

PAPER SYSTEMS INCORPORATED
CUSTOMER SURVEY

Company Name: _____ Your Name: _____

E-Mail Address: _____

Please check or write-in answer

SALES

1. How long have you purchased PSI products?

Under 1 year 1 – 3 years 4 – 6 years 7 – 10 years 10+ years

2. Please indicate how you place your orders (check all that apply).

Phone Fax E-Mail Rep Mail

3. How often does a PSI sales rep visit you at your location?

Monthly Semi-Annually Annually Seldom Never

4. How often would you like a sales rep to visit you at your location?

Monthly Semi-Annually Annually Seldom Never

5. How would you rate our sales staff, i.e. product knowledge, account information, new ideas/products?

Excellent Good Average Below Average Poor

CUSTOMER SERVICE

1. What is the main reason you contact customer service?

Place an order Check on an order Price Quotation Other _____

2. How satisfied are you with the ordering process?

Very Satisfied Satisfied Somewhat Satisfied Dissatisfied

3. How satisfied are you with the professionalism that the customer service representative displayed during your last encounter?

Very Satisfied Satisfied Somewhat Satisfied Dissatisfied

4. How satisfied are you with the knowledge that the customer service representative displayed during your last encounter?

Very Satisfied Satisfied Somewhat Satisfied Dissatisfied

5. If your problem was not resolved, did our customer service representative offer to follow-up after the call?
 Yes No Comments _____
6. Overall, how would you rate our customer service department, i.e. knowledgeable, courteous, and friendly?
 Excellent Good Average Below Average Poor
7. How satisfied are you with our response to questions regarding product/order availability?
 Very Satisfied Satisfied Somewhat Satisfied Dissatisfied
8. In an effort to improve our quote process, what would you consider to be an acceptable turnaround time?
 4 hours 6 hours 8 hours 12 hours 24 hours

MARKETING AND FINANCE

1. Do you use PSI's sales support documents, i.e. catalogs, brochures, web site, e-mail?
 Yes No
 If yes, please rate:
 Excellent Good Average Fair Poor
2. How would you rate our invoicing process?
 Excellent Good Average Fair Poor
3. How satisfied are you with the service and responsiveness of our credit and collections department?
 Very Satisfied Satisfied Somewhat Satisfied Dissatisfied

PRODUCTION AND WAREHOUSE/DISTRIBUTION

1. How would you rate our shipping procedures, i.e. accuracy of orders, condition of orders?
 Excellent Good Average Fair Poor
2. How would you rate the quality of PSI's products, i.e. packaging, paper quality, carton sealing and labeling?
 Excellent Good Average Fair Poor

3. Are we meeting your expected ship dates? Yes No

If no, how can we improve? _____

4. Are you satisfied with our current five (OH, PA, FL, TX, CA) distribution locations? Yes No

If no, please comment _____

GENERAL

1. Does PSI make it easy to do business with your company? Yes No

If no, how can we improve? _____

2. How satisfied are you with the range of products that PSI offers?

Very Satisfied Satisfied Somewhat Satisfied Dissatisfied

3. What percentage of your supply business is with PSI?

100% 75% 50% 25%

If not 100%, please comment _____

4. Do you buy the following items?

Do you buy from PSI?

Plain paper rolls	Yes	No	Yes	No
Printed paper rolls	Yes	No	Yes	No
POS/Printer Ribbons	Yes	No	Yes	No
Thermal Transfer Ribbons	Yes	No	Yes	No
Labels: Scale, Barcode, Other	Yes	No	Yes	No
Ink Jet/Toner Cartridges	Yes	No	Yes	No
ASI-promotional items	Yes	No	Yes	No

5. Are there any other products that you would like to see PSI offer in the future? Yes No

If yes, what products?

6. Would you recommend our products to others? Yes No

If no, please explain _____

Any additional comments:
