

Dayton  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

Springboro  
195 East Central Avenue  
Springboro, Ohio 45066  
(937) 748-1749  
(937) 748-9552 fax

www.DebtFreeOhio.com



**Richard E. West**  
Board Certified  
Consumer Bankruptcy Specialist

**Stephen J. Malkiewicz**  
Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 5-7-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations



I just wanted to take this opportunity to thank you and your staff for everything while you handled my case. I actually had an initial consultation with Mr. West about a year and a half ago, in which he was quite helpful in explaining the process and how it could help me. Unfortunately, I let my own personal issues and fears cloud my judgment at the time and didn't make the deposit to start my file. In the next seven months while waiting for some miracle to fall out of the sky to help me, my financial situation went from bad to worse. My very nice car was repossessed and I was sued by a creditor. In the process of that lawsuit they garnished my bank account and I nearly lost my apartment because it caused a rent check to bounce. At that low point I realized that I had made a big mistake by not moving forward with the bankruptcy option. I called your office again, asking for a new appointment. Since I had already had my initial free consultation, I was expecting to be charged for an additional visit. I even had asked my Mother to for some money to pay for the office visit. Instead, the friendly staff told me I could meet with Mr. West again, and it would be once again a free consultation. This right off the bat made me considerably at ease, because I already felt embarrassed about coming back with things even worse than it was when I first met with him. So I came in for my consultation and Mr. West yet again was incredibly understanding and supportive. Not once during either visit with him did he seem judgmental or critical of my current situation. He simply offered a workable solution that would have some lasting benefits for my financial future. I used the money my Mother had given for the office visit for the deposit to open my file and the rest is history. Throughout the entire process, from the office workers, paralegals, and the attorney who handled my trustee meeting, I was treated extraordinarily well and felt that I had the best legal team handling my case. I am forever grateful for the help that this office has provided for me, and I sincerely wish you nothing but continued success as you help more and more people get through these tough times. Thank You.

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9

**CLIENT SATISFACTION SURVEY**

1. Please write the date you are completing this survey: 13 Oct 2009
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
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| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

N/A

5. What do/did you like about your experience with our office?

Ease of filing a bankruptcy

6. What would you recommend to improve our office and services?

N/A

7. Would you recommend this office to other people? If not, why not?

yes

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

---

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

s:\wpwin\client survey\client survey.doc

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1/7/2009

**CLIENT SATISFACTION SURVEY**

1. Please write the date you are completing this survey: 9/17/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
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  - Slightly exceeded my expectations
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  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

*I liked the attention to detail and overall explanations of the process.*

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

*Yes.*

8. Is there anything which deserves special recognition? If so, why?

*all the staff worked together to make the process as painless as possible*

9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL)

(a name gets a personal letter)

s:\wpwin\client survey

\_\_\_\_\_

(!!)

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 9-25-09
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

*YOUR OFFICE WAS ALWAYS ABLE  
TO ANSWER QUESTIONS AND ASSIST  
IN EVERY WAY.*

6. What would you recommend to improve our office and services?

*NA*

7. Would you recommend this office to other people? If not, why not?

*YES!*

8. Is there anything which deserves special recognition? If so, why?

*EVERYTHING*

9. Please enter any final comments/suggestions below.

*LINDA SWARIS WAS A GREAT HELP  
IN EVERY WAY!*

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 9/18/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

N/A

5. What do/did you like about your experience with our office?

The staff was friendly, efficient and made sure I understood the process.

6. What would you recommend to improve our office and services?

For them to hire me as a paralegal. I would love to work there. They have my resume 😊

7. Would you recommend this office to other people? If not, why not?

Yes!

8. Is there anything which deserves special recognition? If so, why?

The office staff made me feel at home.

The attorneys really cared.

9. Please enter any final comments/suggestions below.

Great people! We need more individuals like them!

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 6-29-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office? \*

the friendliness, the cats, didn't make you feel like a patient

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

yes

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

Whenever I called with a question, I was never put off, they took the time to help me.

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 7/6/09
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

VERY HELPFUL STAFF - VERY ORGANIZED.  
I HAVE READ MANY BANKRUPTCY FORUMS AND HAVE READ  
ABOUT THE STRUGGLES PEOPLE HAVE HAD THEIR LAWYERS, ETC.

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

IT WOULD BE THE ONLY PLACE I WOULD  
RECOMMEND AND I HAVE DONE SO IN THE  
PAST

8. Is there anything which deserves special recognition? If so, why?

MIR WEST (FOR CALMING SOME FEARS ABOUT BANKRUPTCY)  
SUE (FOR PUTTING UP WITH MY QUESTIONS)

9. Please enter any final comments/suggestions below.

I AM DEBT FREE THANKS TO YOUR HELP (AND A TINY HD OF  
YOURS I SAW IN THE BACK OF THE DAYTON DAILY NEWS FIVE YEARS  
AGO)

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1/7/2009

**CLIENT SATISFACTION SURVEY**

- Please write the date you are completing this survey: 1-9-09
- Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
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| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

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  - Failed to meet my expectations

Handwritten scribbles and marks at the bottom right of the page.

4. If our services did not meet your expectations in any way, why not?

Expectations were exceeded.

5. What do/did you like about your experience with our office?

I liked how everyone was knowledgeable and always willing to help.

6. What would you recommend to improve our office and services?

~~Nothing to recommend.~~

7. Would you recommend this office to other people? If not, why not?

Everything ran smoothly  
I would and I will!

8. Is there anything which deserves special recognition? If so, why?

~~Nothing~~ I can't thank you enough for giving us the courage to finally see this through and not feel bad about it. Also, your receptionists were excellent!

9. Please enter any final comments/suggestions below.

Any time someone is in our situation, I will make sure they come to your office!

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### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 9/5/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
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| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
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| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
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| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

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- Met my expectations
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- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

NA

5. What do/did you like about your experience with our office?

The non-judgmental attitude of all persons involved!

6. What would you recommend to improve our office and services?

nothing

7. Would you recommend this office to other people? If not, why not?

Yes, this was one of the most difficult experiences we have been through - your office/personnel are Excellent!

8. Is there anything which deserves special recognition? If so, why?

The women in the front reception area - they were always sweet + courteous. \* ALSO, everything was so ORGANIZED!

9. Please enter any final comments/suggestions below.

We, ~~██████████~~, are so very grateful for the expertise of your office. I can't imagine going through this ~~██████████~~ all —

Dayton  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

Springboro  
195 East Central Avenue  
Springboro, Ohio 45066  
(937) 748-1749  
(937) 748-9552 fax

www.DebtFreeOhio.com



**Richard E. West**  
Board Certified  
Consumer Bankruptcy Specialist

**Stephen J. Malkiewicz**  
Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

9

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 9-18-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

Everyone was so ~~friendly~~ friendly. That helps.

6. What would you recommend to improve our office and services?

No Nothing it was great

7. Would you recommend this office to other people? If not, why not?

Definitely!

8. Is there anything which deserves special recognition? If so, why?

All the young ladies that helped me.  
They knew what they were doing.

9. Please enter any final comments/suggestions below.

I haven't had any problems with the <sup>Credit Card</sup> people!  
since the Bankruptcy.

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1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 6/26/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                        |
|---|-----------------------|-----------------------|-----------------------|-----------------------|------------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> + |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations



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### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 5-27-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

N.A.

5. What do/did you like about your experience with our office?

every thing promptness

6. What would you recommend to improve our office and services?

nothing

7. Would you recommend this office to other people? If not, why not?

yes absolutely

8. Is there anything which deserves special recognition? If so, why?

sure she was very nice and helpful and the receptionist was to

9. Please enter any final comments/suggestions below.

~~god bless~~ god bless you all  
and thank you so much in a time of  
need " " " " " "

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 6/15/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                                | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?  
SOMETIMES I FELT A LITTLE UNDER INFORMED OF HOW THE PROCESS WORKED, BUT WHEN WE HAD QUESTIONS THEY WERE ANSWERED QUICKLY.
5. What do/did you like about your experience with our office?  
EVERYONE PUT ME AT EASE THAT WE WERE GOING TO BE OKAY AND THIS WAS NOT THE END OF THE WORLD. ALSO EVERYONE WAS VERY PROFESSIONAL.
6. What would you recommend to improve our office and services?  
MAYBE HANDOUT A GENERALIZED TIMELINE OF WHAT TO EXPECT DURING THE PROCESS.
7. Would you recommend this office to other people? If not, why not?  
YES, AND I ALREADY HAVE.
8. Is there anything which deserves special recognition? If so, why?  
OUR INITIAL MEETING WITH RICHARD REALLY HELPED MY WIFE BE PUT AT EASE
9. Please enter any final comments/suggestions below.  
THANK YOU! WE ARE DOING VERY WELL AND RESTING COMFORTABLY AT NIGHT AGAIN.

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 5-8-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not? *NA*
5. What do/did you like about your experience with our office? *Easy + Stress Free.*
6. What would you recommend to improve our office and services? *NA*
7. Would you recommend this office to other people? If not, why not? *Definately*
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 5-06-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

Richard and all the staff are just great!  
Everyone was so helpful in every way.

