

**CLIENT EVALUATION**  
(Please print)

Name: Pamela Utz

Address: 5090 Eastbrook Ct.

City, State, Zip: Shelby Twp, MI 48316

Home phone: 586-739-1362 Work phone: 586-214-3035

Type of professional service provided: Estate Plan

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

I sought your services for estate planning and advice regarding future concerns due to my husband's Alzheimer's condition. I felt very comfortable with the counsel I received, and believe I am in good hands. I appreciate the time you took with my husband and me, and also the time you spent with my sons. The whole family liked their experience.

Pamela K. Utz  
Signature

Can we use this evaluation in any future publications?  Yes /  No

**CLIENT EVALUATION**  
(Please print)

Name: WALTER & JOYCE WESTER

Address: 15151 FORD RD. APT C5 206

City, State, Zip: DEARBORN, MI. 48126

Home phone: 313-945-9004 Work phone: \_\_\_\_\_

Type of professional service provided: BASIC ESTATE

PLANNING AND ELDER LAW PLANS

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

UPON THE FIRST CONTACT WITH MR. CHRISTOPHER B. KROLL'S  
ELDER LAW SOLUTIONS: THE OFFICE STAFF HAVE BEEN VERY  
RESPONSIVE AND EFFICIENT, PRIMARILY Ms. CHERYL HINES.  
MR. KROLL'S PRESENTATION OF ESTATE PLANNING WAS CONDUCTED  
IN A MORE INFORMAL MANNER THAT MADE US FEEL MORE  
COMFORTABLE IN TRYING TO COMPREHEND THE LEGAL TERMS  
THAT WERE INVOLVED. THE PRESENTATION WAS THOROUGHLY  
COVERED FROM THE BEGINNING TO THE COMPLETION.  
ALLOW CLIENTS OPTION TO RETRIEVE ALL MATERIALS PROVIDED FOR  
PREPARING NEW ESTATE PLANNING PORTFOLIO.

Walter L. Wester  
Joyce R. Wester  
Signature

Can we use this evaluation in any future publications? (Yes) No

# Evaluation

Name: WILLIAM & MILDRED CLARK

Address: 52240 SOUTHVIEW RIDGE DR.

City, State, Zip: MACOMB, MI. 48042

Type of Service performed: TRUST

Referred By: LEO SILVESTRI

## Why did you select us as your legal representative?

YOU ORIGINALLY DID OUR WILLS.

## Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients.

OUR MEETING WAS VERY GOOD & INFORMATIVE, BUT DEALING WITH ELDERLY AS YOU DO, CONSIDERATION SHOULD BE GIVEN AS TO HOW DIFFICULT IT IS TO ABSORB ALL OF IT. WE OURSELVES WERE LEAVING FOR FLORIDA, AND UNABLE TO DO ALL THAT WAS REQUIRED OF US DEALING WITH THE WORK OF OUR TRUST. WE WILL APPRECIATE ANOTHER MEETING WHEN WE RETURN TO MICHIGAN. THERE IS SO MUCH THAT YOU FORGET, AND WE ARE UNABLE TO ATTAIN THINGS AS WE GET OLDER. WE THANK YOU AND APPRECIATE ALL THE HELP YOU ARE ABLE TO PROVIDE US. PLEASE CONSIDER THIS AS A HELPFUL SUGGESTION TO YOU, AND NOT A COMPLAINT.

## Would you be willing to give us the name and address of a friend or family member that would benefit from our services?

Yes + I already have

## How can we serve you in the future?

BY SETTING ANOTHER MEETING WHEN WE RETURN

Signature: Mildred Clark + William Clark

Can we use this evaluation in future publications?  YES / NO

## Client Evaluation

(Please Print!)

Name: DONALD MORAN

Address: 38136 SEAWAY CT.

City, State, Zip: HARRISON TWP MI 48045

Home Phone: 586 469 4793 Work Phone:                     

Name of Loved One In Nursing Home: VERONICA MORAN

Name of Nursing Home: ST. ANTHONY'S

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

I WAS WELL PLEASED WITH YOUR  
SERVICE. IT WAS UNFORTUNATE  
WE DID NOT NO OF YOUR SERVICES  
A COUPLE OF YEARS EARLIER

THANKS AGAIN

Donald Moran

Signature

Can we use this evaluation in any future publications? Yes/No

# Client Evaluation

(Please Print!)

**Name:** Charles A. Stefani

**Address:** 35702 Wellston

**City, State, Zip:** Sterling Heights, Michigan 48312

**Home Phone:** 586-795-5399      **Work Phone:** 586-293-8888

**Name of Loved One In Nursing Home:** Lucy Stefani

**Name of Nursing Home:** Clinton-Aire Nursing Care Center

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

I recently had reason to avail Mr. Kroll of his services for the well being of my  
mother. He was very friendly, accommodating and extremely knowledgeable in  
the laws for the elderly. Mr. Kroll was very easy to understand as he was able to  
communicate to me in layman language. The way in which Mr. Kroll handled the  
situation put me at ease and without any due cause for further worries. The items  
that needed to be taken care of were done very promptly, without hesitation, and  
with professionalism. I would recommend Mr. Kroll and his firm to anyone with  
an elderly parent to take care of. His secretary was very personable and friendly  
as well.

Charles A. Stefani

**Signature**

**Can we use this evaluation in any future publications?**  **Yes**  **No**

# Client Evaluation

(Please Print!)

