

**TV Converter Box Coupon Program**  
**Pilot Program Retailer Pilot Test Survey**

**Retailer Name** \_\_\_\_\_  
**Person completing survey** \_\_\_\_\_  
**E-mail address** \_\_\_\_\_  
**Phone** \_\_\_\_\_

Thank you for your participation in the TV Converter Box Coupon Program Pilot Test. Your participation and the feedback on this form are valuable and help the NTIA, IBM and CLC Services improve the Coupon Program for all retailers. - We appreciate your honest and detailed feedback.

**1. Did your store have adequate inventory in the store when the Pilot began?    \_\_\_ Yes    \_\_\_ No**

**If No, please explain. We did not have adequate inventory because:**  
1. \_\_\_\_\_; 2. \_\_\_\_\_

**2. Were you able to maintain adequate inventory throughout the Pilot period?    \_\_\_ Yes    \_\_\_ No**

**If No, please explain. We could not maintain an adequate inventory because: 1. \_\_\_\_\_: 2. \_\_\_\_\_**

**Please fax this completed form to (316) 771-7882 by 2/15/08.**

**3. Did your store have the technical ability to redeem coupons when the Pilot began?  Yes  No.** If No, please explain. We did not have the technical ability to redeem coupons because: -1. \_\_\_\_\_ ;  
2. \_\_\_\_\_

—

**4. If No, please comment on the ease or difficulty of preparing and maintaining your systems for the Pilot.**

**5. Did your site receive training materials before the Pilot began? -  Yes  No.**

**6. Were employees at your site trained before the Pilot began? -  Yes  No.**

**7. Please rate the quality of the employee training materials. Use the "Poor- to Excellent" Scale of 1-9. \_\_\_\_\_**

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**8.** Please rate the usefulness of the employee training materials. Use the “Poor- to-Excellent” Scale of 1-9. \_\_\_\_

**9.** Please comment on the quality and usability of the employee training materials.

**10.** Did you contact the Retailer Support Center during the Pilot? -  
\_\_\_ Yes \_\_\_ No

**11.** How would you rate the quality of the support you received? \_\_\_\_  
Use the “Poor- to Excellent” Scale of 1-9. \_\_\_\_

**12.** Have you been paid from the US Treasury for all authorized coupon redemptions? \_\_\_ Yes \_\_\_ No. How soon did you receive payment?

**13.** Please rate the payment process. Use the “Poor- to Excellent” Scale of 1-9. \_

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**14. Please provide comments on the payment process.**

**15. Have you used your web account at [www.ntiadtv.gov](http://www.ntiadtv.gov) to monitor payments?  Yes  No.**

**16. —Please rate the usefulness of the retailer Web site. Use the “Poor- to Excellent” Scale of 1-9.**

**17. —Please comment on the usefulness and functionality of the website.**

**18. To your knowledge, did any consumers participating in the Pilot **Test** purchase a product or service (TV with a digital tuner, Cable, satellite or other pay service) rather than a Coupon Eligible Converter Box?  Yes  No.**

**19. Please comment on the consumer’s purchases.**

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**20.**—Were any coupon eligible converter boxes exchanged or returned during the Pilot? \_\_\_ Yes \_\_\_ No. —

**21.**—Please comment on the exchange or return process.

<b>Quick Rating:</b>	<b>Poor</b>			<b>Acceptable</b>			<b>Excellent</b>		
Inventory Availability	1	2	3	4	5	6	7	8	9
Systems Ease of Use	1	2	3	4	5	6	7	8	9
Training Materials	1	2	3	4	5	6	7	8	9
Retailer Support Center	1	2	3	4	5	6	7	8	9
Payment Process	1	2	3	4	5	6	7	8	9
Website	1	2	3	4	5	6	7	8	9
Refund Process	1	2	3	4	5	6	7	8	9
Consumer Experience	1	2	3	4	5	6	7	8	9

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