OFFICE OF THE STAFF JUDGE ADVOCATE
CLAIMS DIVISION

CLAIMS QUESTIONNAIRE

Please answer the questions below and provide comments to assist us in providing the best service possible. If the space provided for your comments is insufficient, please continue your comments on the reverse side of this sheet.

1. The service provided by Claims personnel concerning my claim was:
____Excellent _____Good _____Satisfactory ____Unsatisfactory

2. If you awarded a satisfactory or unsatisfactory, list the areas needing improvement? _____

_____

3. Was the instruction packet satisfactory or unsatisfactory (circle one)? What portion did you find unclear? _____

_____

4. Did Claims personnel ensure that your claim was complete and provide you with assistance in completing it? ____ yes ____ no

5. Were all your questions answered? ____yes ____no

6. Were you waited on within 5 minutes of your arrival in the office? ____ yes ____ no

If not, why:_____

_____

7. Further comments:_____

_____

_____

DATE: _____ Name:_____
(optional)