response options (i.e., superior, equal, inferior) may have reinstated the parity comparison, which would not have been mentioned otherwise.

H3 received support from the ad condition by delay interaction previously mentioned, and from the main effect of ad condition in response to both open-ended questions. Statistically significantly fewer subjects said the sponsor was superior over the parity brand when the parity claim was made by the equality versus the negated statement. This effect was consistent over all delay conditions. Subjects in this condition were also more likely than subjects in the negated parity condition to say that the sponsor was equal to the parity brand on speed of relief.

The statistically significant ad condition by delay interaction already discussed also supports H4. As predicted, the number of subjects in the negated parity condition who falsely recalled that the sponsor was superior over the parity brand significantly increased with delay. The same was not true for subjects in either of the other conditions.

As in the first study, there were some effects of product category. In response to the unaided recall question, significantly more subjects expressed a parity comparison between the sponsor and parity pain reliever brands. Subjects in the antacid category were more likely to favor the sponsor over the parity brand. In addition, subjects were also more likely to say that the pain reliever categories were similar overall than were subjects in the antacid category.

As already discussed in relation to Study 1, subjects were less familiar with the antacid brands than with the brands of pain relievers. In the absence of direct experience or knowledge about the antacid brands, subjects appear to have responded in accord with the ads' portrayal of the brands. Subjects were more likely to choose the sponsor and