choose not to take part or agree to take part and later change your mind. There will be no penalty or loss of benefits to which you are otherwise entitled.

The purpose of this research is to gather perceptions about tobacco products. You will be asked to complete a survey now.

If you take part in this research, you will be responsible to answer questions as honestly as you can. There are no known risks to completing this research survey. Participation will not cost you anything.

There are no benefits to you if you take part in this research. We cannot promise any benefits to others if you take part in this research. However, possible benefits to others include an improved understanding of tobacco products. Your alternative is to not take part in the research.

Your private information and your medical history will not be collected. The answers to this survey may be shared with individuals and organizations that conduct or watch over this research, including:

- The research sponsor
- People who work with the research sponsor
- Government agencies, such as the Food and Drug Administration

We may publish the results of this research. However, we will not collect your name or other identifying information. We protect your information from disclosure to others to the extent required by law. We cannot promise complete secrecy.

If you have questions, concerns, or complaints, or think this research has hurt you or made you sick, contact the research team at (b) (4) Ask to speak to [(b) (6)].

By proceeding to the next screen, you confirm that you have read, understand, and accept the points above and are consenting to participate in this study.

Yes, I agree [CONTINUE] 1
No, I do not agree [TERMINATE] 2