



CUSTOMER SATISFACTION SURVEY

| | |
|------------------------------------|------------------------|
| Customer Name: _____ | Date: _____ |
| Address: _____ | Phone: _____ |
| Contact Person: _____ | Position: _____ |
| Serial # & Hours: _____ | |

Please provide feedback on the services provided by Harlan Global Manufacturing.

| Questions: | Not Applicable | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
|--|--------------------------|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| | N/A | 1 | 2 | 3 | 4 | 5 |
| 1. I was satisfied with Harlan Global's Sales staff involvement with my organization. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I was satisfied with the contract/agreement documents for the services provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I was satisfied with the transition from the sales process to the delivery of products by Harlan Global. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I was satisfied with the product quality provided. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The services provided by Harlan Global met my expectations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. I was satisfied with Harlan ability to respond when a problem arises. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. I would recommend Harlan Global's services to others. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. What did you like most about the services provided? | | | | | | |
| 9. How could Harlan Global improve the services provided? | | | | | | |
| 10. Would you like someone from Harlan Global to contact you regarding your satisfaction/dissatisfaction with the services provided? | | | | | | |

When complete, please fax to (913)321-5802 or e-mail to bka@harlan-corp.com
Harlan Global Manufacturing thanks you for being a valued customer and for completing this Customer Satisfaction Survey.