

254 Bellevue Avenue, Hammonton, NJ 08037 (609) 561-0825

Satisfaction Questionnaire

Bellevue Drug is committed to providing the highest quality customer service and products to our community. Please take a moment to answer the questions in our survey below.

Your comments and opinions are important to us and will be kept confidential. Please complete and return in the self-addressed envelope attached, so that we can continue to improve upon the quality of our service to you. Thank you.

Please circle the number that corresponds to your opinion: 1 = not sure 2 = strongly disagree 3 = disagree 4 = agree 5 = strongly agree

1	You received prompt service.	1	2	3	4
2	Our staff asked if you had any questions regarding your order when you picked up your	1	2	3	4
	prescription.				
3	Your privacy is respected at Bellevue Drug Company.	1	2	3	4
4		1	2	3	4
5	If applicable, our staff tried to assist you in resolving any insurance issue that you may have had.	1	2	3	4
6	If applicable, our staff notified you if your insurance company required a prior authorization for your medication.	1	2	3	4
7		1	2	3	4
8	Based on your knowledge of Bellevue Drug Co. you are aware of all the products and services we offer.	1	2	3	4
9	Based on your experience, you will recommend Bellevue Drug to family & friends.	1	2	3	4
Please describe: May we contact you regarding this item? Yes No Is there anything else we can help you with?		_			
Did you know that by calling our pharmacy after regular busines hours, you are given information on how to contact us for a prescription emergency?				}.	
May we share your comments on our website? Yes No					

Print, complete and mail to us at: 254 Bellevue Avenue, Hammonton, NJ 08037 or drop it off on your next visit to Bellevue Drug.

Thank you.

Name & Phone # (optional): Today's Date: