

This brief customer service survey serves to address service quality, value, speed, and level of responsiveness to customer needs.

| Please rate the speed of service you received during this visit.   |
|--|
| Very Good Good Neutral Poor Very Poor  |
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| How much do you agree or disagree with the following statement:  |
| The Store represents good value for the money.   |
| Strongly Agree   |
| C Agree  |
| Neither Agree nor Disagree   |
| Disagree   |
| Strongly Disagree  |
|  |
| Overall, please rate the quality of service that you received during this visit.   |
| ◯Very Good ◯ Good ◯ Neutral ◯ Poor ◯ Very Poor   |
|  |
| Did you have any questions or concerns while you were visiting the Store?  |
| Yes No   |
|  |
| Were your questions or concerns addressed to your satisfaction while you were visiting the Store?  |
| Yes No   |
|  |
| Would you like a representative from the Store contact you regarding your concern?   |
| Yes No   |
|  |
| If in the question above you indicated that you would like to be contacted by a representative of the Store, please provide your preferred telephone number below. |
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