

STATE OF IOWA  
 IOWA DEPARTMENT OF ADMINISTRATIVE SERVICES  
 GENERAL SERVICES ENTERPRISE - PROCUREMENT SERVICES  
 Hoover State Office Building, Level A  
 Des Moines, IA 50319-0105

**VENDOR PERFORMANCE REPORT**

*Complete this form to report vendor performance/  
 service, product or unsatisfactory service to  
 General Services Enterprise - Procurement Services.*

Agency		Vendor	
Address		Address	
Telephone		Agency Requisition #	PO #
Product Covered by Performance		Contract Award #	Brand Name
Date Product Received	Date Product First Utilized	Invoice #	Code #

**NATURE OF REPORT  
 QUALITY/QUANTITY**

	Quality of product inferior
	Unsatisfactory/unauthorized substitute made
	Unsatisfactory workmanship in installation
	Damaged or defective
	Product lacks required inspection or grade certification
	Product received was not same as bid or sampled
	Less than ordered
	More than ordered
	Other - Specify:

**DELIVERY**

	Delivery not made within specified delivery
	FOB point not as specified on purchase order
	No notice of delayed delivery
	Received in damaged condition      Carrier notified
	Incorrect shipping address
	Partial delivery - cannot deliver balance of order
	Excessive partial shipments
	Non-delivery
	Method not as specified, before/after hours
	Other - Specify:

<b>OTHER</b>	
	Improper labeling
	Unsatisfactory packing
	Failure to resolve issue properly
	Invoice inaccuracies
	Service deficiencies
	Other - Specify:

**REMARKS:**

*Give detailed, specific, factual explanation of issue in this space. Attach additional sheet if necessary.*

**RECOMMENDATION for settlement of report:**

*For your information      For return and reimbursement of product*

**Performance Report Executed By:**

Name:

Title:

Phone:

FAX:

Date:

Issuer notified of disposition:    Yes    No

**AGENCY USE ONLY**

Disposition of Report:

Purchasing Agent:

Date: