

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Supplier/Product Evaluation Form

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

GEN	ERAL INFORM	ATION					
Bid #: 57-105N Bid Title: MAIL PROCESSING EQUIPMENT & SUPPLIES							
Purchase Order #:7519002908	Produ	ct/Service F	Provided: Po	stage equipme	nt & Supplies		
Supplier (Company) Name: NEOPOST USA							
Contact Name: Paul Mabel	Cont	act Phone #	: (954)77	0 - 9721			
SECTION	1: SUPPLIER E	ALUATION					
1.) How would you rate the supplier in the fol	lowing areas?						
	1	2	3	4	5		
	Poor	Fair	Good	Very Good	Excellent		
Overall customer service							
Delivery as scheduled or promised	Ē		Ē	H			
	1	ц,					
	Not	Somewh	at	3	4		
	Satisfied	Satisfie	d Sat	isfied Vei	ry Satisfied		
2.) How satisfied are you with the supplier?							
3.) Will you use this supplier again?	Ves		()				
SECTION 2: DR	Ľ		TION				
SECTION 2: PRO			A COMPANY OF A COMPANY OF A COMPANY				
4.) Based on the areas below, how would you			1000 (Cont.)	with this Bid?			
	1	2	3	4	5		
Compliance with an elfications	Poor	Fair	Good	Very Good	Excellent		
Compliance with specifications							
Quality as compared to similar products/service	es 🗌				V		
Prices as compared to similar products/service	s 🗌				V		
		1	2	3	4		
		y Unlikely	Unlikely	Probably	Definitely		
5.) Would you purchase this product/service a	gain?				~		
SECTION Please share any additional information regarding	B: END USER C						

performance is unsatisfactory, please tell us why. You may attach an additional sheet if necessary.

EVALUATION FORM COM	PLETED BY:
Title: Budgetkeeper	Cont

Contact Phone #: (754) 323 -1986

School/Department:South Plantation High School

Name: Marlen Zarcone

1

Participant's Signature:	marcone
. (1 mgc no / a
02.2017. V. PWS #1	U

Date: 07/25/2019



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	GE	NERAL INFORM	ATION			
Bid #: 57-105N	Bid Title: MAIL PROCESSIN	IG EQUIPMENT &	SUPPLIES			
Purchase Order #:	****	Produ	ct/Service Pi	r ovided: Pos	tage equipme	nt & Supplies
Supplier (Company) Name: NEOPOST USA		1.5. 			
Contact Name: Paul			act Phone #:	(954)770	- 9721	
	SECTION	11: SUPPLIER EV	ALUATION			
1.) How would you	rate the supplier in the fo	ollowing areas?	·. ·			
		99. 1 .	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall customer so	ervice					
Delivery as schedul	ed or promised			$\mathbf{\nabla}$		
		1	2		3	4
		Not Satisfied	Somewha Satisfied	Sati	sfied Ve	ry Satisfied
2 \ How satisfied a	re you with the supplier?			, F	71	
3.) Will you use thi						
5.7 will you use thi		√ Yes	No No			
		RODUCT / SERVI				
4.) Based on the ar	eas below, how would yo	u rate the produ	icts/services		with this Bid?	
		1	2	3 Caad	4	5
Compliance with sp	acifications	Poor	Fair	Good	Very Good	Excellent
	·. ·					
-	d to similar products/serv					
Prices as compared	to similar products/service	ces 📋		I ∠I		ليبا
: : :		Vor	1 y Unlikely	Z Unlikely	3 Probably	4 Definitely
5.) Would you pure	hase this product/service:					Definitely
	•					
		13: END USER C				
	dditional information regardi		1.4	•		
periorman	ice is unsatisfactory, please t	ien us wny, tou m	iay attach an a	additional Sh	eet if necessar	у.
·						
	EVALUAT	ION FORM CON	APLETED BY:			
Name: Simone Keppl	e Title: _{Budge}	tkeeper	C	Contact Pho	one #: (754)	323 - 2133
School/Department	t: Stranahan High 👔 🎾	//////////////////////////////////////				
Participant's Signat	·····	.0	a	ate: 07/25/	2019	
	X4	t				
	:				_	



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GENER	RAL INFORMA	TION			
Bid #: 57-105N Bid Title: MAIL PROCESSING E	QUIPMENT & S	UPPLIES			
Purchase Order #:	Produc	t/Service Pr	ovided: Pos	tage equipmen	t & Supplies
Supplier (Company) Name: NEOPOST USA					
Contact Name: Paul Mabel	The second se	ct Phone #:	(954)770	- 9721	
SECTION 1:	SUPPLIER EV	ALUATION			
1.) How would you rate the supplier in the follo	wing areas?				
	1	2	3	4	5
	Poor	Fair	Good	Very Good	Excellent
Overall customer service					~
Delivery as scheduled or promised					~
	1	2		3	4
	Not	Somewha	Sat	isfied Ver	y Satisfied
	Satisfied	Satisfied	і г	_	
2.) How satisfied are you with the supplier?			L		
3.) Will you use this supplier again?	V Yes	No No			
SECTION 2: PRO	DUCT / SERVI	CE EVALUAT	ION		
4.) Based on the areas below, how would you r	ate the produ	icts/services	s provided	with this Bid?	
	1	2	3	4	5
	Poor	Fair	Good	Very Good	Excellent
Compliance with specifications			<u> </u>		
Quality as compared to similar products/service	es 🗌				~
Prices as compared to similar products/services		22	1.0		~
		1	2	3	4
	Ver	y Unlikely	Unlikely	Probably	Definitely
5.) Would you purchase this product/service a	gain?		6.2		~
CECTION 2	END USER C	OMMENITS		relation of the second second	
Please share any additional information regarding	Statement of the Name of Street of Street or other	the second second second second second	s / services r	provided. If this	supplier's
performance is unsatisfactory, please tel					
					9-339° - "
	ON FORM CON	and a set of the set o	Contraction of the local division of the loc		
Name: Shauntay Cunningham-Poole Title: Bookkee			Contact Ph	one #: (754)	321 -7576
School/Department:Whiddon-Rogers Education C	enter				
Participant's Signature: Shourtay	C. Ro	le 1	Date:)	7.26.	19
02 2017. V. PWS #1)			Р	age 1 of 1



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	GENERA	LINFORMA	ATION			
Bid #: 57-105N	Bid Title: MAIL PROCESSING EQU	JIPMENT &	SUPPLIES			
Purchase Order #:		Produc	ct/Service P	Provided: Po	stage equipmer	nt & Supplies
Supplier (Company	/) Name: NEOPOST USA		h.			
Contact Name: Pau				:(954)770) - 9721	
	SECTION 1: SU	JPPLIER EV	ALUATION			
1.) How would you	u rate the supplier in the followi	ng areas?				
		1	2	3	4	5
1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 -		Poor	Fair	Good	Very Good	Excellent
Overall customer s	ervice				\checkmark	
Delivery as schedu	led or promised		and the second s	П		
		19958459	2			
		Not	Somewh	at Sat	3 isfied Vei	4
		Satisfied	Satisfie	d Sat	isfied ver	ry Satisfied
2.) How satisfied a	re you with the supplier?		12 2000 19 1 2000 19	1011039	\checkmark	
3.) Will you use th	is supplier again?	Ves Ves	No	·····································	X	
	SECTION 2: PRODU	CT / SERVI				
4.) Based on the a	reas below, how would you rate				with this Bid?	
	Characterization"	1	01. 2	. 3	4	5
	45 - 55 - 55 - 45	Poor	Fair	Good	Very Good	Excellent
Compliance with s	pecifications	200-0-0-000				
Quality as compare	ed to similar products/services	Ē	Ē	N	F	
	to similar products/services		H			
Thees as compared	to similar products/services		_L	2	Ļ	
		Ver	y Unlikely	Unlikely	Probably	
5.) Would you pur	chase this product/service agair				[7]	
	and a state of the				L¥	المسلم
	SECTION 3: EN	Sector and an	NUM AND STREET, STREET, STREET, ST. 1, 1, 100			
	dditional information regarding this					
performai	nce is unsatisfactory, please tell us	<u>why.</u> You m	ay attach an	additional sh	neet if necessary	y.
	EVALUATION F	ORM COM	IPLETED BY			
Name: Darlene Dani	Contraction of the second s	Contract of the second second second		Participation and a second statements and a second	one #: (754)	322 - 4000
	t: Parkway Middle School	-				1000
	ture: Darlene Daniel			Datas og/or	/2010	
r ai ticipant s signal	ure. Dariene Daniel		L	Date: 08/01,	/2019	

