

Dear Valued Client

Our mission at Nisivoccia LLP is to provide you with the highest quality services in a manner which meets or exceeds your expectations. To help us with this commitment, we invite you to evaluate our performance and services by completing this brief survey. We value our relationship with you and your comments are important to us.

Thank you in advance for sharing your valuable time with us.

Client Satisfaction and Loyalty Survey

Please answer only those questions that apply to your account.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
1. The overall quality of Nisivoccia LLP work consistently meets or exceeds expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. When I contact Nisivoccia LLP, I am treated in a prompt, professional and courteous manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. My tax return is regularly completed on or ahead of schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. My tax professional initiates and maintains an appropriate level of contact with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I am satisfied with the format of my financial statements, tax returns and other reports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I am satisfied with the advice, recommendations and suggestions I have received.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. My tax professional understands the key issues affecting my business and industry and has the specific expertise to serve effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I see my tax professional as partners in the overall success of my business.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I would recommend Nisivoccia LLP to friends, other professionals and acquaintances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I have used your secure portal to access my tax returns and find it very useful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I have found the financial services advisors to be very convenient and helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To continue to offer services to help you achieve your goals, please complete the following:

Do you currently use:	Nisivoccia LLP	Another Advisor	Please contact me
Estate/Gift Tax Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement and Financial Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Succession Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business Valuations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mergers & Acquisitions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal Control Review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outsourced CFO Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you would like us to contact you regarding these or other services, please provide your information. *Please note your name is optional to complete the survey.*

Name _____
 Business _____
 Phone _____
 E-mail _____

Please return with your e-filing permission form, fax to 973-328-0507, mail to 200 Valley Road, Suite 300, Mt. Arlington, NJ, 07856, Attention: Client Survey or E-mail to info@nisivoccia.com.