

Customer Satisfaction Survey

Please take our quick survey to assess your satisfaction with CE Optics products or services. We look forward to reviewing your responses. Thank you for your time and feedback!

Client name:							
Client e-mail, phone No.							
Products or services you bought from us:							
Please rate your s with each of the fe	ollowing:	Rating scale					
Please check the corresp		1 Very Dissatis- fied	2 Not satisfied	3 Neutral	4 Satisfied	5 Very satisfied	Comments
Quality of product/s	service						
Communication							
Flexibility							
Technical expertise							
Adherence of deadli	ine						
Complaint resolutio	n						
Compliance of Price	/Quality						
Suggestions for level up:							
Official in charge							
Name:							
Position:							
Initials:							
Date:							

Thank you for completing this questionnaire. Results will be treated in confidence.