SANDRA KURT
SUMMIT COUNTY CLERK OF COURTS

CUSTOMER RECOMMENDATIONS

How Can We Better Serve You?

Location: ___ Legal ___ Title – Tallmadge Ave ___ Title – Green
___ Title – Northfield ___ Title – Fairlawn

Name: _____ Telephone: _____
Last First

Address: _____
City State & Zip

phone ____

Email: _____ How may we contact you: email ____

mail ____

Please describe your experience in detail, including the name(s) of any employee(s) involved:

Attach additional paper if needed. Please remember to indicate the office you visited.

Did you contact or ask for a supervisor or manager? Yes _____ No _____

If yes, whom? _____ Date _____

_____ Date _____
Signature of person completing this form

Please send your remarks to:
Ashanti Parker. PIO. 1030 E. Tallmadge Ave., Akron, OH 44310 or aparker@summitoh.net (330) 643-2207