

# SHARP PRODUCT INFORMATION CARD • MICROWAVE OVENS

**IMPORTANT! IMPORTANT!**

**PLEASE COMPLETE AND RETURN WITHIN THE NEXT 10 DAYS**  
 We will keep your model number, serial number and date of purchase on file, and help you access that information in case of loss, damage or theft. This will also enable us to contact you in the unlikely event that any adjustments or modifications are ever required for your oven. **THANK YOU!**

MODEL #	SERIAL #
R-310CW	48681

E1Z01-01

1.  Mr.      2.  Mrs.      3.  Ms.      4.  Miss  
 First Name      Initial      Last Name

Street \_\_\_\_\_ Apt. No. \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

2. Date of purchase: \_\_\_\_\_  
 Month      Day      Year

3. Telephone number: \_\_\_\_\_  
 \_\_\_\_\_-\_\_\_\_\_  
 \_\_\_\_\_

4. Please check where purchased:
- |   |   |
|---|---|
| 01. <input type="checkbox"/> Received as a gift       | 06. <input type="checkbox"/> Catalog showroom |
| 02. <input type="checkbox"/> Department store         | 07. <input type="checkbox"/> Hardware store   |
| 03. <input type="checkbox"/> Discount store           | 08. <input type="checkbox"/> Mail order       |
| 04. <input type="checkbox"/> Major TV/Appliance chain | 09. <input type="checkbox"/> Furniture store  |
| 05. <input type="checkbox"/> Local TV/Appliance store | 10. <input type="checkbox"/> Warehouse club   |
|   | 11. <input type="checkbox"/> Other            |

5. Retail price paid, before tax: \$ \_\_\_\_\_

6. Is this new Microwave Oven a:
- |  |   |
|--|---|
| 1. <input type="checkbox"/> First-time purchase  | 3. <input type="checkbox"/> Additional purchase |
| 2. <input type="checkbox"/> Replacement purchase |   |

7. Please indicate where this product will be used:
- |   |   |
|---|---|
| 1. <input type="checkbox"/> Kitchen     | 5. <input type="checkbox"/> RV, boat, etc.    |
| 2. <input type="checkbox"/> Family room | 6. <input type="checkbox"/> Student dormitory |
| 3. <input type="checkbox"/> Dining room | 7. <input type="checkbox"/> Office            |
| 4. <input type="checkbox"/> Second home | 8. <input type="checkbox"/> Other             |

8. Please check the three reasons which most influenced your selection of this product: (check only 3)
- |   |   |
|---|---|
| 01. <input type="checkbox"/> Size/Dimension     | 07. <input type="checkbox"/> Value for price                  |
| 02. <input type="checkbox"/> Style/Appearance   | 08. <input type="checkbox"/> Sharp reputation                 |
| 03. <input type="checkbox"/> Carousel turntable | 09. <input type="checkbox"/> Simple to use                    |
| 04. <input type="checkbox"/> Best features      | 10. <input type="checkbox"/> Magazine article/<br>Test report |
| 05. <input type="checkbox"/> Salesperson        | 11. <input type="checkbox"/> Other                            |
| 06. <input type="checkbox"/> Friend/Relative    |   |

9. Which two product features were most important in your selection: (check only 2)
- |   |   |
|---|---|
| 01. <input type="checkbox"/> Ease of operation      | 07. <input type="checkbox"/> Instant Action     |
| 02. <input type="checkbox"/> Popcorn sensor/setting | 08. <input type="checkbox"/> Can be built in    |
| 03. <input type="checkbox"/> Carousel turntable     | 09. <input type="checkbox"/> Color              |
| 04. <input type="checkbox"/> Sensor reheat/cooking  | 10. <input type="checkbox"/> Outside dimensions |
| 05. <input type="checkbox"/> Browning/Baking        | 11. <input type="checkbox"/> Output wattage     |
| 06. <input type="checkbox"/> CompuCook/Defrost      | 12. <input type="checkbox"/> Other              |

