CONTRACT PERFORMANCE DATA SHEET
N4523A26Q1110
Attachment 4

CONTRACTOR NAME_____

Contract Number (Government Contracts):		Date Completed:
Contract Type:	FFP____ Cost Reimbursement ____ Other (Specify) _____	
Item/Service Description:		
Contract Quantity/Period of Performance:		
Customer Name:		
Customer POC (Person who can verify data; Name/Title/Phone #/Email):		
Address:		Telephone:
		Email:

	PERFORMANCE INFORMATION		
		YES	NO
1	Were all supplies/services delivered within the original contract schedule?		
2	Did all delivered supplies/services comply with the contract specifications/ statement of work?		
3	Did any of the delivered supplies/services require replacement, modification or rework in order to be acceptable?		
4	Were any modifications issued relaxing the contract specifications/delivery requirements?		
5	Was any part of this contract terminated for default or cause?		
6	Did you receive any quality awards?		
7	If applicable, describe any corrective action(s) initiated to solve any problems/deficiencies on this contract. Discuss the success of the corrective action(s) taken.		

NARRATIVE: