

COMMENT FORM

Name: SALLY SNEEL Date: 1/20/12

1. How Do You Rate Our Services?

On a scale of 1-10 (with 10 being best), please rate our practice:

Office Atmosphere: 10 Staff: 10 Services: 10

What can we do better?

What did you like best? Expertise.
When I have a question, I e-mail my question and
get a prompt reply - by e-mail; Prompt response.

2. What Would You Tell Others?

If someone you know were interested in our services, what would you tell them about our practice?

State your situation. The practice will
advise accordingly.

Often, people who are considering our services like to hear about the experiences of others. May we share your comments in our educational/promotional materials?

Yes. Please initial: SSS

No.

*Please see other side...
nothing on other side*