1. COSMOS will study cocoa extract and a multivitamin supplement in the prevention of cardiovascular (heart/blood vessel) disease and cancer. As a participant, you will be asked to take 3 pills each day (either active or placebo).

Would you be willing to participate in the COSMOS trial?
○ No  ○ Yes  ○ Not sure, but willing to receive additional information

2. What is your age?
○ Younger than 60  ○ 60-64  ○ 65-69  ○ 70-74  ○ 75 and older

3. What is your sex?
○ Male  ○ Female

4. How would you describe your race (check all that apply)?
○ American Indian / Alaska Native  ○ Black or African American  ○ Asian
○ Native Hawaiian or other Pacific Islander  ○ White  ○ Unknown

5. How would you describe your ethnic group?
○ Hispanic or Latino  ○ Not Hispanic or Latino  ○ Unknown

6. What is the highest level of education that you have achieved?
○ Did not complete high school  ○ High school diploma or G.E.D.
○ Attended or graduated from college  ○ Post-college

7. Have you ever been diagnosed with skin cancer?
○ No  ○ Yes

IF YES, please specify type:
○ Melanoma
○ Other skin cancer (e.g., basal cell, squamous cell)
○ Not sure

Was any skin cancer diagnosed within the past 2 years?  ○ No  ○ Yes

8. Other than skin cancer, have you ever been diagnosed with another type of cancer (e.g., breast, lung, prostate, colon, or other type of cancer)?
○ No  ○ Yes  → IF YES, please specify type(s) other than skin cancer: ______________________________

Was any cancer diagnosed within the past 2 years?  ○ No  ○ Yes

9. Have you ever had a heart attack or a stroke?
○ No  ○ Yes

10. Have you ever had coronary bypass surgery (CABG) OR a coronary angioplasty (PTCA, when a balloon is used to open a blockage in an artery) OR a stent?
○ No  ○ Yes

11. Do you regularly take a COCOA EXTRACT supplement (pills, capsules or powder)?
○ No (Skip to question 12)
○ Yes  → IF YES: Are you willing to stop taking these supplements in order to participate in this study? (You will NOT have to restrict intake of hot chocolate, mocha beverages or chocolate.)  ○ No  ○ Yes

12. Do you regularly take a MULTIVITAMIN supplement?
○ No  ○ Yes  → IF YES: Are you willing to stop taking a multivitamin supplement in order to participate in this study? (You will be allowed to take calcium and/or vitamin D supplements in moderate amounts.)  ○ No  ○ Yes

Thank you for completing the form. Please check to be sure all questions have been answered and return the completed form in the enclosed pre-paid envelope.