

**LEE COUNTY
VENDOR COMPLAINT REPORT**

VENDOR: _____ DEPARTMENT _____

ADDRESS: _____ COMPLAINANT'S NAME: _____

CITY: _____ COMPLAINANT'S TITLE: _____

PHONE: _____ COMPLAINANT'S PHONE#: _____

DATE: _____ QUOTE#: _____

CONTACT: _____ QUOTE TITLE: _____

NATURE OF COMPLAINT

- | | | | |
|----------|--------------------------------------|----------|--|
| _____ 01 | Late Delivery | _____ 10 | Goods Delivered Damaged |
| _____ 02 | Unauthorized Substitute | _____ 11 | Request to Cancel Due to Bid Error |
| _____ 03 | Poor Quality | _____ 12 | Problem w/vendor Personnel |
| _____ 04 | Failure to Respond to Letter or Call | _____ 13 | Failure to Replace Damaged Goods |
| _____ 05 | Poor Service | _____ 14 | Repair Parts Not Available |
| _____ 06 | Failure to Respond to Service Call | _____ 15 | Poor Workmanship |
| _____ 07 | Incorrect Items Delivered | _____ 16 | Failure to Provide Warranty, Manuals, etc. |
| _____ 08 | Failure to Meet Specifications | _____ 17 | Short Weight or Oversightment |
| _____ 09 | Failure to Identify Shipment | | |

DETAILS OF COMPLAINT: (Attach additional pages if necessary)

ACTION TAKEN BY BUYER & OUTCOME: (Attach additional pages if necessary)

Buyer: _____ Date: _____

Has complaint been resolved? _____ Yes _____ No Date resolved: _____