PROCUREMENT & WAREHOUSING SERVICES	Cumilar/Dundrick Funktion France
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA	Supplier/Product Evaluation Form
Services Department in determining the quality of goods and/	erformance. This form will aid the Procurement & Warehousing or services purchased for the District. Your input will be used in the oposals submitted by this supplier.
Please return comple	ted evaluation forms to:
—	ervices Department (TSSC Building)
	Park Boulevard, Suite 323
Sunrise, F	lorida 33351
For assistance with	this form contact us at
(754) 321-0505 or <u>CLICK HERE</u> to send us an email (inclu	de the words Supplier/Product Evaluation Form in the subject)
GENERALI	VEORMATION
Bid #: 57-105N Bid Title: MAIL PROCESSING EQUIP	MENT & SUPPLIES
Purchase Order #:	Product/Service Provided: Postage equipment & Supplies
Supplier (Company) Name: NEOPOST USA	
Contact Name: Paul Mabel	Contact Phone #: (954) 770 - 9721
	PLIER EVALUATION
1.) How would you rate the supplier in the following	areas?
	1 2 3 3 4 5
	Poor Fair Good Very Good Excellent
Overall customer service	
Delivery as scheduled or promised	
	1 2 3 4
··· .	Not Somewhat Satisfied Very Satisfied
	tisfied Satisfied
2.) How satisfied are you with the supplier?	
3.) Will you use this supplier again?	Yes at Notari yapawa
	/ SERVICE EVALUATION
4.) Based on the areas below, how would you rate the	ne products/services provided with this Bid?
	1 March 2
and the second	Poor Fair Good Very Good Excellent
Compliance with specifications	
Quality as compared to similar products/services	
Prices as compared to similar products/services	
	1 2 3 4
	Very Unlikely Unlikely Probably Definitely
5.) Would you purchase this product/service again?	
SECTION 2: FAID	USER COMMENTS
	open commences / services provided. If this supplier's
	y. You may attach an additional sheet if necessary.
Had a problem a while back, but Mr. Mabel was great in ste	oping in and getting the problem resolved
	RM COMPLETED BY:
Name: Rebeca Davin Title: Budgetkeeper	Contact Phone #: (754) 323 -0917
School/Department:Hallandale High	
Participant's Signature: Rebeca Roffe Davin	Date: 09/13/2019
	and the second se