Name: Cheryl Dadich

Address: 23793 Lambrecht

City, State, Zip: Eastpointe, Mi. 48021

Home Phone: 586-777-4679 Work Phone: 586-445-5685  
cell 586 596 4035

Name of Nursing home: Medilodge of St. Heights

Name of Loved one in nursing home: Helen Dadich

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

I had no idea the amount of work involved in setting someone up on Medicaid. Kris reassured me every step of the way. Our meetings gave me peace of mind that every step was going in the right direction. I needed someone to tell me what I had to do and how it had to be done. He was very nice and personable.

Signature: Cheryl Dadich

Can we use this evaluation in any future publications?  Yes /  NO

# Client Evaluation

(Please Print!)

Name: Betty PIZZINI

Address: 48371 SAND CASTLE CT

City, State, Zip: SHELBY Twp., MI 48315

Home Phone: 586 247-2345 Work Phone: \_\_\_\_\_

Name of Nursing home: EVANGELICAL

Name of Loved one in nursing home: CORA DARIOS

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

Mr. Kroll came to my brother as highly recommended.  
He did seek out his services and from the first day  
of consultation we can honestly say we received a  
good impression.

He was thorough in his explanations, patient,  
and answered all phone calls that we had some questions  
and concerns as they arose. He did the job we  
expected and my brother and I are completely satisfied.  
We highly recommend him. He did an excellent job with  
our mother's finances.

*Sincerely,*

Signature: Betty Pizzini

Can we use this evaluation in any future publications? Yes/NO

## Client Evaluation

(Please Print!)

Name: Evelyn & AL Hankus

Address: 4114 Tyler

City, State, Zip: Shelby Twp, MI. 48316

Home Phone: 248-651-4570 Work Phone: \_\_\_\_\_

Name of Nursing home: Evangelical Home Sterling Heights

Name of Loved one in nursing home: Viola Schwartz

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

After seeing an Elder Law Attorney in Petoskey, MI, we were very confused and upset because we would be loosing a lot of mothers' money. We came to see Mr. Krohl for a second opinion. He was "WONDERFUL". He explained everything and answered all our questions. He was able to save mothers' money and still get her on Medicaid. He took a big burden off our shoulders. Thanks a lot!!

Signature: Evelyn A. Hankus

Can we use this evaluation in any future publications?  Yes  NO

## Client Evaluation

(Please Print!)

Name: Reg Krajnik

Address: 29081 Yorkshire Lane

City, State, Zip: Warren, Mich. 48088

Home Phone: 586-773-9099 Work Phone: N/A

Name of Nursing home: Autumn Woods

Name of Loved one in nursing home: Mother

**Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients:**

My mother was admitted to a nursing home in the summer of 2004. Chris and his staff were very knowledgeable and efficient in helping our family understand the Medicare/Medicaid rules. As of October 2004, my mother was Medicaid qualified. I have just recommended Chris to my neighbor, whose 91 year old mother will probably be entering a nursing home shortly.

Signature: Reginald F. Krajnik

Can we use this evaluation in any future publications?  Yes  NO

# Evaluation

Name: GEREY EASTON  
Address: 8303 MUNROVA  
City, State, Zip: SHELBY TOWNSHIP, MI, 48317  
Type of Service performed: MEDICAID QUALIFICATION -  
Referred By: \_\_\_\_\_

## Why did you select us as your legal representative?

IT WAS DIVINE GUIDANCE!  
I SAW YOUR AD IN A NEWS PAPER THAT I Seldom READ.

## Briefly describe your experience with us and provide any comments or recommendations that would be constructive in our care of future clients.

I WAS IN NEED OF HELP WHEN MY HUSBAND WAS  
SENT TO A NURSING HOME... FOR LIFE.  
THE QUALIFYING PROCESS FOR MEDICAID ASSISTANCE  
WAS MORE THAN I COULD HANDLE IN MY STRESSED STATE  
OF MIND.

I FOUND MR. KROLL AND THE ENTIRE STAFF TO BE VERY  
PATIENT AND UNDERSTANDING. I HAD NO IDEA THE SYSTEM  
WAS SO COMPLICATED!

MY HUSBAND NOW HAS FULL MEDICAID COVERAGE, THANKS TO  
THE GOOD FOLKS AT ELDER LAW SOLUTIONS!

## Would you be willing to give us the name and address of a friend or family member that would benefit from our services?

YES. I HAVE ALREADY GIVEN YOUR NAME AND CARD TO  
TWO PEOPLE -

I ALWAYS CARRY YOUR CARDS WITH ME!

## How can we serve you in the future?

AT THE MOMENT, I DON'T KNOW BUT IF A PROBLEM  
ARISES, YOU CAN BET I'LL CALL YOU!

Signature: Gerrey Easton

Can we use this evaluation in future publications? YES/NO

ABSOLUTELY!

January 17, 2011

Dear Chris and Cheryl,

I tried several times to e-mail you about the loss of my mother Caroline Suerwier. But they would not go through.

Caroline Suerwier, was at Applewood Nursing Center, Inc in Woodhaven. She passed away October 23, 2010.

She was made Hospice for a few days and passed away peacefully without pain.

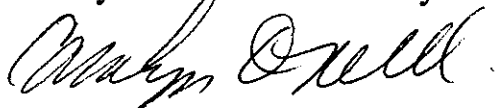
I miss her a lot but would not wish her to live anymore the quality of life she had. She lived a wonderful life of 95 almost 96 years. She would have been 96 January 27, 2011.

I want to thank both of you, Chris and Cheryl, for all your help with the paperwork. I could not have done it without you and your firm. You are wonderful thoughtful people. I am so glad that my nephew recommended, you, John Freeman.

Thank you again and God Bless you and yours in the coming New Year 2011.

Cordially and Prayerfully,

Carolyn O'Neill and Family



734-671-1184

734-752-8366