

CLIENT SERVICE QUESTIONNAIRE

How did we do? Please rate our performance and return to our office.

Please indicate the type of matter that we handled for you:

Estate Planning Probate/Administration Business Other _____

1. What did you like about the way we handled this matter?

2. What could we do better?

3. On a scale from 1/very dissatisfied to 5/very satisfied, how satisfied are you with our firm? _____

4. Would you recommend our firm to others? Yes No

Why or why not?

5. Would you like us to contact you about your experience? Yes No

If so, please provide your name and a convenient day/time to call below:

Thank you for taking the time to complete our questionnaire.
Please feel free to contact us any time we can be of service to you.