MEMORANDUM

N H TO:

FROM: Peter Thompson & Associates

Thank you again for choosing Peter Thompson & Associates to represent you in your personal injury matter. We value your feedback and would appreciate you taking a moment to respond to the following questions and then returning it to our office in the self addressed stamped envelope.

Using the scale below please rate Peter Thompson & Associates in the following categories:

I = poor

2 = fair

3 = average

4 = good/above average

3 = excellent

| A. Categ | orias | Score (please circle one) | | | | |
|----------|-------------------|---------------------------|---|---|---|-----|
| A. Categ | unication Ability | 1 | 2 | 3 | 4 | (5) |
| | nsiveness | 1 | 2 | 3 | 4 | |
| Qualit | y of Service | 1 | 2 | 3 | 4 | (3) |

B. Overall Satisfaction of Services

- Would you recommend the services of Peter Thompson & Associates in the future? Without a doubt. Great Service.
- 2) If your answer to question number 1 above is no, please explain why and what you feel our office could do better in the future.
- 3) Please provide any additional feedback or comments that you may have regarding the service you received at Peter Thompson & Associates. Condice & Chrissy were a pleasure to workwith, they both returned my emails and phone calls promptly. Peter Thompson & Associates' services provided were top-Knotch. Thank You Far all your hard work.