OMB: 0704-0553

Expiration: XX/XX/XXXX

## **2020 DFAS Transportation Pay Customer Satisfaction Survey**

*Note i	tems highlighted:
<b>Yellow</b>	-indicates a standard question

## **Background Information**

This information is needed to help us with the statistical analysis for this survey. All of your responses are strictly confidential.

- 1. With what Services/Agencies has your organization contracted during the past 12 months? (Mark all that apply)
  - O Army
  - O Navy
  - O Air Force
  - O Marine Corps
  - O Defense Logistics Agency
  - O Other DoD Component
  - O Not Applicable
- 2. Do you have any contracts designated as Small Business?
  - O Yes
  - O No

OMB: 0704-0553

Expiration: XX/XX/XXXX

## **Customer Experiences**

	Strongly Disagree	Disagree	Neither	Agree	Strongly Agree	No Basis to Judge
3. I have adequate access to the DFAS staff for advice and assistance. [Access]	О	О	О	O	0	О
4. The DFAS staff keeps me informed about conditions and changes that affect me.	0	О	O	O	0	О
5. The DFAS staff is courteous. [Courtesy]	О	О	О	О	О	О
6. The DFAS staff is knowledgeable. [Knowledge]	О	О	О	О	О	О
7. Transportation Pay delivers customer service in a timely manner. [Timeliness]	О	0	0	О	0	О
8. The DFAS staff provides reliable and consistent service. [Reliability]	0	0	0	O	0	О
9. Transportation Pay products and services meet my needs. [Choice]	0	О	О	О	О	О
10. I am satisfied with the content of dfas.mil, manuals, reports and other materials containing Transportation Pay information.  [Tangibles]	0	0	0	0	О	О
11. I am satisfied with the availability of dfas.mil, manuals, reports and other materials containing Transportation Pay information.  [Tangibles]	0	0	0	O	O	О
12. I am satisfied with the way the DFAS staff handles problems or errors. [Recovery]	0	О	О	O	О	О
13. DFAS pays my invoices in accordance with the terms of my contract.		О	О	О	О	О

	Very Poor	Poor	Fair	Good	Very Good	No Basis to Judge
14. Overall, how would you rate the quality of services, products, and/or information you have received from the DFAS staff? [Quality]	0	О	О	О	О	О

## **Customer Care Center**

OMB: 0704-0553

Expiration: XX/XX/XXXX

O Do not know  If yes			I			ı	
	Very Dissatisfied	Dissatisfied	Neither	Satisfied	Very Satisfied	No Basis to Judge	
How satisfied are you with each of the following aspects:							
16. Ability of the Representative to answer your questions		О	О	0	О	О	
17. Courtesy of the Representative	О	О	О	0	О	О	
18. Hours of operation	О	O	О	0	О	О	
19. Length of time on hold until a Representative assists you	О	О	О	О	О	О	
Overall Satisfaction  20. Overall, how satisfied are you with DFAS produced by the satisfied by the satisfied are you with DFAS produced by the satisfied by the satisfied are you with DFAS produced by the satisfied by	ucts and	service:	s <mark>?</mark> [Ove	rall Sa	tisfacti	on]	
<ul> <li>O Very Dissatisfied</li> <li>O Dissatisfied</li> <li>O Neither Satisfied Nor Dissatisfied</li> <li>O Satisfied</li> <li>O Very Satisfied</li> </ul>							
Please provide your feedback to the following qu or issue that requires DFAS response, please sub that is provided on the Thank You page after sul	mit it se omitting	curely this su	using t irvey.				
21. Use the following space to describe what the DI	AS staff	is doir	ıg well.				

22. Use the following space to describe what you would like to see the DFAS staff change.

15. Have you called the 1-888-GBLS-PAY (425-77729), option 1, for assistance this past year?