



Thank you for participating in our client survey. We take great pride in our relationships with each of our group members. The feedback we receive from this piece will help us better understand and appreciate the needs of our clients.

Client Name: _____

Interviewee: _____ Title: _____

Date: _____ Coverage with Integratis: _____

1. How does Integratis Benefit Solutions add value to your organization?

2. What is your opinion of the staff of Integratis?

3. What is your opinion of the level of service provided by Integratis Benefit Solutions?

4. In your opinion, what are Integratis' strengths and or weaknesses?

5. What other type of product(s) or services(s) would you like to see us offer?

6. Are you happy with your current carrier and funding arrangement? Please elaborate.

7. What is your opinion of our implementation process?

8. What is your opinion of our client reports? (I.E.) Renewals, Quarterlies.

9. How do you feel about the frequency of meetings with a representative of Integratis Benefit Solutions (i.e.) just right, too often, not enough.

10. What is your opinion of our client newsletter and company website?

11. Do you have a group pension plan, GRSP or I.P.P.? If yes, please elaborate, (i.e.) when was the plan implemented, why, who is the current carrier, like and dislikes of the current plan.

12. Would your organization be interested in learning about any of the above-mentioned products?

13. Would you recommend Integratis Benefit Solutions to others? Please elaborate.
