

Contract Completion Form

VENDOR: Submit this form to the Customer associated to the contract of the completion form. CC doataskorders@alaska.gov.

CUSTOMER: Submit this form to doataskorders@alaska.gov once completed. For the purpose of this Completion Form "work" is described as "total job performed". If the project is cancelled by the Customer the Vendor shall receive a base score of "5" for Total PPI score for that contract. If the vendor fails to meet 2 of the 4 categories set out in the 'Performance Questionnaire', that Vendor shall receive a "0" for Total PPI Total PPI score for that contract. 'Comments' must be filled out by both the Vendor and the Customer to be validated as a "completed" form.

Vendor: _____

Contract # (if applicable): _____

Contract Description: _____

Ending Contract Value: _____

Completion Date: _____

% Work Performed by Subcontractor(s): _____

PERFORMANCE QUESTIONNAIRE

Please answer the following questions accurately.

Question	Response	Points
Was the work completed per the terms of the contract?	Select	--
If Yes, were the requirements exceeded at no additional time or cost?	Select	--
Was the work completed early, on time, or was it extended at the customer/vendor's request?	Select	--
Was the work completed under budget, on budget, or was funding added at the customer/vendor's request?	Select	--
Total PPI		--

VENDOR COMMENTS

CUSTOMER COMMENTS

Contract Completion Form

By submitting this form to doataskorders@alaska.gov, I certify that as the Customer of record for this contract, this contract has been completed per all stated requirements and the questionnaire responses are true and accurate to the best of my knowledge. I understand that knowingly submitting false information may result in disciplinary action.

TO#	End Value	End Date	% Sub	PPI1	PPI2	PPI3	PPI4	Total PPI
	0	0	0	0 Points		0	0	0