

CUSTOMER SATISFACTION CERTIFICATE



PAINTING • ROOFING • WINDOWS

7 7 7 - 1 2 3 4

STATE LICENSE NO. 245291

This form is presented to you so that we can insure the work on your building has been completed. Please check the appropriate blocks below:

The work completed is: Excellent Satisfactory Passable

Type of work performed by Armstrong:

- PAINTING
- ROOFING
- WINDOWS
- CARPENTRY
- VINYL SIDING
- GUTTERS AND/OR
- DOWNSPOUTS
- OTHERS (please list)

Installed New Front Entry Door

Comments and Suggestions: I hope you are aware of the fact that Lenny and his crew are incredible - True Craftsmen - Lenny deserves a raise!!!

Can we use your name as a reference? yes no

Can we use a picture of your house without an address as a reference? yes no

Can we use your address as a reference? yes no

Date: 10/3/2010

Name: JOHN L. ANKNER

Address: 1178 STARR AVE

City: ST. HELENA CA. 94574

Installer (if name known): Dimitriy

Customer Signature: John L. Ankner

NAME & ADDRESS:

JOHN ANKNEOR
1178 STARR AVE.
ST. Helena CA 94574

PHONE NUMBER:

707-967-0641

Date: 10/31/2010

Estimator: Bill Morris

Painting Roofing

Windows Siding

Other: FRONT DOOR

If painting, Applicator: _____

HOW DID WE DO?

Thank you for choosing Armstrong Painting, Roofing, Windows, & Siding to complete your home improvement project. Were you pleased? Dissatisfied? For 40 years, we have always placed a special value on customer comments and suggestions.

1. How would you rate the work completed by Armstrong overall?

Excellent Good Passable Unsatisfactory

2. What changes or improvements in our work, if any, would you suggest?

3. Did our sales consultant explain satisfactorily the work to be performed?

YES NO

4. Was the work completed as promised, on time and with no unexpected problems?

If not, what should we have done differently?

We hit some road blocks on the timing of the project - Alls well that ends well!

5. Did our applicators clean the premises before leaving each day?

YES NO

6. Were you able to communicate with our applicators, if necessary, to your satisfaction?

YES NO

7. Do you have any comments regarding communications with our office personnel?

The office personnel was excellent
RD (RHONDA & Maria)

8. Did our applicators display an Armstrong sign while work was in progress?

YES NO

9. Do you know anyone who might like information on Armstrong's products and services?

Name: _____ Phone: _____

Name: _____ Phone: _____

10. If we wished to reach you as efficiently and cost effectively as possible, where would we place our advertising?

- Newspaper / Which paper? _____
- TV / Which station? _____
- Radio / Which station? _____
- Magazine / Which ones? _____
- Internet: _____
- Direct Mail
- Yellow Pages
- Other Sources: _____

11. Can we use you as a reference? YES NO

12. Can we use a picture of your house without an address as a reference? YES NO

13. Can we use your address as a reference? YES NO

14. Other comments, Suggestions:

Lenny Dimitry is an outstanding employee - I hope you realize how lucky you are to have him as an employee - His crew was great as well - Lenny truly made a difference on this project

Please insert complete questionnaire in the self-addressed envelope. Thank you.

John L. Arden



4575 San Pablo Avenue
 Emeryville, CA. 94608
 Contractor State License #245291

For Armstrong personnel use only: