

Why did you contact Pacific Reproductive Services?

- Purchase sperm
- Insemination services
- Infertility counseling
- Become a donor
- Store sperm
- Needed more information
- Other _____

How did you first contact us?

- Phone
- Website
- eMail
- Fax
- Mail
- In person
- Other _____

How long did you have to wait before a customer representative addressed your needs?

- Right away
- Later the same day
- Next day
- 2-4 days
- 5-7 days
- More than a week
- Other _____

How long have you been a Pacific Reproductive Services customer?

- Less than 6 months
- 6 months- 1 year
- 1-2 years
- 2-4 years
- More than 5 years
- Other _____

How often have you had contact with Pacific Reproductive Services in the past 3 months?

- Once
- 2-5 times
- 5-10 times
- 10-30 times
- Daily

Where did you look for information on sperm banks?

(check all that apply)

- Physician or other health professional
- Internet
- Yellow Pages
- Friend
- Book/ Resource
- Media Story
- Other _____

Which of the following most influenced your choice?

(check top 5)

- Company has a good reputation
- Physician or health professional reference
- Friend or family used the same company
- Magazine or publication article
- Customer Service
- Competitive Rates and Fees
- Good Donor Selection
- Availability of "Willing to Be Known" donors
- Many years in the business
- Accreditations
- Website
- Convenient location

Please rate the following statements according to your experience

	Agree	Neutral	Disagree	N/A
My request was processed promptly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My request was processed accurately.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My questions were answered fully.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Customer Service Representative was knowledgeable.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Customer Service Representative was courteous.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Customer Service Representative was professional.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Customer Service Representative showed initiative in helping me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to access information I needed from the website.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The website is easy to use and well organized.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The website contains clear and accurate information.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I received printed information, it was clear and understandable.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate our products and services

	Poor	Fair	Good	Very Good	Excellent	N/A
Selection of Donors.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registration.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initial Consultation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Website.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Medical Advice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Screening and/or Services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Based on your experience with Pacific Reproductive Services, would you recommend our services to others, and use our services again in the future?

- Yes
- No
- Not applicable

What can we do better?

What are we doing right?

How would you rate our service NOW, compared to previous experience?

- Significantly better
- A little better
- Same as before
- Worse
- A lot worse
- Not applicable, my first experience

Agree Neutral Disagree N/A

OPTIONAL information:

Name: _____

Phone: _____

E-Mail: _____

PRS Customer Service Representative: _____

May we print your comments? Yes Yes, anonymously No