CUSTOMER SERVICE FORM
Saginaw County Clerk's Office

HOW'S OUR SERVICE?

Today's Date_____

I visited the Clerk's Office on: _____

My business included (please be specific) _____

_____

_____

The customer service I received was (circle one):

Excellent Good Fair Poor

I have the following comments or suggestions:

_____

_____

_____

_____

Name_____

Phone No. _____

Address _____

_____

Thank you for your time.

Print this form, fill it out and mail to:

Saginaw County Clerk's Office
111 S. Michigan Avenue
Saginaw MI 48602