



*Here at K & K Pharmacy we are always looking for new and better ways to serve our customers and community! We appreciate feedback from you! **Fill out this survey, bring it back to the store and receive \$5 off of your next over the counter purchase!** Thank you for allowing us to serve you!*

1. Do you feel that the Pharmacy has everything you and your family need? **YES** or **No**  
If **NO** what would you like to see more of? \_\_\_\_\_
  
2. Is the pharmacy/store clean, organized and easy to shop? **YES** or **No**
  
3. When buying a multi vitamin would you rather buy the cheaper option or the top of the line vitamin? **CHEAPER** or **TOP OF THE LINE**
  
4. Where do you like to buy your toiletries from? **K&K**   **Grocery Store**   **Online**   **Other**\_\_\_\_\_
  
5. If we carried more gift items would this interest you? **YES** or **No**
  
6. If we carried health foods would this be interesting to you? EXAMPLE: Protein bars, Protein powders or local products. **YES** or **No**
  
7. What products would you like us to carry that we're not currently carrying?  
\_\_\_\_\_
  
8. How do you find out about what is going on in the store? Example: Facebook, Instagram, E-mail etc.  
\_\_\_\_\_
  
9. Would you like to find out more about other services we have? Example: Texting in your prescription information, Nutritional Class, Diabetes Classes and more!  
\_\_\_\_\_

We would love to stay in contact with you!

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_