



Outstanding Customer Service Is Our Mission

As a Central Valley Community Bank customer, your opinion is very important to us. Please take a moment to complete this questionnaire and fax it to us at 559-323-3460, return it to your next visit, or mail it to Central Valley Community Bank Retail Administration, 7100 N. Financial Drive, Suite 101, Fresno, CA 93720.

How Are We Doing?

Please rate your impression of our customer service representatives (tellers) and branch office on your last visit to the Bank.

Customer Service Representative (Teller) Evaluation: (check one)	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Needs Improvement</u>	<u>Poor</u>
Friendliness/greeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timeliness of service/transactions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clarity of communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank product knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How would you rate the overall service you received during your most recent visit? (check one)

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Branch Office Evaluation: (check one)

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Needs Improvement</u>	<u>Poor</u>
Welcome/greeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety/security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list any financial products or services you are interested in which we do not offer:

We would greatly appreciate your comments and suggestions in order to create an experience that exceeds your expectations. Please share any comments that may be of assistance to us:

Branch Office Visited: _____

Day Visited: ___M ___T ___W ___Th ___F ___Sa ___Su

Time: ___9:00 - 12:00 ___12:00 - 4:00 ___4:00 - close

(Optional)

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Account Number: _____

Day Phone: _____ Evening Phone: _____ E-mail: _____