## Accessibility for Ontarians with Disabilities Act (AODA) Customer Service Feedback Form



Thank you for visiting JBM Office Systems Ltd. We value our customers and strive to meet everyone's needs.

Please tell us the date of you	our visit:		
Did we respond to your cu	stomer service needs	during your visit?	
Yes	Somewhat (please ex	plain below)	No (please explain below)
Was our customer service	provided to you in an	accessible manner?	
Yes	Somewhat (please explain below)		No (please explain below)
Did you have any problems	s accessing our goods	and services?	
No	Somewhat (please explain below)		Yes (please explain below)
Additional Comments:			
Contact information (optio	onal)*:		
Name:		Phone:	
Address:		Email:	
Preferred Method of Conta	act: Phone	Email	
Thank you,			

JBM Office Systems Ltd.

<sup>\*</sup>Protecting your personal information: At JBM Office Systems Ltd., we recognize and respect every individual's right to privacy. When personal information is provided to us, we establish a confidential file that is kept in the offices of JBM Office Systems Ltd. We limit access to information in your file to JBM staff or persons authorized by JBM who require it to perform their duties, to persons to whom you have granted access, and to persons authorized by law.