

DOCUMENT 28  
REVISION 3

## CUSTOMER SURVEY

**Please Return To:**  
**Transene Company, Inc.**  
**Fax: 978 739 5640/e-mail: sales@transene.com**

Name:  
Company:  
Date:

Transene Company's objective is complete customer satisfaction. As a customer, you can help us measure our performance by providing feedback on our products and service. At your convenience, please take a moment to complete and return this brief survey. We thank you for your time. Please circle your grade selection with 4 being the highest.

1. Is the customer service staff knowledgeable and helpful? 1 2 3 4
2. When your delivery arrives, is it correct and in good condition? 1 2 3 4
3. Are you satisfied with the carriers we choose? 1 2 3 4
4. Does our product quality meet your needs? 1 2 3 4
5. Are Transene prices reasonable for the products you purchase? 1 2 3 4
6. If you required technical service, were you satisfied with the service? 1 2 3 4

Transene Company offers a wide range of products including customized formulations. Can we help with any of your other chemical needs? Please provide contact information, and our technical staff will contact you.

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Please list your comments and ideas for improvement. \_\_\_\_\_

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