

Thank you for taking the time to provide ARDL, Inc. with feedback about your recent experience with our firm. Please indicate the response that best describes your assessment and perception of ARDL's performance and service. It will help us in evaluating and further improving the quality of our services to you.

The work ARDL performed for you for which you are commenting on was:

Proj	ect Name / Report #:			Analytical or		_ Field Services	
	Performance Parameters	Excellent	Very Good	Good	Fair	Poor	N/A
1	Responsiveness of ARDL staff to your inquires and correspondence:						
2	Explanation of costs or special requirements necessary to perform your work:						
3	Attentiveness of ARDL staff to your needs:						
4	Timeliness of work completion compared to estimate given at onset:						
5	Data presentation and interpretation:						
6	Completeness of final report:						
7	Access to and responsiveness of senior management to address your issues, concerns and technical questions:						
8	Overall satisfaction with the quality of service at ARDL, Inc.:						
	se provide any additional commente concerning our services:	s, comme			ggestion	s that y	ou may
Nam	ne: Com (Optional)	npany:					

Please print, complete and fax to (618) 244-1149 or email to techserv@ardlinc.com Client Feedback Form, Rev CFF-2011-1.0