

CLIENT EVALUATION FORM

We strive to provide the best client service possible. Your feedback and opinions are very important to us.

Your Name: _____

On a scale of 1-5 (5 is the best) please rate us:

Overall Rating	1	2	3	4	5
Trustworthy	1	2	3	4	5
Knowledgeable	1	2	3	4	5

1. How did you hear about Knepper & Stratton? *Internet Search*
2. Was the staff courteous and professional? Were your calls and emails responded to in a timely manner and did we answer your questions satisfactorily? *Yes!!*
3. If your case has been concluded, was the case result in line with your expectations?
Exceeded my expectations!!
4. What parts of the process did you feel Knepper & Stratton handled well? What parts of the process did you feel Knepper & Stratton should improve?
No improvements needed.
5. Would you refer a family member, friend or acquaintance to Knepper & Stratton?
Yes!!
6. May we use this review and/or parts of it on our website, for reference purposes, or in other marketing, such as marketing brochures or pamphlets? *Yes.*
 - a. If so, how would you like us to refer to you? Circle one below.

Full Name

Initials

First Name Only