



Allen ISD

Where Eagles Soar

VENDOR PERFORMANCE QUALITY REPORT FORM

Complete this form to report complaints against vendors or to indicate your appreciation for a job well done for goods or services purchased by your department. Be sure to furnish all necessary details so that a satisfactory resolution of complaints may be made. Please verify all information to ensure accuracy. Complaint and appreciation reports become a permanent record of the vendor and must be accurate to guarantee intelligent and equitable resolution and to serve as a guide for future action regarding a vendor's performance.

DEPARTMENT INFORMATION

Submitted by: _____

Phone #: _____

Department: _____

Fax #: _____

Address: _____

Email: _____

VENDOR INFORMATION

Vendor Name: _____

Vendor Contact: _____

Vendor FEI# (if known): _____

Vendor Phone: _____

Vendor Address: _____

Vendor Fax: _____

Vendor Email: _____

ORDER INFORMATION

Purchase Order Number: _____

Delivery Date of Last Shipment: _____

Item Number: _____

District Contract Number: _____

VENDOR COMPLAINT

Failure to Meet Specs

Failure in Performance

Quality

Other (please explain): _____

Non-Delivery

Partial Delivery

Unauthorized Substitution

Good or Service that is unsatisfactory: _____

Comments: _____

Additional supporting data attached (i.e. pictures, samples) Yes No

VENDOR APPRECIATION

Comments: _____

Send Report To: Purchasing Department