

Shipping Service Quality Assessment

Date: [Insert Date]

To: [Recipient Name]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

We hope this message finds you well. As part of our ongoing commitment to providing exceptional shipping services, we are conducting a quality assessment survey of our shipping services.

We would appreciate your feedback on the following aspects:

- Timeliness of Delivery
- Condition of Goods upon Arrival
- Customer Service Interaction
- Ease of Use of Shipping Services
- Overall Satisfaction

Please take a moment to complete the attached survey by [Insert Due Date]. Your insights are invaluable in helping us improve our services.

Thank you for your cooperation and support.

Sincerely,

[Your Name]

[Your Position]

[Shipping Company Name]

[Contact Information]