

WINPAK #3

COMMENT.WRI

Please use this form to provide Rhode Island Soft Systems, Inc. with specific information which will help us diagnose your particular problem, or understand your question or suggestion.

Please fill out as much of this form as you can. If there are any parts you are unsure of, you may leave them blank or describe your answers as much as you can.

Some of the information might be redundant, but it can help us in cases where a user does not know certain specifics. Some questions are multiple choice -- please mark your answer.

For the quickest response, you may fill this form out in a text editor or word processor and either FAX it to us at (401) 767-3108, or upload it to us either on our 24-hour support BBS (401-767-3931) or on CompuServe [72662,463]. Otherwise, you may mail this form to Rhode Island Soft Systems, Inc., PO Box 748, Woonsocket, RI 02895, or send it to us via any of the other methods listed in the "HOW TO CONTACT RHODE ISLAND SOFT SYSTEMS" section of the WinPak documentation.

Please make sure to fill out the last page completely so that we can best serve you. Thank you for your comments!

Type of Computer you have (brand name): _____

Processor: ☐ 8088 ☐ 286 ☐ 386 ☐ 486 ☐ Other: _____

Please list any information you might have about your particular BIOS (such as brand name, date of manufacture, etc. This can usually be found in your computer manual or on the screen when your computer boots up):

Version of DOS: _____ Version of Windows: _____

Type of display: ☐ Mono ☐ Hercules ☐ CGA ☐ EGA
☐ VGA ☐ Other: _____

Number of display adapters in your computer: ☐ 1 ☐ 2
(some computers have both monochrome and color)

What kind of keyboard do you have? ☐ 101-key extended
☐ original PC keyboard
☐ Other: _____

What resident (TSR) programs are you using?

If using TSRs, have you seen differing results when doing one of the following: Altering order in which TSRs are loaded, Loading WinPak without any other TSRs, Loading WinPak with some TSRs but not others ? Please explain.

Please use the remainder of this space for your written description of the problem, or to list enhancement requests or comments. Please make sure to complete the last page. Thank you for your time and effort!

Please check the appropriate box, and fill in the necessary information so that we can reply to your comments via the method which is most convenient for you.

Please contact me:

☐ You don't need to. This is a comment for your records only. I do not expect to receive acknowledgement, but I understand that you will consider my comments when providing updates to your products, etc.

☐ Via FAX at: _____ ☐ days ☐ evenings

☐ Via Voice at: _____ ☐ days ☐ evenings

or: _____ ☐ days ☐ evenings

☐ Via the same on-line service that was used to send this form to you (i.e. CompuServe, Delphi, BBS, etc.). My account name/number is: _____ (We will most likely simply "reply" to the letter, but please enclose your account ID in case we should need it)

☐ Via U.S. Mail at the following postal address:
