

Customer Experience Evaluation

Date: [Insert Date]

To: [Affiliate Partner's Name]

Address: [Affiliate Partner's Address]

Dear [Affiliate Partner's Name],

We hope this message finds you well. As part of our commitment to enhancing the customer experience across our affiliate network, we are conducting an evaluation of the customer interactions and service quality linked to your business.

We would appreciate your feedback on the following aspects:

- Timeliness of service delivery
- Quality of product information provided
- Responsiveness to customer inquiries
- Overall satisfaction of customers with your services

Your insights will be invaluable in helping us identify strengths and areas for improvement, ensuring that we can better meet customer needs and expectations.

Please complete the attached evaluation form and return it by [Insert Deadline]. If you have any questions or require further assistance, do not hesitate to reach out.

Thank you for your cooperation and commitment to excellence.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Contact Information]