

Agency Evaluation Form

Your opinion matters to us!

Our Goal at Rice Insurance Benefits, Inc. is for every client to be completely satisfied with the service they receive.

Our agency is truly committed to a "Higher Standard" and would like your feedback.

Please take a few minutes to give your feedback on how Rice Insurance Benefits, Inc. has helped you. If we were able to save you money, provide a better benefits package, or in any other way, please let us know.

We value your opinions on how we can do a better job taking care of your company, now and in the future.

If we are a value added asset too your company, please tell others how we helped you. All referrals are valued, and greatly appreciated.

Please complete the information below, and return it to our office, by fax, email, or regular mail.

Name _____ Date _____

Company _____ City _____

Signature _____

Thank you for your comments

Rice Insurance Benefits, Inc.

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