

**VENDOR COMPLAINT FORM**

If you have a problem with any vendor as far as service, quality of product, deliveries, substitutions, unjustified price increases, etc., please document incident by filling out the following form then forward to Emily Garza for handling.

Campus/Department: \_\_\_\_\_

Complainant: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email Address: \_\_\_\_\_

Date: \_\_\_\_\_ Company: \_\_\_\_\_

Company Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Contact Person: \_\_\_\_\_

Problem or Complaint:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was the company contacted? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

What date was the company contacted: \_\_\_\_\_

Who was the person that was contacted: \_\_\_\_\_

What actions were taken by the company, or representative of the company, to correct the problem?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was the problem handled in an appropriate and timely matter?

Yes: \_\_\_\_ No: \_\_\_\_ If no, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please Mail to: **Emily Garza** From: \_\_\_\_\_

**Director of Purchasing** Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**PSJA ISD** Fax Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**P.O. Box 769**

**Pharr, Texas 78577**

**(956) 354-2000 Phone (Ext. 1123)**

**(956) 354-3019 Fax**