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		GENERAL INFORMA	ATION		
Bid #: 57-105N	Bid Title: MAIL PROCES	SING EQUIPMENT &	SUPPLIES		
Purchase Order #:		Produc	ct/Service Provid	ded:Postage equipm	ent & Supplies
Supplier (Company) Name: NEOPOST USA				
Contact Name: Paul				4)770 - 9721	
	Secti	ION 1. SUPPLIER EV	ALUATION		
1.) How would you	rate the supplier in th	e following areas?		la di kazarta. La seconda di kazarta	
			2	3 4	5
		Poor	Fair G	ood Very Good	i Excellent
Overall customer so					
Delivery as schedul	ed or promised				
•	н 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 - 1917 -	1 1	2	3	4
	· · · · ·	Not Satisfied	Somewhat Satisfied	Satisfied V	ery Satisfied
2.) How satisfied a	re you with the supplie		Jacosieu		
3.) Will you use thi		ГЛYes			
, or, the you use in					
		PRODUCT //SERVI		****	-
4.) Based on the a	eas below, how would		icts/services pro	ovided with this Bid	
		1 Poor	2 Fair G	3 4	5 I Excellent i
Compliance with sp	acifications			ood Very Good	
					⊢ ⊢ Ľ ΙΑ
:	d to similar products/s				
Prices as compared	to similar products/se	rvices			
•		Mar	1 y Unlikely Ur	2 3 Whatha Bratatha	4 Definitete
5.) Would you pure	chase this product/serv		y Unlikely Of	likely Probably	Definitely
			L]		*
		ION 3: END USER C	State 12 (State 1) State 1 (State 1) (State 1) State 10 (State 1) (State		
Please share any a	dditional information rega	arding this supplier or	the products / se	rvices provided. <u>If thi</u>	s supplier's
pertormar	ice is unsatisfactory, plea	<u>se tell us why.</u> You m	ay attach an addi	tional sheet if necessa	эгу.
	EVALL	JATION FORM CON	NPILETIED IBYA		
Name: Botty (Insec Title:	STALLEP DEC]() Cont	act Phone #: (754	1321-7631
School/Departmen	t: Connacan but	Schools	n th		
Participant's Signat	ure:		Date:	alizin	· · · ·
	- pray a	33	Date.	112117	· · · · · · · · · · · · · · · · · · ·
02.2017. V. PWS #1					Page 1 of 1



THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Supplier/Product Evaluation Form

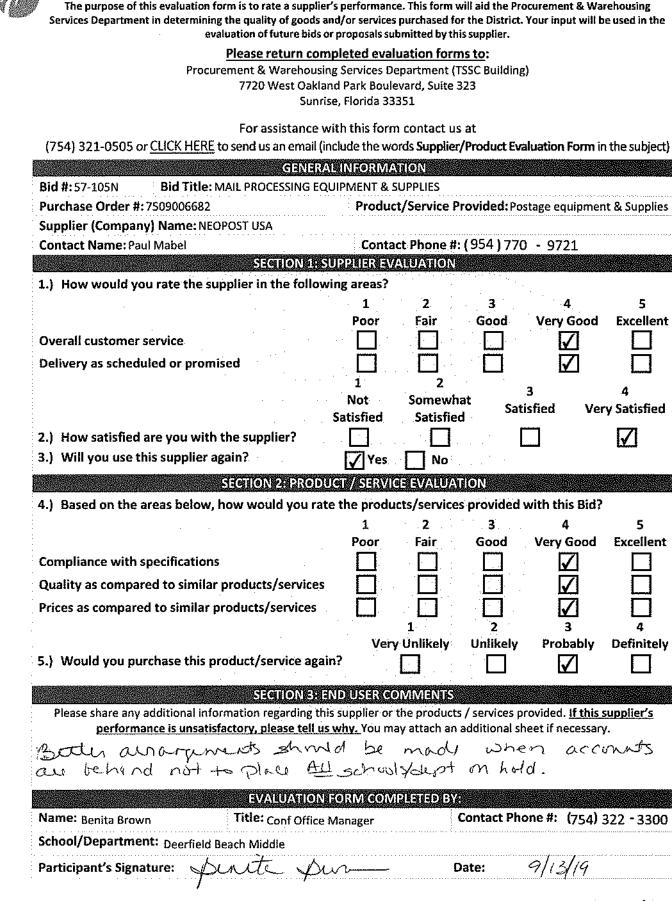
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For assistance with this form contact us at

	GENERAL	INFORMATION				
Bid #:	Bid Title:					
Purchase Order #:		Product/Service P	rovided:			
Supplier (Company) Name:					
Contact Name:		Contact Phone #:	()	-		
	SECTION 1: SUI	PPLIER EVALUATION				
1.) How would you	rate the supplier in the followin	g areas?				
		1 2	3	4	5	
		Poor Fair	Good	Very Good	Excellent	
Overall customer s	ervice					
Delivery as schedu	led or promised					
		1 2				
		Not Somewh	at	3 sfied Ver	4 av Satisfied	
	S	atisfied Satisfie	d Sau	sileu vei	ry Satisfied	
2.) How satisfied a	re you with the supplier?					
3.) Will you use thi	is supplier again?	Yes No				
SECTION 2: PRODUCT / SERVICE EVALUATION						
4.) Based on the areas below, how would you rate the products/services provided with this Bid?						
,		1 2	. 3	4	5	
		Poor Fair	Good	Very Good	Excellent	
Compliance with sp	pecifications			Γ		
	ed to similar products/services	H H	H			
	to similar products/services	HH				
Prices as compared	i to similar products/services		Ļ			
		ے Very Unlikely	ے Unlikely	s Probably	4 Definitely	
5.) Would you pure	chase this product/service again					
	SECTION 3: EN	D USER COMMENTS				
	dditional information regarding this		•			
performa	nce is unsatisfactory, please tell us w	<u>/hy. Y</u> ou may attach an	additional sh	eet if necessary	у.	
	EVALUATION FO	ORM COMPLETED BY	:			
Name:	Title:		Contact Pho	one #: ()	-	
School/Departmen	t:					
Participant's Signal		r	Date:			
Faiticipant's Signal		L	vale.			



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		GENERA		ATION			
Bid #: 57-105N	Bid Title: MA	IL PROCESSING EQ	UIPMENT &	SUPPLIES			
Purchase Order #:			Produ	ct/Service I	Provided: Po	stage equipmer	nt & Supplies
Supplier (Company)) Name: NEOP	OST USA					
Contact Name: Paul	Mabel		Conta	act Phone #	: (954) 770) - 9721	
		SECTION 1: S	UPPLIER E	ALUATION			
1.) How would you	rate the supp	lier in the follow	ving areas?				
			1	2	3	4	5
			Poor	Fair	Good	Very Good	Excellent
Overall customer se	ervice					~	
Delivery as schedul	ed or promise	d	Ē				
			1				
			– Not	Somewh	nat	3	4
			Satisfied	Satisfie	Sat	tisfied Ve	ry Satisfied
2.) How satisfied a	re you with th	e supplier?					
3.) Will you use thi			Yes				
			Ľ				
SECTION 2: PRODUCT / SERVICE EVALUATION							
4.) Based on the ar	eas below, ho	w would you rat	e the prod		es provided	with this Bid?	
			1	2	3	4	5
			Poor	Fair	Good	Very Good	Excellent
Compliance with sp	ecifications						
Quality as compare	d to similar p	roducts/services				~	
Prices as compared	to similar pro	ducts/services					
-				1	2	3	4
			Vei	y Unlikely	Unlikely	Probably	Definitely
5.) Would you pure	chase this pro	duct/service agai	in?				
		SECTION 3: E					
Please share any a				-			
Pitney Bowes had terri		ctory, please tell us		•			•
but they're much easie		ervice so compared	i to them, N	eopost is mu	ch better. If	ley definitely an	en i perieci
but they re much casic							
		EVALUATION	FORM CON	/IPLETED B	/:		
Name: Heather Gera	ci	Title: Budget Kee				one #: (754)	323 - 3305
School/Department	-		r - •				
Participant's Signat	ure: Heather	Geraci			Date: 09/16	/2019	



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	GENE	RAL INFORMA	TION			
Bid #: 57-105N	Bid Title: MAIL PROCESSING I	EQUIPMENT &	SUPPLIES			
Purchase Order #	t :	Produc	t/Service P	rovided: Po	stage equipmen	t & Supplies
Supplier (Compa	ny) Name: PITNEY BOWES, INC.		Alberta .			
Contact Name: Pe	eter Tuccio	Conta	ct Phone #:	(800)203	3 - 2581	
	SECTION 1	: SUPPLIER EV	ALUATION		a United and a second	
1.) How would y	ou rate the supplier in the follo	owing areas?				
		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall customer	r service			e,	() and	
Delivery as sched	uled or promised					
na se de la deserva de la cara deserva de la cara de	The second second	1	2	_	-	
	1	Not	Somewhat	at sat	isfied Ver	4 y Satisfied
	a the state of the state	Satisfied	Satisfied	1 34	ished ver	y Satisfied
2.) How satisfied	are you with the supplier?				ν	
3.) Will you use	this supplier again?	Yes	No			
	SECTION 2: PRO	DUCT / SERVI	CE EVALUAT	TION		
4) Based on the	areas below, how would you r				with this Bid?	
4.) Dased on the	areas scient, new mould you t	1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Compliance with	specifications			V		
	ared to similar products/service		F	R	Ē	
					H	H
Prices as compar	ed to similar products/services					
		Ver	y Unlikely	Unlikely	Probably	Definitely
5.) Would you p	urchase this product/service ag					
ony mound you p		1.6			L <u>e</u>	
		: END USER C				
Please share any	y additional information regarding	this supplier or	the products	s / services p	rovided. If this	supplier's
perform	nance is unsatisfactory, please tell	us why. You m	ay attach an	additional si	neet if necessary	<i>.</i>
	EVALUATIO	ON FORM CON	IPLETED BY	194		
Name: T	Illow Title: Offer	N	Cant	Contact Ph	one #: (754)	322-1404
Name: Jognne School/Departm	ont: / // //	e Manager				
	MONARCH MISH	School	<u></u>		alad	2
Participant's Sign	nature: Jame U	Irech	C	Date:	125/19	1
						no 1 of 1
02.2017. V. PWS #3	1				Pa	age 1 of 1



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Bid #: 57-105N Bid Title: MAIL PROCESSING EQU	PMENT & SUPPLI	ES		
Purchase Order #:	Product/Serv	vice Provided: Po	stage equipmer	nt & Supplies
Supplier (Company) Name: PITNEY BOWES, INC.	Carlos Contractor			
Contact Name: Peter Tuccio	Contact Pho	one #: (800) 20	3 - 2581	
SECTION 1: SU	PPLIER EVALUAT	TION		
1.) How would you rate the supplier in the following	ig areas?		54	
	1 2	3	4	5
	Poor Fa	ir Good	Very Good	Excellent
Overall customer service				X
Delivery as scheduled or promised			Ē	X
	10 Participante -	2		Ц
	Not Son	newhat	3	4
() and () and () and ()	atisfied Sa	tisfied Sat	isfied Ver	y Satisfied
2.) How satisfied are you with the supplier?		RN PARASTO		X
3.) Will you use this supplier again?	X Yes	No		<u>111</u>
SECTION 2: PRODUC		MUATION		
4.) Based on the areas below, how would you rate		the second se	with this Rid?	
entitieterenter	1 2		with this blur	-
Construction and the second	Poor Fai	ir Good	4 Very Good	5 Excellent
Compliance with specifications	and a second			
Quality as compared to similar products/services				
				x
Prices as compared to similar products/services				x
	1	2	3	4
5.) Would you purchase this product/service again	Very Unlik	cely Unlikely	Probably	Definitely
si, would you purchase this product/service again				X
SECTION 3: EN	D USER COMME	INTS		
Please share any additional information regarding this	supplier or the pro	oducts / services p	rovided. If this s	upplier's
performance is unsatisfactory, please tell us w	hy. You may atta	ch an additional sl	neet if necessary	·.
EVALUATION FO		DBY		
Name: A At			ano #+ (¬(-))	
School/Donartment	anager	Contact Ph	one #: (757) 3	525-2550
School/Department: Eurbassy Creek	V			
Participant's Signature: A Muller	/	Date: 7	29/19	
	*****			······



THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Supplier/Product Evaluation Form

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier.

