



Let us Know!



Please Check One

Questions

Yes, Always *Yes, Sometimes* *No, Hardly Ever* *No, Never*

Do you get enough to eat?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is the food tasty?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can you get a variety of foods you like?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is the food the right temperature? (hot food hot, cold food cold)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is the dining area a pleasant place for you to eat?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you like the way your meals are served here?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments _____

Your Name _____ optional Date _____



100 Farmers St
Newark, OH 44657
Ph: 419 663-3900
Fax: 419 663-3900

Form Food 1 up



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