



### CUSTOMER COMMENT RECORD

_____ SUGGESTION	_____ COMPLIMENT	_____ COMPLAINT	_____ OTHER
_____ Service Hours	_____ Early	_____ Driving	_____ Missed Stop
_____ Bus Conditions	_____ Late Work	_____ Bus Stops	_____ Bus Signage
_____ Driver Conduct	_____ Fares	_____ Routes	_____ Shelters
_____ Other	Explain: _____		

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_ am\_\_ pm\_\_

Run# and/or Employee's Name: \_\_\_\_\_

Caller's Comment(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Caller's Name: \_\_\_\_\_

Caller's Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Caller's Phone Number: \_\_\_\_\_

Date: \_\_\_\_\_

Mail To:  
 Pacific Transit System  
 Customer Comment  
 216 2<sup>nd</sup> Street  
 Raymond, WA 98577