# aNNEXURE B: Testimonial TempLate

 **This document serves as reference referral and a service satisfaction survey for marketing and advertising services rendered by:……………………………………………………….………………………………...**

**Section A:**

**REFERENCE COMPANY WHO RECEIVED THE SERVICE:**

Company Name: ………………………………………………………………………………………………………………….………...

Company Address: …………………………………………………………………………………………………………………….…...

Service/Contract Period: …Start date: ………………………………………………End Date…………………………………..…….

Company Representative Name: ……………………………………………………………………………………………………..…..

Representative Designation: ………………………………………………………………………………………………………...…….

Representative Contact Number: ……………………………………………………………………………………………………...….

Representative Email Address: ……………………………………………………………………………………………………………

Brief description of the service rendered: ………………………………………………………………………………………………..

…………………………………………………………………………………………………………………….......................................

…………………………………………………………………………………………………………………….......................................

**Section B:**

**Please tick only ONE option.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No:** | **Criteria** | **Good** | **Average** | **Poor** | **Comments** |
| 1. | Value of the project |  >R 1 000 000.00 | R1 000 000.00 – R500 000.00 | <R500 000.00 |  |
| 2. | Quality of service | Good | Average | Poor |  |
| 3. | Quality of reports provided | Good | Average | Poor |  |
| 4. | Whether work was completed within budget  | Yes | No |  |

**Comments:**

…………………………………………………………………………………………………………………….......................................

…………………………………………………………………………………………………………………….......................................

**Signature** :…………………………………………………. **Date:** …………………………………………………………

**Note:** This document **must** be copied to the client’s company letterhead or authenticated with a company stamp.