## Alcohol

**Research Subject ID**  
Research ID: ____________________________________

### Lifetime Alcohol Consumption

In your entire life, have you had at least 1 drink of any kind of alcohol, not counting small tastes or sips?  
- Yes  
- No

### Age of First Use

About how old were you when you first started drinking (not counting small tastes or sips of alcohol)?  
(Provide age in years.)

- Don’t know

### 30-Day Quantity and Frequency

During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?  
(Enter "00" if you did not drink in the past 30 days.)

- Don’t Know

On the days that you drank during the past 30 days, how many drinks did you usually have each day?  
(Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.)  
(Enter "00" if you did not drink in the past 30 days.)

- Don’t Know

### Maximum Drinks in a single Day

What was the LARGEST number of drinks that you ever drank in a single day?  

- Don’t Know