

VOICE OF THE CUSTOMER CUSTOMER SATISFACTION RATING FORM

Thank you for working with ESI Motion. We really appreciate you choosing us. ESI Motion is committed to continuous improvement by identifying opportunities that allow us to perform to our very best.

To help us improve, please give us your honest feedback by completing the attached survey using the following guidelines. Thank you for taking your time on our survey.

Please complete the survey with the following guidelines

- 1. Type your name and date completed
- 2. Adjust the weightings as you deem appropriate based on your priority, or leave blank for equal distribution
- 3. Score the "Rating" column each of the 5 Key Success Criteria on a 1-5 scale where:
 - 5 = Exceptional
 - 4 = Very Good
 - 3 = Satisfactory
 - 2 = Marginal
 - 1 = Unsatisfactory
 - NA = Not applicable
- 4. Please provide any comments that can help improve our service to your company in the space provided labeled "additional comments."

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Name:	RATINGS:		
Company:	5 4 3	=	Exceptional Very Good Satisfactory
Date Completed:	2 1	=	Marginal Unsatisfactory
Program/Purchase Order#:	N/A	=	Not Applicable

CRITERIA	RATING	WEIGHT %*	COMMENTS
Quality Did the product meet datasheet and/or program specifications?			
On-time Delivery Was the product shipped on-time?			
Technical Expertise <i>How would you rate our technical expertise?</i>			
Responsiveness How would you rate the responsiveness of our program team and sales representatives?			
Value <i>Do you feel the product value was in line</i> <i>with product pricing?</i>			
Assumed to be equal distribution unless otherwise specified. Additional Comments Please feel free to provide feedback on performance or suggestions that would improve your satisfaction in working with ESI.			1

We thank you for this opportunity and look forward to supporting your future requirements.

