



# We Appreciate Your Feedback



Please help us evaluate our performance in meeting your needs & expectations, allowing us to serve you even better.

1. What's the first thought that comes to mind when you think of MDSolutions?

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2. Are we meeting your expectations in the following areas:

**Customer Service:** Yes No If no, why? \_\_\_\_\_

**Price:** Yes No If no, why? \_\_\_\_\_

**Delivery:** Yes No If no, why? \_\_\_\_\_

**Quality:** Yes No If no, why? \_\_\_\_\_

3. Which of our products do you use? (Select all that apply)

Brackets

Strapping

Overhead & Guide Sign Brackets

Signs (Blank / Sheeted / Finished)

Posts & Accessories

Construction Safety Products

Fasteners

4. Additional products you would like us to offer:

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5. Would you refer us to others in the industry? Yes No

If yes, please feel free to provide a business lead in the space below:

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_