

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 C5206

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: Geroy Easton

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

ABSOLUTELY!