

Techmaster Electronics
Satisfaction Survey

	Level of Imporance to You					Please Rate Us On How We Performed				
	Not Important		Very Important			Not Satisfied			Very Satisfied	
	1	2	3	4	5	1	2	3	4	5
EASE OF SCHEDULING (Pickup, Delivery, Onsite)	1	2	3	4	5	1	2	3	4	5
STAFFING (Courteous, Professional)	1	2	3	4	5	1	2	3	4	5
ON TIME DELIVERY/ARRIVAL	1	2	3	4	5	1	2	3	4	5
TURNAROUND TIME	1	2	3	4	5	1	2	3	4	5
ATTENTION TO DETAIL (Paperwork & Certificates)	1	2	3	4	5	1	2	3	4	5
QUALITY OF SERVICE (Technical Responsiveness)	1	2	3	4	5	1	2	3	4	5
VALUE (Price for Service)	1	2	3	4	5	1	2	3	4	5

Your comments, suggestions or complaints are valued:

Survey Completed by _____ **Date** _____

We appreciate your cooperation in providing us with the above information. We will be sending you a small token of our appreciation for your timely response. Please use the space above for any additional requests you might have. Thank you.

Please mail or fax this form back to Attn: Quality Manager @ (760) 536-0233

"THE CALIBRATION TEAM THAT CARES"