10. Where will you place this Microwave Oven?
- |   |  |
|---|--|
| 1. <input type="checkbox"/> Kitchen counter | 4. <input type="checkbox"/> Over the range |
| 2. <input type="checkbox"/> Cart or table   | 5. <input type="checkbox"/> Other          |
| 3. <input type="checkbox"/> Built into wall |  |

11. How many people currently reside in your household?
- |                                 |                                   |   |
|---------------------------------|-----------------------------------|---|
| 1. <input type="checkbox"/> One | 3. <input type="checkbox"/> Three | 5. <input type="checkbox"/> Five        |
| 2. <input type="checkbox"/> Two | 4. <input type="checkbox"/> Four  | 6. <input type="checkbox"/> Six or more |

12. Your date of birth: \_\_\_\_\_ 19\_\_\_\_  
 Month      Year

13. Marital status: 1.  Married      2.  Single

14. Occupation:

	You	Spouse
Homemaker.....	<input type="checkbox"/>	1. <input type="checkbox"/>
Professional/Technical.....	<input type="checkbox"/>	2. <input type="checkbox"/>
Executive/Administrator.....	<input type="checkbox"/>	3. <input type="checkbox"/>
Middle Management.....	<input type="checkbox"/>	4. <input type="checkbox"/>
Sales/Marketing.....	<input type="checkbox"/>	5. <input type="checkbox"/>
Clerical or Service Worker.....	<input type="checkbox"/>	6. <input type="checkbox"/>
Tradesman/Machine Oper./Laborer...	<input type="checkbox"/>	7. <input type="checkbox"/>
Retired.....	<input type="checkbox"/>	8. <input type="checkbox"/>
Student.....	<input type="checkbox"/>	9. <input type="checkbox"/>
Self Employed/Business Owner.....	<input type="checkbox"/>	10. <input type="checkbox"/>

15. Not including yourself, what is the GENDER and AGE (in years) of children and other adults living in your household?

1. <input type="checkbox"/> No one else in household	2. <input type="checkbox"/> Child under 1 yr.
--	---

Male	Female	Age	Male	Female	Age
1. <input type="checkbox"/>	2. <input type="checkbox"/>	_____ yrs.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	_____ yrs.
1. <input type="checkbox"/>	2. <input type="checkbox"/>	_____ yrs.	1. <input type="checkbox"/>	2. <input type="checkbox"/>	_____ yrs.

16. Which group describes your annual family income?
- |   |   |
|---|---|
| 1. <input type="checkbox"/> Under \$15,000    | 6. <input type="checkbox"/> \$50,000-\$59,999   |
| 2. <input type="checkbox"/> \$15,000-\$19,999 | 7. <input type="checkbox"/> \$60,000-\$74,999   |
| 3. <input type="checkbox"/> \$20,000-\$29,999 | 8. <input type="checkbox"/> \$75,000-\$99,999   |
| 4. <input type="checkbox"/> \$30,000-\$39,999 | 9. <input type="checkbox"/> \$100,000-\$149,999 |
| 5. <input type="checkbox"/> \$40,000-\$49,999 | 10. <input type="checkbox"/> \$150,000 & over   |

17. Which of the following do you use regularly?
- |  |
|--|
| 1. <input type="checkbox"/> American Express, Diners Club, Carte Blanche |
| 2. <input type="checkbox"/> Bank credit card (MasterCard, Visa)          |
| 3. <input type="checkbox"/> Gas, Dept. store, etc. credit card(s)        |
| 4. <input type="checkbox"/> Airline club/frequent flyer program          |
| 5. <input type="checkbox"/> None of the above                            |

18. For your primary residence, do you:
- |   |
|---|
| 1. <input type="checkbox"/> Own a house?                    |
| 2. <input type="checkbox"/> Rent a house?                   |
| 3. <input type="checkbox"/> Rent an apartment?              |
| 4. <input type="checkbox"/> Own a townhouse or condominium? |

(PLEASE CONTINUE ON BACK) >>>

PLEASE DO NOT SEND ANY PRODUCT  
OR CORRESPONDENCE



First-Class  
Postage  
Required  
Post Office will  
not deliver  
without proper  
postage.

# SHARP.

SHARP ELECTRONICS CORPORATION  
P O BOX 171098  
DENVER CO 80217-1098

E 1 Z 0 1 - 0 1



Please fold here.

