

## **Customer Service Feedback Form**

Thank you for visiting CCTF Corporation. We value all of our customers and strive to meet everyone's needs.

Please tell us the date and location of your visit:

Date:	L	Location:	
1. Were you satisfied	with the customer servic	ce we provided to you?	
Yes	No	Somewhat	
Comments			
2. Was our customer se	ervice provided to you in	n an accessible manner?	
Yes	No	Somewhat	
Comments			
3. Did you experience	any problems accessing	g our goods and services?	
Yes	No	Somewhat	
Comments			

Contact Information (optional) Name: \_\_\_\_\_ Phone number: \_\_\_\_\_ Email: \_\_\_\_\_