

**Government Agency Investment Services (GAIS)
2010 Customer Satisfaction Survey
State and Local Government Series (SLGS) Program**
OMB No. 1535-0122

You have been selected to take part in a survey conducted by the Bureau of the Public Debt (BPD), Office of Public Debt Accounting. Please take some time and provide us with your opinions for the following statements. Your responses will help us enhance our customer service along with our system environment. **Please note that an agency may not conduct or sponsor, and the public is not required to respond to, a collection that does not display a currently approved OMB control number.**

If you have any questions, please email them to ExternalSpecialPurposeSecuritiesUserSurvey@bpd.treas.gov.

1. How frequently do you process SLGS transactions?					
Daily <input type="checkbox"/>	Weekly <input type="checkbox"/>	Monthly <input type="checkbox"/>	Quarterly <input type="checkbox"/>	Yearly <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
If you have selected not applicable, you are done with this survey.					

Satisfaction with the SLGS Customer Service Representative

2. Rate the courteousness.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
3. Rate the helpfulness.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
4. Rate the knowledge.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Rate the availability.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
6. Rate the resolution time for issues addressed.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
7. Rate your overall satisfaction.					
Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
8. What customer satisfaction aspect do you like most?					
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9. What customer satisfaction aspect do you like least?					
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Satisfaction with the SLGSafe System

10. Rate the ease of performing transactions.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
11. Rate the usefulness of inquiry processing.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
12. Rate the reliability.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
13. Rate the availability.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
14. Rate the response time.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
15. Rate your overall satisfaction with SLGSafe.	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	Very Poor <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
16. What SLGSafe features do you like most?	<hr/> <hr/>					
17. What system features do you like least?	<hr/> <hr/>					
18. If offered, would you be interested in learning more about SLGS?	Yes <input type="checkbox"/>	No <input type="checkbox"/>				
19. If offered, would you be interested in additional SLGSafe system training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>				
20. Additional Comments:	<hr/> <hr/> <hr/>					