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

yes

8. Is there anything which deserves special recognition? If so, why?

Everyone's great attitude and that no one looks down on u, even though u yourself feels very shameful in the situation. The staff and Richard takes

9. Please enter any final comments/suggestions below

Thanks to Richard and all the staff for helping us get our lives back! Thanks so much...  
the same out of it and makes u feel like a <sup>deserving</sup> person again!

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1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: May 6, 2009
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectation
- Failed to meet my expectations

Thank also for being so understanding  
Thank again

4. If our services did not meet your expectations in any way, why not?

Services was Great

5. What do/did you like about your experience with our office?

Like the way everyone was so Kind & understanding

6. What would you recommend to improve our office and services?

Just stay the way you are

7. Would you recommend this office to other people? If not, why not?

yes I sure will

8. Is there anything which deserves special recognition? If so, why?

Your office group is just so Great & Kind

9. Please enter any final comments/suggestions below.

Cannot say to all of you  
how much I thank all of you  
God Bless Each One of you

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1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4/25/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
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| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

*Friendly, polite interaction w/ staff -  
supportive atmosphere.*

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

*Yes*

8. Is there anything which deserves special recognition? If so, why?

*See above*

9. Please enter any final comments/suggestions below.

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1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4-24-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

I LIKED very much the way your office HANDLED everything.

6. What would you recommend to improve our office and services?

RETURN phone calls - SAME DAY.

7. Would you recommend this office to other people? If not, why not?

YES. I TRULY WOULD. THANK YOU.

8. Is there anything which deserves special recognition? If so, why?

your UPDATE INFO + the ANSWERS you GAVE TO my QUESTIONS.

9. Please enter any final comments/suggestions below.

Thank you very much. I'm finally glad I completed this problem with your help + caring. ATTA A BOY!!!!

NAME: \_\_\_\_\_

Dayton  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

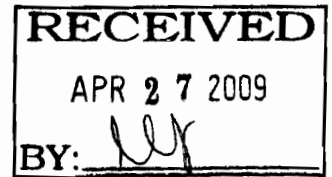
Springboro  
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### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4-24-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?  
*everyone was very helpful*
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?  
*yes*
8. Is there anything which deserves special recognition? If so, why?  
*no*
9. Please enter any final comments/suggestions below.

Dayton  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

Springboro  
195 East Central Avenue  
Springboro, Ohio 45066  
(937) 748-1749  
(937) 748-9552 fax

www.DebtFreeOhio.com



**Richard E. West**  
Board Certified  
Consumer Bankruptcy Specialist

**Stephen J. Malkiewicz**  
Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4/23/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

—

5. What do/did you like about your experience with our office?

Every question we had, was answered - even if it took some time, we got a very knowledgeable answer.

6. What would you recommend to improve our office and services?

—

7. Would you recommend this office to other people? If not, why not?

Yes - definitely.

8. Is there anything which deserves special recognition? If so, why?

The entire staff was courteous, friendly, and very professional.

9. Please enter any final comments/suggestions below.

Thank you for a very positive experience, considering that bankruptcy can be a potentially stressful experience we feel much better about our

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 2-28-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

everyone is professional and respectful.

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

Yes

8. Is there anything which deserves special recognition? If so, why?

Any time I had a question someone would call me back in a timely manner.

9. Please enter any final comments/suggestions below.

I have one question: If any of my debts weren't discharged I would be told, right? I know my taxes weren't but the rest should of been??

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 120 West Second Street  
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 Dayton, Ohio 45042  
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 (937) 748-1749  
 (937) 748-9552 fax



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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: \_\_\_\_\_
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
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  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

You guys put us at ease during a very very stressful time. Thank you

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

Yes

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

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### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 3/9/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations  
 Slightly exceeded my expectations  
 Met my expectations  
 Fell slightly short of my expectations  
 Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

Very professional & helpful  
with information needed.

6. What would you recommend to improve our office and services?

Nothing - great job!

7. Would you recommend this office to other people? If not, why not?

Yes, you very helpful & work well

8. Is there anything which deserves special recognition? If so, why?  
I think that overall, you go above & beyond work well with clients. <sup>your office</sup> <sup>by a former</sup> <sup>client.</sup>

9. Please enter any final comments/suggestions below.

Thank you!