Please return completed evaluation forms to:

Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

For assistance with this form contact us at

Bid #: 57-105N	Bid Title: MAIL PR	GENERAL I	VERRIMATION			
Purchase Order #:			Product/Service	Provided: Post	age equiprner	t & Supplies
Supplier (Company)	Name: PITNEY BOI	WES, INC.				
Contact Name: Peter	Tuccio		Contact Phone	#: (80 0) 203	- 2581	*******
		Sterrowness (P	HUR GWALUATION			
1.) How would you	rate the supplier	in the following	areas?	h Shini San Shini Shina	×	
			1 2	3	4	5
			Poor Fair	Good	Very Good	Excellent
Overall customer sei	rvice				a di nama a	a service of
Delivery as schedule	d or promised					
			1 2	· · · ·	3	Л
			Not Somew	hat sati		ry Satisfied
			tisfied Satisfi	¢id (Processi I
2.) How satisfied are		and the second			5342	त्र । स्टब्स् इन्
3.) Will you use this	supplier again?		Ves No	N I RARENDI.		
	SECTION SECTION	eN24230000	ULAVE EDIWSERAN			
4.) Based on the are	as below, how w	ould you rate t	he products/servic	es provided v	vith this Bid?	
			1 🐴 2 👘	3 6612	<i>4</i>].	5
	SCOULDED.	.48	Poor Fair	Good	Very Good	Excellent
Compliance with spe	ecifications			Langel	a ascenti a P	
Quality as compared	l to similar produ	icts/services		N		
Prices as compared t	o similar produc	ts/services		and a second	- LEI REME I T	
				2 2	8.0mmsr#	Line and
_			Very Unlikely	Unlikely	Probably	Definitely
5.) Would you purch	nase this product	/service again?				
Please share any ad	ditional informatio	n regarding this s	inclies of the produc	ts / services pr	ovided lifthic	supplier's
performanc	e is unsatisfactory	, please tell us wi	<u>iy.</u> You may attach a	n additional sh	eet if necessar	<u>зарриста</u> У.
Name:	Ti+		ENVICEDIMENTAL AND A	Contract Disa		
JEANING	2 TIUSTERS TIT	" Budan	TKKKPER	Contact Pho	ne #: {(SYL	323 -2687
School/Department:	WARS	- Blou	NRO prista		<u> </u>	
Participant's Signatu	ire: Lec	mine R. de	Laugua	Date: 00	1320	219.
	_A-					
02.2017. V. PWS #1	÷ Ų				P	age 1 of 1

Procurement & Warebousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351 For assistance with this form contact us at	
(754) 321-0505 or <u>CLICK HERE</u> to send us an email (include the words Supplier/Product Evaluation Form in the subject) GENERAL INFORMATION Bid #: 57-105N Bid Title: MAIL PROCESSING EQUIPMENT & SUPPLIES Purchase Order #: Product/Service Provided: Postage equipment & Supplies Supplier (Company) Name: PITNEY BOWES, INC. Contact Name: Peter Tuccio Contact Phone #: (800) 203 - 2581 SECTION 1: SUPPLIEF EVALUATION 1.) How would you rate the supplier in the following areas?	
1 2 3 4 5 Poor Fair Good Very Good Excellent Delivery as scheduled or promised 1 2 3 4 Not Somewhat Satisfied Satisfied Satisfied	
 2.) How satisfied are you with the supplier? 3.) Will you use this supplier again? Greatian 24 Stability / Stab	
Compliance with specifications Quality as compared to similar products/services Prices as compared to similar products/services 1 2 3 4 Very Unlikely Unlikely Probably Definitely 5.) Would you purchase this product/service again?	
Section at END USSR COMMENTS Please share any additional information regarding this supplier or the products / services provided. <u>If this supplier's</u> performance is unsatisfactory, please tell us why. You may attach an additional sheet if necessary.	
EVALUATION FORM COMPLETED BY: Name: Lymn Kelly Title: Budget keeper Contact Phone #: (754)-323 - 14/3 School/Department: Brimmer High School Date: 9-13-19 Participant's Signature: Date: 9-13-19 02.2017. V. PWS #1 Page 1 of 1	

