

Constituent Casework Survey

The Office of U.S. Representative Deborah K. Ross
NC District 02
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Please take a moment to provide feedback about your experience with my U.S. Congressional Office. While my staff and I do our best to ensure that all constituent cases receive favorable outcomes, unfortunately, some do not. In any event, it is important to me to know whether you are satisfied with the level of service that was provided by my staff, regardless of the outcome of your particular case. When you are done, please return the questionnaire to: deborah.ross@mail.house.gov

Staff Member Who Assisted You:

1. Issue for which you contacted my office:

- Education Grants Immigration/Visas/Passports IRS
 Medicare Military Mortgage/Housing Social Security
 Veterans Other: _____

2. How would you rate the service provided by my staff member?

- Excellent Good Average Poor

3. How would you rate the information you received from the agency?

- Excellent Good Average Poor

4. How would you rate the attitude of my staff member assisting you?

- Excellent Good Average Poor

5. How would you rate the overall experience with my office?

- Excellent Good Average Poor

6. Additional comments/details about how U.S. Representative Deborah K. Ross helped me:

Permission for U.S. Representative Deborah K. Ross to use my story:

I grant U.S. Representative Deborah K. Ross permission to publicize my name and my story of how her office assisted. In addition, I am aware that the Privacy Act of 1974 prohibits the release of my personal information without my expressed, written consent. If Congresswoman Ross uses information about your case it will only be general information. I hereby authorize U.S. Representative Deborah K. Ross to print my name and the story of the problem she helped me with on her website, social media accounts, and/or on other printed materials.

Name (Printed): _____

Signature: _____ Date: _____

Thank you very much for taking the time to complete this survey; your feedback is valued and appreciated!