



CLIENT TESTIMONIAL FORM

Please provide your candid experience with Powerpoint Systems (E.A) Ltd

Client or Company Name: _____

Address: _____

Service or Product Provided: _____

I have been a Powerpoint Systems Customer Since _____

My comments:

Do we have your approval to use the above comments in our marketing materials and Website?

Yes ____ No ____

Name: _____ Signature: _____

Date: _____