19. To help us understand our customers' lifestyles, please indicate the interests and activities in which you or your spouse enjoy participating on a regular basis.

- |  |   |  |
|--|---|--|
| 01. <input type="checkbox"/> Bicycling                 | 18. <input type="checkbox"/> Home Decorating/Furnishing     | 35. <input type="checkbox"/> Wines                         |
| 02. <input type="checkbox"/> Golf                      | 19. <input type="checkbox"/> Home Workshop/Do-It-Yourself   | 36. <input type="checkbox"/> Coin/Stamp Collecting         |
| 03. <input type="checkbox"/> Physical Fitness/Exercise | 20. <input type="checkbox"/> Automotive Work                | 37. <input type="checkbox"/> Collectibles/Collections      |
| 04. <input type="checkbox"/> Running/Jogging           | 21. <input type="checkbox"/> Electronics                    | 38. <input type="checkbox"/> Real Estate Investments       |
| 05. <input type="checkbox"/> Snow Skiing               | 22. <input type="checkbox"/> Recreational Vehicles          | 39. <input type="checkbox"/> Stock/Bond Investments        |
| 06. <input type="checkbox"/> Camping/Hiking            | 23. <input type="checkbox"/> Listen to Records/Tapes/CDs    | 40. <input type="checkbox"/> Moneymaking Opportunities     |
| 07. <input type="checkbox"/> Fishing                   | 24. <input type="checkbox"/> Avid Book Reading              | 41. <input type="checkbox"/> Entering Sweepstakes          |
| 08. <input type="checkbox"/> Hunting/Shooting          | 25. <input type="checkbox"/> Bible/Devotional Reading       | 42. <input type="checkbox"/> Wildlife/Environmental Issues |
| 09. <input type="checkbox"/> Power Boating             | 26. <input type="checkbox"/> Health/Natural Foods           | 43. <input type="checkbox"/> Watching Sports on TV         |
| 10. <input type="checkbox"/> Sailing                   | 27. <input type="checkbox"/> Self-Improvement               | 44. <input type="checkbox"/> Home Video Recording          |
| 11. <input type="checkbox"/> Motorcycles               | 28. <input type="checkbox"/> Photography                    | 45. <input type="checkbox"/> Community/Civic Activities    |
| 12. <input type="checkbox"/> Gardening                 | 29. <input type="checkbox"/> Attending Cultural/Arts Events | 46. <input type="checkbox"/> Science/New Technology        |
| 13. <input type="checkbox"/> Grandchildren             | 30. <input type="checkbox"/> Fine Art/Antiques              | 47. <input type="checkbox"/> Our Nation's Heritage         |
| 14. <input type="checkbox"/> Fashion Clothing          | 31. <input type="checkbox"/> Foreign Travel                 | 48. <input type="checkbox"/> Casino Gambling               |
| 15. <input type="checkbox"/> Needlework/Knitting       | 32. <input type="checkbox"/> Travel in USA                  | 49. <input type="checkbox"/> Household Pets                |
| 16. <input type="checkbox"/> Sewing                    | 33. <input type="checkbox"/> Cruise Ship Vacations          | 50. <input type="checkbox"/> Personal/Home Computers       |
| 17. <input type="checkbox"/> Crafts                    | 34. <input type="checkbox"/> Gourmet Cooking/Fine Foods     | 51. <input type="checkbox"/> Use a CD-ROM                  |

20. From the above list, please indicate the numbers representing the 3 most important activities for:

You       Spouse

Thanks for taking the time to fill out this questionnaire. Your answers will be used for market research studies and reports. They will also allow you to receive important mailings and special offers from a number of fine companies whose products and services relate directly to the specific interests, hobbies, and other information indicated above. Through this selective program, you will be able to obtain more information about activities in which you are involved and less about those in which you are not. Please check here if, for some reason, you would prefer not to participate in this opportunity.

If you have questions about our products, please call the Sharp Customer Assistance Center:  
1-800-BE-SHARP

Copyright © 1996 All Rights Reserved

Please seal with tape. Do not staple.