**Dayton**  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

**Springboro**  
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Springboro, Ohio 45066  
(937) 748-1749  
(937) 748-9552 fax

www.DebtFreeOhio.com



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Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: March 5, 2009
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not? *NA*
5. What do/did you like about your experience with our office? *Everything was great*
6. What would you recommend to improve our office and services? *Nothing*
7. Would you recommend this office to other people? If not, why not? *yes*
8. Is there anything which deserves special recognition? If so, why? *The ladies in the office were very helpful.*
9. Please enter any final comments/suggestions below.

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(937) 224-3648

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Consumer Bankruptcy Specialist

Stephen J. Malkiewicz  
Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 3/1/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                           |
|---|-----------------------|-----------------------|-----------------------|-----------------------|---------------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>      |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> "10" |

3. Our services have:

- Greatly exceeded my expectations  
 Slightly exceeded my expectations  
 Met my expectations  
 Fell slightly short of my expectations  
 Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

Friendly Outstanding Staff

6. What would you recommend to improve our office and services?

You CAN'T Improve on Perfection

7. Would you recommend this office to other people? If not, why not?

Yes!!

8. Is there anything which deserves special recognition? If so, why?

Girls @ the Counter - Window Cute, Friendly AND Always Had A Smile

9. Please enter any final comments/suggestions below.

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 2-27-09
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

**Dayton**  
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Dayton, Ohio 45042  
(937) 224-3648

**Springboro**  
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Practice Limited to Consumer Bankruptcy

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 1-12-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

Thx. ~~Not~~ ep ✓

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?  
the reassurance and help with question no matter how stupid it was
6. What would you recommend to improve our office and services?  
Can't think of anything
7. Would you recommend this office to other people? If not, why not?  
Yes definitely
8. Is there anything which deserves special recognition? If so, why?  
front desk people who answer phones and melody was so patient and polite. Hope you keep them as long as you can.
9. Please enter any final comments/suggestions below.

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Attorney and Counselor at Law  
Practice Limited to Consumer Bankruptcy

1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 2-18-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

Thx Sent ✓ EP

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

We felt the staff were very professional and helpful with questions and concerns we had.

6. What would you recommend to improve our office and services?

While we understand why the wait to see an attorney at times can be lengthy, the wait seemed longer with the short video being played back to back.

7. Would you recommend this office to other people? If not, why not?

We would absolutely recommend this office to others.

8. Is there anything which deserves special recognition? If so, why?

Yes, You guys were firm but understanding <sup>with</sup> our need for an extension of time for completing our workbook.

9. Please enter any final comments/suggestions below.

Thank you again for your help and expertise in helping us through our financial crisis.

V-TR. Sent

Dayton 120 West Second Street Suite 1212 Dayton, Ohio 45042 (937) 224-3648  
Springboro 195 East Central Avenue Springboro, Ohio 45066 (937) 748-1749 (937) 748-9552 fax  
www.DebtFreeOhio.com



Richard E. West Board Certified Consumer Bankruptcy Specialist  
Stephen J. Malkiewicz Attorney and Counselor at Law Practice Limited to Consumer Bankruptcy

1/7/2009

**CLIENT SATISFACTION SURVEY**

1. Please write the date you are completing this survey: 15 JAN 09

2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

Support From SUB!

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

Yes!

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

Thank you!

Dayton  
120 West Second Street  
Suite 1212  
Dayton, Ohio 45042  
(937) 224-3648

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: \_\_\_\_\_
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                        |
|---|-----------------------|-----------------------|-----------------------|-----------------------|------------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> + |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/>   |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

Thx. Sent ✓ Esp

4. If our services did not meet your expectations in any way, why not?

N/A

5. What do/did you like about your experience with our office?

The respect I received.

6. What would you recommend to improve our office and services?

much more help with rebuilding credit after completing a chapter 13

7. Would you recommend this office to other people? If not, why not?

YES

8. Is there anything which deserves special recognition? If so, why?

How fast Rick responded to my email questions. This was a real life saver.

9. Please enter any final comments/suggestions below.

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 2.15.09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent           |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

ALWAYS ABLE TO ANSWER OUR QUESTIONS

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

YES

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

THANK YOU! YOUR HELP WITH THIS  
PROCESS HAS MEANT A LOT TO US.

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 6-29-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations  
 Slightly exceeded my expectations  
 Met my expectations  
 Fell slightly short of my expectations  
 Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 7-7-09
  
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                                | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |

3. Our services have:
  - Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 5-7-2009
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

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  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

*Yes*

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

*Thanks 'to everyone for all  
the help.*

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

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1/7/2009

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2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                                | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |

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  - Met my expectations
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4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

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1/7/2009

### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4-30-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

The excellent way business was handled.  
The friendliness of your office staff.

