



Customer Comment Card

To assist in ensuring you have a pleasant shopping experience where your needs are met promptly, with courtesy, helpfulness and a smile

Date: ___ / ___ / ___ Time: ___ : ___ am / pm Cashiers Name: _____

Did you find our cashier helpful and friendly? *(Please circle)* Poor Fair Good Excellent

Were you attended to and served in your realistic and expected time frame? *(Please circle)* Y / N

Did you find everything you were looking for? *(Please circle)* Y / N

What items were unavailable?

Did the service meet your expectations? *(Please circle)* Y / N Your comments:

We welcome your comments, should you wish to talk to someone personally regarding your needs, please phone the store on:

03 5480191 or Email: food@freshchoicenelson.co.nz

Name: _____ Phone No. () _____

Address: _____

Please drop this card into the Customer Comment box and be into **win a \$50.00 grocery voucher.**