



Date Received: _____
For office use only.

VENDOR PERFORMANCE REPORT

Instructions: Complete this form to report unsatisfactory or exceptional vendor performance. Send original to the Purchasing Department and retain a copy for your department/campus records.

Person Submitting Report:	Vendor Name:	
Title:	Vendor Contact:	
Department/Campus:	Vendor Phone #:	
Phone #:	Purchase Order #	Date:

Nature of Comments (Check all that apply)		
Quality	Delivery	Customer Service
<input type="checkbox"/> Exceptional performance	<input type="checkbox"/> Delivery not made on date promised	<input type="checkbox"/> Exceptional customer service
<input type="checkbox"/> Inferior or defective merchandise	<input type="checkbox"/> Delivery made at unsatisfactory hour	<input type="checkbox"/> Easy access to sales staff
<input type="checkbox"/> Unauthorized substitution	<input type="checkbox"/> Incorrect quantity delivered	<input type="checkbox"/> Does not return phone calls promptly
<input type="checkbox"/> Unsatisfactory substitution	<input type="checkbox"/> Delivery made to wrong destination	<input type="checkbox"/> Slow replacement of damaged goods
<input type="checkbox"/> Unsatisfactory workmanship in installation	<input type="checkbox"/> Improper method of delivery	<input type="checkbox"/> Incorrect Invoices
<input type="checkbox"/> Satisfactory workmanship in installation	<input type="checkbox"/> Partial delivery, but did not ship remainder	<input type="checkbox"/> Improper product packaging
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Detailed Explanation: Be specific, use additional pages if necessary.

Vendor Response to Report: (To be completed by Purchasing Office)

Vendor By: _____	Response
(Name) (Title) (Date)	(Phone #)

Final Disposition: (To be completed by Purchasing Office) **Date** _____

Resolved, agency/vendor records retained for future reference. **Initial** _____

No additional action required. Filed in Purchasing Office in vendor's performance records.

Other _____