

**SUPPLIER PERFORMANCE REPORT**

<b>GENERAL INFORMATION</b>																										
NAME:					TELEPHONE #:					EMAIL:					DATE:											
DEPARTMENT NAME:										AGENCY ORDER #:																
CONTRACTOR NAME:										LEVERAGED PROCUREMENT AGREEMENT #:																
<i>(check all applicable boxes)</i>																										
DELIVERY DATE(S)		DELIVERY								SPECIFICATION						CONSEQUENCES				ACTIONS						
Purchase Order Required Delivery Date(s)	Actual Delivery Date(s)	Compliant	Late	Early	Partial	Short	Over	Non-Delivery	Other (explain in comments)	Compliant	Poor Quality	Wrong Brand	Wrong Product	Marking/Packaging	Palletization	Other (explain in comments)	Operational Changes	Unscheduled Overtime	Emergency Purchase(s)	Excessive Admin. Time	Other (explain in comments)	Accepted	Rejected	Other (explain in comments)		
<b>COMMENTS:</b> <i>Include all applicable information (issue, event, date, time)</i>																										

**Return completed form with any applicable attachments to the DGS Buyer/Contract Administrator:**

DGS - Procurement Division  
Acquisitions & Contracts  
Section 707 3rd Street, 2nd  
Floor, MS 201 West  
Sacramento, CA 95605  
Facsimile: (916) 375-4613