SURVEY NAME

JULY 4 SURVEY

DATE Monday, July 4, 2022

POWERED BY

Demographics

Total responses

500

Age groups

18 - 24 (13.4%), 25 - 34 (23.4%), 35 - 44 (30.6%), 45 - 54 (14.4%), > 54 (18.2%)

Country

United States

Gender

Male (47.6%), Female (52.4%)

Residential Postal Code

85539 US,60641 US,75070 US,60615 US,92008 US,89084 US,61520 US,50131 US,34484 US,44514 US,96819 US,19003 US,36613 US,24870 US,31906 US,32162 US,20854 US,94583 US,

18324 US,45069 US,46818 US,50320 US,62060 US.33024 US.55971 US.77979 US.29067 US.33606 US.77640 US,19145 US,21221 US.55408 US.02540 US.70607 US.53212 US.96782 US.65051 US.06473 US.78214 US.33172 US.53406 US.28269 US.37412 US.85281 US.13662 US.74063 US.95051 US,44138 US,81003 US,32526 US,28466 US.39047 US.61938 US.30044 US.92612 US,47725 US,98388 US,61101 US,31907 US,73115 US,92103 US,15227 US,45030 US.64123 US.54902 US.11225 US.74501 US,92392 US,72019 US,97212 US,30124 US.95209 US.70584 US,60174 US,35146 US,76148 US,43065 US,08050 US,30176 US.02142 US.92083 US.10458 US.95841 US,92311 US,34113 US,99301 US,01440 US.48170 US.19022 US.33702 US.52804

47630 US.61920 US.44001 US.38134 US.44212 US,46738 US.02176 US,11368 US.07014 US.32609 US.23222 US.73106 US.12309 US.32189 US.11356 US.14211 US.14424 US.29010 US.93230 US.92620 US.44483 US.33810 US.92506 US.59847 US.75069 US.28273 US.85387 US.28401 US.83687 US,75217 US,48813 US,01225 US,55418 US,44112 US,28358 US,65583 US,24354 US.28504 US.33033 US.46360 US.48912 US,49315 US.33903 US.35023 US.63558 US.34741 US.48317 US.65203 US.33404 US,18426 US.62526 US.72802 US.85022 US,15906 US,98270 US,19380 US,27870 US.92101 US.12043 US.11735 US.35630 US.03820 US.35007 US.54936 US.50125 US.36527 US.77054 US.12834 US.19808 US,74017 US.89501 US,70001 US,34450 US,74960 US,75446 US,10453 US,17112 US.04401 US.10467 US.43130 US.07304 US.22401 US.31206 US.28716 US.43551 US,44251 US,94920 US,75227 US,60611 US,28217 US,41719 US,89119 US,30735

US,78244 US,41839 US,94608 US,48104 US.44301 US.27610 US.54942 US.95367 US,14468 US.27596 US.90620 US.08759 US.77520 US.66006 US.92505 US.94134 US.85301 US.91601 US.10550 US.80011 US.67219 US.01845 US.53073 US.29061 US.93311 US.63134 US.19947 US.37055 US,55104 US,23005 US,11413 US,15905 US,91789 US,03285 US,61201 US,80534 US,28713 US,94536 US,80246 US,21213 US,11798 US.80814 US.95206 US.93601 US,19036 US,11229 US,55116 US,75149 US.33131 US.63348 US.70427 US.70582 US,92705 US,92114 US,48101 US,76014 US,10601 US.60014 US,10987 US.30619 US,19510 US,10704 US,78201 US,44312 US,92879 US,32621 US,75143 US,45434 US,13760 US.97365 US.91770 US.30301 US,30909 US,92139 US,46808 US,39562 US.77018 US.24141 US.37029 US.46075 US.30189 US.31794 US.22911 US.10028 US,95687 US,01460 US,55124 US,07652 US,19382 US,60085 US,63049 US,29020

89509 US.97504 US.63366 US.91913 US.30436 US.02119 US.53140 US.48034 US.02893 US.27030 US.30253 US.68108 US.29063 US,43013 US,25259 US,35652 US,15146 US.03825 US.90034 US.18458 US.98125 US.60302 US.21770 US.77351 US.23502 US.53562 US.49002 US.68101 US.35147 US,43103 US,15062 US,19508 US,49544 US,42445 US,10025 US,23602 US,23608 US.47879 US.92262 US.14904 US.48066 US.30107 US.71652 US.48035 US.34610 US.03102 US.98105 US.27265 US.32714 US,90006 US,02134 US,45405 US,32205 US,20011 US,95020 US,91750 US,75701 US.97304 US.45804 US.93314 US.77303 US.30260 US.35660 US.35206 US.80233 US,70301 US,75703 US,37211 US,85143 US,18974 US,02830 US,34479 US,77406 US.62002 US.75241 US.63021 US.36271 US.14136 US.30071 US.19152 US.85364 US.43333 US.73045 US.40216 US.03584 US,11374 US,26031 US,60084 US,06082 US,95621 US,42240 US,30064 US,19422

US,63379 US,85043 US,08867 US,14905 US,12804 US,19611 US,35022 US,16101 US,85085 US,60077 US,38620 US,27587 US,48910 US,04843 US,30068 US,45887 US,15116 US,33510 US,78225 US,04330 US,39845 US,91352 US,11405 US,75001 US,32348 US,15206 US,85207 US

Q1 TYPE: SINGLE SELECTION

Have you received a COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	23.60%	118	20.57%	102.83
A2	Yes, 1 dose	7.40%	37	7.01%	35.05
A3	Yes, 2 doses	35.60%	178	35.64%	178.2
A4	Yes, 3 doses	25.60%	128	26.01%	130.05
A5	Yes, 4+ doses	7.80%	39	10.77%	53.87

Q2 TYPE: SINGLE SELECTION

Which COVID vaccine did you receive?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Pfizer	46.34%	177	45.77%	181.77
A2	Moderna	33.25%	127	34.22%	135.91
A3	Johnson & Johnson	12.30%	47	12.17%	48.32
A4	Combination of more than one product	7.07%	27	7.01%	27.84
A5	Not sure	1.05%	4	0.84%	3.33

Q3 TYPE: SINGLE SELECTION

Were you injured from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	91.36%	349	90.94%	361.19
A2	Yes	8.64%	33	9.06%	35.98
					COMPLETES 382

Q4 TYPE: SINGLE SELECTION

Did your injury from the COVID vaccine require you to seek medical help?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	33.33%	11	34.93%	12.56
A2	Yes	66.67%	22	65.07%	23.41
					COMPLETES 33

Q5 TYPE: SINGLE SELECTION

Did your injury from the COVID vaccine require a hospital stay?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	40.91%	9	39.08%	9.15
A2	Yes	59.09%	13	60.92%	14.26
					COMPLETES 22

Q6 TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in any kind of heart problem?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	63.64%	21	65.34%	23.51
A2	Yes	36.36%	12	34.66%	12.47
					COMPLETES 33

Q7 TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in Myocarditis?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	16.67%	2	11.78%	1.47
A2	Yes	83.33%	10	88.22%	11.0
					COMPLETES 12

Q8 TYPE: SINGLE SELECTION

Did your COVID vaccine injury result in Pericarditis?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	41.67%	5	72.19%	9.0
A2	Yes	58.33%	7	27.81%	3.47
					COMPLETES 12

Q9 TYPE: SINGLE SELECTION

Did your COVID vaccine result in Bell's Palsy

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	72.73%	24	87.45%	31.46
A2	Yes	27.27%	9	12.55%	4.52
					COMPLETES 33

Q10 TYPE: SINGLE SELECTION

How serious is your COVID vaccine injury?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Very serious	24.24%	8	18.11%	6.52
A2	Serious	21.21%	7	12.17%	4.38
A3	Somewhat serious	30.30%	10	47.43%	17.06
A4	Not serious	24.24%	8	22.29%	8.02

Q11 TYPE: MULTIPLE SELECTION

Which of the following are true about your COVID vaccine injury? (check all that apply)

#	ANSWERS	RESPONDENTS(%)	ANSWERS(%)	COUNT	STRATIFIED RESPONDENTS(%)	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	It will likely shorten my lifespan	33.33%	18.33%	11	18.92%	12.73%	6.81
A2	I am now unable to hold a job	27.27%	15.00%	9	20.71%	13.93%	7.45
A3	I am now unable to work a full day	21.21%	11.67%	7	12.44%	8.37%	4.47
A4	It impacts my personal life	39.39%	21.67%	13	25.38%	17.07%	9.13
A5	It is a minor annoyance	54.55%	30.00%	18	65.57%	44.11%	23.59
A6	None of the above	6.06%	3.33%	2	5.64%	3.80%	2.03

Q12 TYPE: SINGLE SELECTION

Now, please think about COVID infection. Did you ever have a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	69.80%	349	72.14%	360.72
A2	Yes	30.20%	151	27.86%	139.28
					COMPLETES 500

Q13 TYPE: SINGLE SELECTION

Did you contract a COVID infection before or after receiving the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	Before	37.75%	57	39.93%	55.61
A2	After	39.74%	60	41.01%	57.12
A3	Both before and after the vaccine	5.30%	8	5.72%	7.96
A4	None of the above	17.22%	26	13.34%	18.59

Q14 TYPE: SINGLE SELECTION

Besides yourself, how many people live in your household?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	0 (I live by myself)	15.60%	78	16.66%	83.32
A2	1 other person	28.40%	142	31.95%	159.73
A3	2 to 4 other people	47.20%	236	43.01%	215.07
A4	5 to 7 other people	7.80%	39	7.54%	37.71
A5	8+ other people	1.00%	5	0.83%	4.16

Q15 TYPE: SINGLE SELECTION

Did any members of your household die from the COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	91.47%	386	90.75%	378.12
A2	Yes	8.53%	36	9.25%	38.55
					COMPLETES 422

Q16 TYPE: SINGLE SELECTION

Did any of your household members contract a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	57.35%	242	57.59%	239.95
A2	Yes	39.81%	168	40.47%	168.64
A3	Not sure	2.84%	12	1.94%	8.09

Q17 TYPE: SINGLE SELECTION

Did any of your household members die from having a COVID infection?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	92.26%	155	94.99%	160.19
A2	Yes	7.74%	13	5.01%	8.44
					COMPLETES 168

Q18 TYPE: SINGLE SELECTION

Did your household member who died from a COVID infection receive at least one COVID vaccine?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	30.77%	4	38.35%	3.24
A2	Yes	69.23%	9	61.65%	5.21
A3	Not sure	0.00%	0		

Q19 TYPE: SINGLE SELECTION

Do you think your household member's medical treatment for COVID contributed to or caused their death?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	30.77%	4	38.35%	3.24
A2	Yes	61.54%	8	53.26%	4.5
A3	Not sure	7.69%	1	8.39%	0.71
					COMPLETES 13

Q20 TYPE: SINGLE SELECTION

Are you planning on getting future COVID vaccines?

#	ANSWERS	ANSWERS(%)	COUNT	STRATIFIED ANSWERS(%)	STRATIFIED COUNT
A1	No	30.00%	150	27.30%	136.49
A2	Yes	48.00%	240	49.08%	245.42
A3	Not sure	22.00%	110	23.62%	118.09