

# Internal Revenue Service

Small Business/Self-Employed

## Chief Counsel Pro Bono Day Event OMB #XXXX-XXX

**Thank you for participating in today's Pro Bono Day! Your feedback will help us evaluate and continue to improve our work. This form should take less than 10 minutes to complete. Thank you!**

Please rate your experience of the service provided on a scale of 1 to 5 (1 being "Totally Disagree" and 5 being "Totally Agree"). Answer N/A if not applicable.

	Totally Disagree	Somewhat Disagree	Neither Disagree or Agree	Somewhat Agree	Totally Agree	N/A
Invitation letter to Pro Bono Day was easy to understand.	①	②	③	④	⑤	⑥
Invitation letter provided all the information needed.	①	②	③	④	⑤	⑥
Making the appointment for Pro Bono Day was easy.	①	②	③	④	⑤	⑥
The date was convenient.	①	②	③	④	⑤	⑥
The time was convenient.	①	②	③	④	⑤	⑥
Finding the location of the Pro Bono Day was easy.	①	②	③	④	⑤	⑥
Getting to the location of the Pro Bono Day was easy (public transport and/or parking).	①	②	③	④	⑤	⑥
The sign-in process was smooth.	①	②	③	④	⑤	⑥
The wait time was acceptable.	①	②	③	④	⑤	⑥
Meeting with the pro bono attorney was helpful.	①	②	③	④	⑤	⑥
Meeting with the IRS Chief Counsel attorney was helpful.	①	②	③	④	⑤	⑥
I was able to settle my case or make significant progress toward settlement.	①	②	③	④	⑤	⑥

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Questions about paying my taxes were answered.	①	②	③	④	⑤	⑥
I better understand the tax rules after this event.	①	②	③	④	⑤	⑥
The staff I met with was knowledgeable.	①	②	③	④	⑤	⑥
Information was presented in a way that was easy to understand.	①	②	③	④	⑤	⑥
After this event my impression of IRS is has improved.	①	②	③	④	⑤	⑥
After this event I better understand my taxes.	①	②	③	④	⑤	⑥
After this event I'm able to know what to do for next tax year.	①	②	③	④	⑤	⑥
	Very Dissatisfie d	Dissatisfie d	Neutral	Satisfied	Very Satisfied	N/A
Rate your overall satisfaction with the Pro Bono Day.	①	②	③	④	⑤	⑥

Please provide any additional comments below:

**Paperwork Reduction Act Notice:**

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this survey is 1545-1432. We estimate the time required to fill out this questionnaire will average 5 minutes. Also, if you have any comments regarding the time estimates associated with this study or suggestions on making this process simpler, please write to: Internal Revenue Service, Special Services Section, SE:W:CAR:MP:T:M:S, Room 6129 1111 Constitution Ave. NW Washington, DC 20224