

**FEDERATED FUNERAL DIRECTORS OF AMERICA, INC.**

**P.O. Box 19244 Springfield, Illinois 62794-9244**

(217) 525-1712

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Dan R Maxey  
212 Davis Dr  
Ringgold VA 24586-0000



4835 C M53181-WE1746 20 B  
Norris Funeral Services, Inc.

Services for: Eugene Eldridge Maxey

09/21/17

Federated provides accounting and business consulting services to independent funeral homes throughout the country. We thank you for selecting our member to serve your family and hope everything exceeded your expectations.

Please take a few minutes to complete this important survey on the reverse side. Your responses and comments will enable our member to better serve the community.

*Thank you for your assistance.*

Please feel free to use this space for further comments.

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1. Please Rate

A. Our Staff and Services regarding:

- 1. First contact - courteous and helpful
- 2. Appearance of deceased
- 3. Visitation/Viewing
- 4. Funeral Ceremony
- 5. Appearance of our staff

	Excellent	-----	Poor		
	4	3	2	1	N/A
1. First contact - courteous and helpful	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Appearance of deceased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Visitation/Viewing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Funeral Ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Appearance of our staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Your Arranging Funeral Director:

- 1. Was understanding and attentive
- 2. Listened and answered your questions
- 3. Presented a variety of services and merchandise
- 4. Provided enough time to make choices
- 5. Explained payment policies clearly and professionally

1. Was understanding and attentive	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Listened and answered your questions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Presented a variety of services and merchandise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Provided enough time to make choices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Explained payment policies clearly and professionally	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. Our Facilities and Automobiles:

- 1. Facilities - elderly and handicapped accessible
- 2. Facilities - updated and comfortable
- 3. Parking - ample and convenient
- 4. Automobiles - clean and in good condition

1. Facilities - elderly and handicapped accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Facilities - updated and comfortable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Parking - ample and convenient	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Automobiles - clean and in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

D. Value of the Services and Merchandise:

D. Value of the Services and Merchandise:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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E. Your Overall Satisfaction:

E. Your Overall Satisfaction:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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2. Why did you select this funeral home? (Check all that apply.)

- Previous Experience
- Location
- Reputation
- Other \_\_\_\_\_
- Recommended by: \_\_\_\_\_
- Deceased's Request
- Personally Knows Staff (name) \_\_\_\_\_
- Prearranged - Was it helpful?  Yes  No

3. Why was cremation selected? (Check all that apply.)

- Deceased's Request
- Personal Preference
- Time/Travel Factor
- Cost
- Other \_\_\_\_\_

4. Was this the first cremation in your family?  Yes  No

5. Is there anything you would have changed about the service?  Yes  No N/A

If yes, what: *My husband made it very clear to me. He wanted to be cremated, no obituary, no service. Mr. Mark Ralston was exceptional in discussing and following the wishes with no pressure.*

6. Would you choose this funeral home again?  Yes  No

Why: (Check all that apply.)

- Staff
- Services
- Facilities
- Price

Other: \_\_\_\_\_

7. What was the most memorable thing about your experience? *The professionalism, demeanor, integrity and concern with all details.*

8. Would you like information about prearranging?  Yes  No

Please mail to: Name \_\_\_\_\_

(if different from other side) Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Other contact info: Daytime # \_\_\_\_\_ Evening # \_\_\_\_\_

(if preferred) E-mail: \_\_\_\_\_

(please use other side for additional comments)