



Dear Valued Customer,

Thank you for allowing Charm Medical Supply to be of service to you. Please help us by taking a few minutes to tell us about the service that you have received from us so far. Your feedback is important to us and will be used to guide the future planning of customer care service enhancements.

	Excellent	Good	Fair	Poor
1. How eager to help you were the customer service representatives at our company?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. How well do you feel our customer service representatives understand what you're saying and your needs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. How knowledgeable do our customer service representatives seem to you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Do you feel our delivery personnel and technicians present themselves in a professional and courteous manner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Please rate the condition of the products and supplies upon arrival to you home?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. How convenient is our company to use?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Please tell us, what is your overall satisfaction with our service and products?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Considering your complete experience with our company, how likely would you be to recommend our company to others on a scale of 1 – 10?

- 1   
  2   
  3   
  4   
  5   
  6   
  7   
  8   
  9   
  10

What can we do in the future to earn a score of 9 or 10 if you rated us less than 9?

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Thank you for taking the time to answer these questions. Please mail this survey to the address noted below or fax to us at: 781-829-9836.

**A Division of TMed Holdings, Inc.**  
 33 Riverside Drive Suite 200  
 Pembroke, MA 02359  
 781-829-9813 or 877-94-CHARM (34276)  
[www.charmmedical.com](http://www.charmmedical.com)