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## ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT (“AODA”)

**Customer (Client) Service Feedback** – Please take the opportunity to share feedback on our service provided to clients with disabilities.

Please tell us the date and location of you visit:

Date:

Location:

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1. Were you satisfied with the client service we provided you?

Yes

No

Somewhat

Comments

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2. Was our client service provided to you in an accessible manner?

Yes

No

Somewhat

Comments

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3. Did you experience any problems accessing our services?

Yes

No

Somewhat

Comments

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Your Contact Information (optional)

Name:

Phone Number:

Email:

**Thank you,  
Rowan Williams Davies & Irwin Inc.(“RWDI”)**