



## EXCHANGE

*Serving the best customers in the world.*

Our philosophy at the Exchange is simple – We want to be your first choice for shopping! The results of this survey will let us know how we are doing and what we need to improve.

Please read the Agency Disclosure Notice and Instructions that follow before completing this survey. While completing, please do not include any Personally Identifiable Information (PII) within your responses.

DRAFT

Army & Air Force Exchange Service  
**Exchange Retail Sales Transaction Data  
Customer Satisfactory Survey**  
*(Please read before completing survey.)*

OMB NO. 0702-0130  
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**AGENCY DISCLOSURE NOTICE**

The public reporting burden for this collection of information, **0702-0130**, is estimated to average **15 minutes** per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

**INSTRUCTIONS**

1. Think about your last shopping experience at an Exchange facility when answering the questions on the survey.
2. Questions are optional.
3. To complete the survey, press the done button.



### Exchange Customer Satisfaction Survey



**Think about your most recent visit to the Exchange and rate your shopping experience.**

**\* 1. Did we greet you?**

- Yes
- No
- NA

Please share with us any additional comments or suggestions.  
Please do not include any Personally Identifiable Information (PII).

**\* 2. How friendly were our associates?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Not friendly          |                       |                       |                       | Somewhat friendly     |                       |                       |                       |                       | Extremely friendly    |                       |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please share with us any additional comments or suggestions.  
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**\* 3. How clean was the store?**

|                               |                       |                       |                       |                       |                       |                       |                       |                       |                            |                       |
|-------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------|-----------------------|
| Not at<br>all<br>clean<br>(1) | 2                     | 3                     | 4                     | Somewhat<br>clean (5) | 6                     | 7                     | 8                     | 9                     | Extremely<br>clean<br>(10) | N/A                   |
| <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> |

Please share with us any additional comments or suggestions.  
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**\* 4. How well organized was the store?**

|                                |                       |                       |                       |                              |                       |                       |                       |                       |                           |                       |
|--------------------------------|-----------------------|-----------------------|-----------------------|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|---------------------------|-----------------------|
| Not<br>organized<br>at all (1) | 2                     | 3                     | 4                     | Somewhat<br>organized<br>(5) | 6                     | 7                     | 8                     | 9                     | Very<br>organized<br>(10) | N/A                   |
| <input type="radio"/>          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/> |

Please share with us any additional comments or suggestions.  
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**\* 5. How clean were our restrooms?**

|                               |                       |                       |                       |                         |                       |                       |                       |                       |                       |                       |
|-------------------------------|-----------------------|-----------------------|-----------------------|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Not at<br>all<br>clean<br>(1) | 2                     | 3                     | 4                     | Moderately<br>clean (5) | 6                     | 7                     | 8                     | 9                     | Very<br>clean<br>(10) | N/A                   |
| <input type="radio"/>         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please share with us any additional comments or suggestions.  
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**\* 6. How well stocked was our restroom (toilet paper, soap, paper towels)?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |              |  |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--------------|--|
| Not stocked           |                       |                       |                       |                       |                       |                       |                       |                       | Somewhat stocked      |                       |  | Well stocked |  |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |  |              |  |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |  |              |  |

Please share with us any additional comments or suggestions.  
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**\* 7. How knowledgeable were our associates in helping you with your purchase?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                        |                       |  |                         |  |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|-----------------------|--|-------------------------|--|
| Not knowledgeable     |                       |                       |                       |                       |                       |                       |                       |                       | Somewhat knowledgeable |                       |  | Extremely knowledgeable |  |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                   | N/A                   |  |                         |  |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> |  |                         |  |

Please share with us any additional comments or suggestions.  
Please do not include any Personally Identifiable Information (PII).

**\* 8. How well did the quality of our merchandise meet your expectations for the price?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |             |  |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|-------------|--|
| Did not meet quality  |                       |                       |                       |                       |                       |                       |                       |                       | Somewhat met quality  |                       |  | Met quality |  |
| (1)                   | 2                     | 3                     | 4                     | quality (5)           | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |  |             |  |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |  |             |  |

Please share with us any additional comments or suggestions.  
Please do not include any Personally Identifiable Information (PII).

\* **9. How often does your Exchange have what you need?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Never                 |                       |                       |                       | Sometimes             |                       |                       |                       |                       | Always                |                       |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

\* **10. If you were not able to find what you needed/wanted at your Exchange, were you able to find it on shopmyexchange.com?**

Yes
  No
  Did not go to shopmyexchange.com
  NA

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

\* **11. Your wait time during check-out**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Poor                  |                       |                       |                       | Average               |                       |                       |                       |                       | Excellent             |                       |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

\* **12. Did our cashier thank you for shopping?**

- Yes
- No
- NA

Please share with us any additional comments or suggestions.  
Please do not include any Personally Identifiable Information (PII).

\* **13. How often do you shop your Exchange?**

- Daily
- Weekly
- Monthly
- Other (please specify)

\* **14. How likely are you to visit your Exchange again?**

| Not likely            |                       |                       |                       | Somewhat likely       |                       |                       |                       |                       |                       | Very likely           | N/A                   |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  |                       |                       |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please share with us any additional comments or suggestions.  
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\* **15. How satisfied were you with your overall shopping experience?**

|                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
| Very<br>dissatisfied  |                       |                       |                       |                       | Somewhat<br>satisfied |                       |                       |                       |                       | Very<br>Satisfied     |  |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                     | 7                     | 8                     | 9                     | (10)                  | N/A                   |  |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |  |

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

\* **16. How responsive have we been to answering your questions, concerns or issues?**

|                       |                       |                       |                       |                       |                        |                       |                       |                       |                       |                       |  |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
| Non<br>responsive     |                       |                       |                       |                       | Somewhat<br>responsive |                       |                       |                       |                       | Very<br>responsive    |  |
| (1)                   | 2                     | 3                     | 4                     | (5)                   | 6                      | 7                     | 8                     | 9                     | (10)                  | N/A                   |  |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |  |

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

\* **17. Did our cashier ask if you wanted to use your Military Star card?**

- Yes
- No
- N/A

Please share with us any additional comments or suggestions.

Please do not include any Personally Identifiable Information (PII).

**18. We welcome any other comments and suggestions. Please give us your thoughts on possible service improvements, merchandise selection, or simply tell**



**us about a great recent experience you have had at this Exchange. Please do not include any Personal Identifiable Information (PII).**

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## Exchange Customer Satisfaction Survey

100%

*The next questions are optional. Your answers will help us help you.*

**19. Please enter your 5 or 9 digit zip code**

**20. Please select gender:**

- Female  
 Male

**21. Your age range:**

- 18 - 24  
 25 - 34  
 35 - 44  
 45 - 64  
 65+

**22. Household size including yourself:**

- 1

- 2
- 3
- 4+

**23. Your branch of service**

- Army
- Air Force
- Navy
- Marine
- Other (please specify)

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Your receipt may look like one of the following:



24. Please enter the date from your receipt.

Date

|            |  |
|------------|--|
| MM/DD/YYYY |  |
|------------|--|

**25. THIS QUESTION IS NO LONGER USED**

**26. Please enter the 7 digit store number from your receipt as shown above in the receipt example.**

**27. Select the Exchange you recently visited from the drop down list**

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Done

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