CONTRACT PERFORMANCE EVALUATION

Check the appropri contract:	ate box for the type of contract you are eval	uating and this form will display the appropriate op	itioi	ns 1	for t	:he
Purchasing Con	tract					
Professional Se	rvices Contract					
✓ Contract from I	RFP					
✓ Complex Se						
Professiona						
contract awarded b contract performan	y RFP, the using agency shall prepare a final ce and an assessment of the utility of the fin	·	atic	on (of	
file.	submitted within 120 days after completion	of performance and shall be retained in the original	31 C	znτ	.ract	•
Agency Name:		Name & Title of Monitor:				
Email Address:		Monitor's Telephone Number:				
LaGov Contract/PO Number:		Contractor:				
	Overall Contractor	Performance Rating				
	Satisfactory	Unsatisfactory				
Contract Amount:		Contract Cost Basis:				
Contract Begin Dat	e:	Actual Begin Date:				
Contract End Date:		Actual End Date:				
Contract Title:		File Number:				
Contract Modi	fications/Amendments					
RESPONSE: Check the appropriate box (check only one box per row)			Ye	s	No	N/A
Customer Service 1. Adequate accessibility – phone orders, fax		x lines, e-mail, etc.				
	Customer service support staff availability					
	3. Contractor representative knowledgeable					
4. Customer service is courteous and professional						
5. Phone calls returned timely						
	6. Support on technical matters provided					
	7. Contractor acceptance of State procurem	ent card (if agency applicable)	L	_	Ц	
				╛		
	9. Delivers specified items		L	4		Ц
	10. Delivers packaging units specified		L	4		
	11. Frequent backorders			4	Щ	
	12. Proper notification of backorders		-	4	H	닏
	13. Timely delivery of backorders		-	4		
	14. Delivers proper quantities	du mannar	-	\dashv	\vdash	\vdash
	15. Delivery discrepancies resolved in a time	ny mamer	-	4	\vdash	

17. Product documentation included (instructions, tech. literature/manuals, SDS)

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Product Quality

	18. Products are reliable and durable	_
Billing	19. Accuracy of billing (cost and item)	
	20. Accuracy of packing slip	
	21. Prompt billings	
	22. Prompt credits	
	23. "Bill to" proper agency/customer with required reference numbers	
Other	24. Additional items needed? Include additional information in the sections below.	
Description of Services:		
Deliverables (list):		
Quality of Deliverables:		
Problems Encountered:	ş	
Opportunities for Improvement:		
	Fmail completed form to	

doa-osphelpdesk@la.gov

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