



# FEEDBACK FORM

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**Pharma Medica Research Inc. (PMRI)** welcomes and values your feedback. Please use this form to address any comments and/or suggestions you may have.

Your Information:

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**Use this space to tell us what you think. Please provide as much detail as possible and indicate whether additional pages are attached:**

Name/Signature \_\_\_\_\_ Date \_\_\_\_\_

|                           |       |
|---------------------------|-------|
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| Acknowledgement:          | Date: |
| Response:                 | Date: |
| Comments:                 |       |

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