1. Zip Code: ________________________________

2. What City or Unincorporated Area of Los Angeles County do you live in? ________________________________

3. Have you been to an HHW/E-Waste Collection Event before?  
   - Yes  
   - No

4. How did you find out about today’s Collection Event? (Check all that apply)  
   - Newspaper  
   - Internet  
   - E-Notify  
   - Hotline  
   - Radio/TV  
   - Flyer  
   - Banner  
   - Word of Mouth  
   - Postcard  
   - Utility Bill  
   - Other: ________________________________

5. What did you bring to today’s Collection Event?  
   - Used Motor Oil/Filter  
   - Paint  
   - Car Batteries  
   - Household Batteries  
   - Fluorescent Lights  
   - Electronic Waste  
   - Household Cleaners  
   - Pesticides/Herbicides  
   - Medicines  
   - Sharps/Medical Needles  
   - Mercury thermometers  
   - Other: ________________________________

6. Your opinion matters...  
   How can we improve the HHW/E-Waste Program?  
   - Offer more events throughout the year  
   - Longer hours of operation  
   - Open a permanent location for the drop-off of HHW/E-Waste  
   - Hold events at different locations (where?)  
   - Shorter wait time  
   - Other: ________________________________

7. How satisfied were you with the overall event today?  
   - Very satisfied  
   - Satisfied  
   - Unsatisfied (please comment) ________________________________

Please turn in your completed survey form at the exit.

Thank you for your participation!

No Drugs Down the Drain – Don’t discard your expired or unused medications down the sink or toilet. Properly dispose of them at our HHW/E-waste collection events, or check out our website for other alternatives.

By filling out this survey, you help us enhance our services to you. For more information, including future collection events, contact us at 1-888-CLEAN-LA or www.888CleanLA.com