

# International Society of Primerus Law Firms

**1. Please provide the following information regarding the law firm which performed legal services for you:**

Firm Name: \_\_\_\_\_

Firm Location: \_\_\_\_\_

Attorney Name: \_\_\_\_\_

**2. On a scale of 1 to 10, how likely are you to refer this firm to a friend or colleague?**

1      2      3      4      5      6      7      8      9      10

**3. Why or why not?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. If you wish, please provide your name:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Thank you for participating in our survey.

PLEASE RETURN COMPLETED SURVEY TO:  
Primerus Quality Assurance Board  
171 Monroe NW, Suite 750  
Grand Rapids, MI 49503