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Testimonial Form

Let us know how you feel about the customer service you have received and the products we have provided for you. Please write your testimonial as neatly as possible in the space provided below:

Tell us how to get in touch with you, if necessary:

Name: _____

Company: _____

Email: _____

Phone: _____

***Note:** Your company information will be kept secure and confidential. We will not share your information with outside sources.*

Yes, you may use my testimonial on the Poster Compliance Center website.

Yes, you may use our logo on the Poster Compliance Center website to represent one of the many businesses that you serve.

Signature: _____ Date: _____

Title: _____

Scan and email to: customerservice@postercompliance.com or fax to: 800-444-4324

Thank you!