

## FEEDBACK FORM FOR INFORMATION SERVICES

Client Name & Designation:

Organization:

Address:

Tel:

Fax:

Email:

Dated:

NO.	SERVICE	EVALUATION (Please tick the appropriate)				
		Poor	Fair	Good	Very Good	Excellent
1.	Document Supply					
2.	Bibliographic Service					
3.	Library Service					
4.	Environmental Information/ Industrial information					
5.	Referral Services					
6.	Other					

*Comments if any:*

Client Signature

**PASTIC Representative  
Name & Signatures:**

**Karachi**

A-43, block No. 3,  
Gulshan-e-Iqbal,  
Karachi.  
Tel: 4987851

**Lahore**

PCSIR Laboratories Complex,  
Ferozpur Road, Lahore.  
Tel: 5756827

**Faisalabad**

Faisalabad Science Centre,  
Jail Road, Faisalabad.  
Tel: 614976

**Peshawar**

PCSIR Laboratories  
Complex, Palosi Road,  
Peshawar.  
Tel: 9216655

**Quetta**

Al-Murtaza House,  
Mian Sariab Road,  
Quetta.  
Tel: 449527