

QICF) SCREEN

INFORMED CONSENT TO TAKE PART IN A QUANTITATIVE STUDY to Develop Brand A Cigarettes Consumer Messaging

Please review this screen carefully before continuing. When you believe you understand the purpose of this study and you agree to take part, select “Yes – I agree to participate in this research” and click the >> continue button.

M/A/R/C® Research is conducting a public health research study with current smokers, former smokers and people who have never smoked cigarettes to develop product messages for modified risk tobacco products (“MRTPs”). MRTPs are new tobacco products for existing smokers. This research is about various tobacco products including a new MRTP product.

If you participate in this survey, you will read and respond to questions about various tobacco products. You will not be asked to smoke or otherwise try any tobacco products, the new MRTP product, and no promotion of any tobacco brand or product will occur. You will be compensated **[INSERT AMOUNT BASED ON PANEL ID]** for participating in the discussion.

Some sensitive information (“Confidential Information”) about the product may be shared. Any confidential information **may not be disclosed** to anyone outside of this interview. Your input will be analyzed as part of a broader study where your specific opinions will be anonymous relative to thousands of other participants.

Using tobacco products is known to cause disease and early death. Talking about tobacco products could cause you to crave tobacco. There is no direct benefit to you for taking part in this study, outside of the incentive paid for your time. It is your decision to take part in this research study. Participation is voluntary and you may change your mind and stop at any time with no penalty or loss of benefits.

By signing selecting “Yes – I agree to participate in this research” you:

- Are providing electronic confirmation that you have read and understand this Informed Consent Form & Confidentiality Declaration
- Have read and understand the purposes of this research
- Understand what will happen in this interview
- Understand the risks associated with the research
- Will be compensated for your participation

You should contact **[INSERT PANEL PROVIDER NAME BASED ON PANEL ID]** if you have questions or concerns after taking this survey.

Do you agree to participate in this interview?

1. Yes – I voluntarily agree to participate in this study
- No – I do not agree to participate in this study