6. What would you recommend to improve our office and services?

Nothing.

7. Would you recommend this office to other people? If not, why not?

Yes.

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

Mr. West thank-you for putting us at ease  
as we made a very important decision  
as to our future & getting out of debt.  
Thank for sharing your story with us of  
being in the same situation a few years ago.

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4/27/2009
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

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NAME(S) (OPTIONAL): \_\_\_\_\_

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 4/24/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

The staff made the process far more comfortable than I expected. I was treated with great respect.

6. What would you recommend to improve our office and services?

Wait time was long for appointments. Once I arrived I had to wait a long time <sup>in lobby</sup> for meeting w/ Richard.

7. Would you recommend this office to other people? If not, why not?

Absolutely!

in lobby for meeting w/ Richard.

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

Thank you!

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

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 Dayton, Ohio 45042  
 (937) 224-3648  
 www.DebtFreeOhio.com

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 (937) 748-1749  
 (937) 748-9552 fax



**Richard E. West**  
 Board Certified  
 Consumer Bankruptcy Specialist

**Stephen J. Malkiewicz**  
 Attorney and Counselor at Law  
 Practice Limited to Consumer Bankruptcy

1/7/2009

**CLIENT SATISFACTION SURVEY**

1. Please write the date you are completing this survey: 1/9/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:
- Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

N/A

5. What do/did you like about your experience with our office?

They make you feel very comfortable about a stressful situation. Everyone was pleasant & helpful

6. What would you recommend to improve our office and services?

Nothing... great work!

7. Would you recommend this office to other people? If not, why not?

I did! My boyfriend went through Mr West after hearing my pleasant experience

8. Is there anything which deserves special recognition? If so, why?

The young ladies that always greet you w/ a smile & can answer any questions I asked.

9. Please enter any final comments/suggestions below.

Thank you all so much for your hard work & help. You truly changed my life for the better

NAME(S) (OPTIONAL): A very happy client ☺

(a name gets a personal note from Rick in response - Oh Boy !!)

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I spent most of my time at the Springboro office but Mr Melkiewicz was very reassuring & friendly during my hearing. Thank you all again

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1/7/2009

## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 1/14/09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                                | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:
- Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

(a name gets a personal note from Rick in response - Oh Boy !!)

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 1-17-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                                | 4                                | 5=Excellent           |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|-----------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> |

3. Our services have:
- Greatly exceeded my expectations
  - Slightly exceeded my expectations
  - Met my expectations
  - Fell slightly short of my expectations
  - Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

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### CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey March 2-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

- Greatly exceeded my expectations
- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

5. What do/did you like about your experience with our office?

6. What would you recommend to improve our office and services?

7. Would you recommend this office to other people? If not, why not?

*yes I would recommend your office*

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

*I was very happy with the service  
I received.*

NAME(S) (OPTIONAL): \_\_\_\_\_

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: \_\_\_\_\_

2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                     | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. Our services have:

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- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?
5. What do/did you like about your experience with our office?
6. What would you recommend to improve our office and services?
7. Would you recommend this office to other people? If not, why not?
8. Is there anything which deserves special recognition? If so, why?
9. Please enter any final comments/suggestions below.

NAME(S) (OPTIONAL): \_\_\_\_\_

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## CLIENT SATISFACTION SURVEY

1. Please write the date you are completing this survey: 7-5-09
2. Please rate the following characteristics of our service on a scale from 1 to 5, where 1 = Poor Service and 5 = Excellent service.

| Service   | 1=Poor                | 2                     | 3                     | 4                                | 5=Excellent                      |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|----------------------------------|
| Initial consultation with Attorney              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Ease of scheduling appointment(s)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Answering your bankruptcy questions             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Courteous/Willingness to Help                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers first prepared             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Timeliness of papers being filed with the Court | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            |
| Conduct of your trustee meeting                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |
| Overall comfort with our services               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> |

3. Our services have:

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- Slightly exceeded my expectations
- Met my expectations
- Fell slightly short of my expectations
- Failed to meet my expectations

4. If our services did not meet your expectations in any way, why not?

I supplied what was needed & was asked to supply info for a 2nd time when they had it the first time.

5. What do/did you like about your experience with our office?

Everyone

6. What would you recommend to improve our office and services?

Double check to make sure they ~~know~~ had info before asking for it again.

7. Would you recommend this office to other people? If not, why not?

Yes - Already have.

8. Is there anything which deserves special recognition? If so, why?

9. Please enter any final comments/suggestions below.

I'm just happy this is over & appreciate everything this firm did.