

1. What is your main source of transportation?
  - Walking
  - Biking
  - Your own car
  - Rides from others
  - Taxi
  - Bus
  - Other \_\_\_\_\_
  
2. Does your main source of transportation affect your ability to get to:  
**Please check all that apply**
  - Work
  - Daycare
  - School
  - Access to food
  - Access to healthcare
  - Access to other community services
  - Other \_\_\_\_\_
  
3. What is your biggest transportation issue?
  
  
  
  
  
  
  
  
  
  
4. What ideas do you have to make transportation in our area better?

**Please leave this survey with the agency that asked you to fill it out.  
Thank you for your response!**

Agencies - please scan and return surveys to [CNGtransportationsurvey@gmail.com](mailto:CNGtransportationsurvey@gmail.com). Multiple surveys can be scanned and sent together. Please return responses by March 10, 2016. If you have completed surveys that you are not able to scan and return, please email the above address so we can make an alternative arrangement to return your surveys.

This survey is also available electronically at <https://www.surveymonkey.com/r/7KQBQ99>