

2018 Municipal Election Customer Service Feedback Form

Thank you for voting in the City of Kawartha Lakes. As we strive to meet the needs of all electors in our community, we both welcome and value the input of all those who visited our voting location.

Please complete the questions below. You can submit it at the voting location, e-mail it to election@kawarthalakes.ca or mail it to the Clerk's Office, 26 Francis Street, Kawartha Lakes, Ontario K9V 5R8

General Information

Voting Location: _____

Date (yyyy-mm-dd): _____

Time: _____

Feedback (circle the preferred score)

1. This voting location was accessible. Doors provided easy access, there was sufficient light, and there was smooth, unobstructed access to the voting location.

Disagree

1

2

3

4

Agree

5

2. This voting location met my expectations as a voter. It was convenient for me to access from home/work.

Disagree

1

2

3

4

Agree

5

3. Election staff met my expectations as a voter. People were polite and friendly and met my needs as an elector.

Disagree

1

2

3

4

Agree

5

Comments

Elector Contact Information (Optional)

Name: _____

Address: _____

Phone Number: _____

Email: _____

Resolution Details (To be completed by Election Officials)

DRAFT