

**Name** - Joseph

**Company Name** -

**Email** – intentionally left blank per customer request

**Phone** – intentionally left blank per customer request

**Address** – Ellicott City, MD

**Please select the products that you purchased? Please check all that apply**

Kitchen Cabinets

**What was the deciding factor to order your products from our company? Please check all that apply**

Price

Quality

Staff friendliness

Product knowledge & expertise of staff

**Did you receive other quotes? If so how did we compare**

31-55% less

**How likely will you refer our company to a friend or family member**

Very likely

**Value of products purchased:**

Better than expected

**How would you rate your overall company experience?** Excellent

**Feel free to provide additional information that will be helpful to our team and our customers in the future.**

Great company to do business with. They lived up to their word.

We appreciate you sharing your feedback. For your privacy we will redact your last name, street address, phone and email. If you check the box no redaction necessary we will ONLY provide your information to potential clients who may ask for reference contact.

**Please do not display my name, address, email and phone private**