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	GENERA	L INFORMA	TION			
Bid #: 57-105N	Bid Title: MAIL PROCESSING EQ	UIPMENT & S	UPPLIES			
Purchase Order #	t:	Produc	t/Service Pr	ovided: Pos	stage equipmen	nt & Supplies
Supplier (Compa	ny) Name: PITNEY BOWES, INC.					
Contact Name: Pe			ct Phone #:	(800)203	- 2581	
	SECTION 1: S	UPPLIER EV	ALUATION			1933 7 AV
1.) How would y	ou rate the supplier in the follow	ing areas?				
		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Overall custome	r service	- 7 <u></u>				
Delivery as schee	duled or promised			X		
		1	2		3	4
		Not	Somewha	Sat	isfied Ver	y Satisfied
		Satisfied	Satisfied			
2.) How satisfied	d are you with the supplier?				\times	
3.) Will you use	this supplier again?	Yes	No			
A Contraction of	SECTION 2: PRODU	JCT / SERVIO	E EVALUAT	ION		
4.) Based on the	areas below, how would you rat	e the produ	cts/services	provided	with this Bid?	
,		1	2	3	4	5
		Poor	Fair	Good	Very Good	Excellent
Compliance with	specifications				X	
-	ared to similar products/services				X	
6 1410 14246 - 44 6		H	H	X	Ē	
Prices as compar	ed to similar products/services		1		3	
		Ven	Unlikely	Unlikely	Probably	Definitely
5.) Would you p	urchase this product/service again	Set and a set of the s			Π,	K
5., Would you p						
	SECTION 3: E			185 ° 185 og		
Please share an	y additional information regarding th	is supplier or	the products	/ services p	rovided. If this	supplier's
	nance is unsatisfactory, please tell us		ay attach an a	additional si		. //
0/	e no problem) with	- Par	eg K	we a	itall
I have	- no period			/ /0		
	EVALUATION	FORM CON	PLETED BY:			
Name: T.		1		and the second s	one #: (7)	322-1404
Name: Juan School/Departm		1944	1			1-11-1
	110nal gy /	1+1;Sh	Schol		1.1.	
Participant's Sign	nature: perul //	h	D	ate:	1/13/19	
	1900000			- /		242
02.2017. V. PWS #	1				Pa	age 1 of 1



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Bid #: Bid Title: Purchase Order #: Product/Service Provided: Supplier (Company) Name: Contact Phone #: () - Contact Name: Contact Phone #: () - SECTION 1: SUPPLIER EVALUATION 1.) How would you rate the supplier in the following areas? 1 2 3 4 5 Overall customer service 1 2 3 4 5 Delivery as scheduled or promised 1 2 3 4 Not Somewhat Satisfied Satisfied Very Satisfied 2.) How satisfied are you with the supplier? 1 2 3 4 Section 2: PRODUCT / SERVICE EVALUATION Delivery as chairs again? Yes No				
Supplier (Company) Name: Contact Name: Contact Phone #: () - SECTION 1: SUPPLIER EVALUATION 1.) How would you rate the supplier in the following areas? 1 2 3 4 5 Poor Fair Good Very Good Excellent Overall customer service 1 2 3 4 Delivery as scheduled or promised 1 2 3 4 Not Somewhat 3 4 5 2.) How satisfied are you with the supplier? I <t< td=""></t<>				
Contact Name: Contact Phone #: () - SECTION 1: SUPPLIER EVALUATION 1.) How would you rate the supplier in the following areas? 1 2 3 4 5 Poor Fair Good Very Good Excellent Overall customer service 1 2 3 4 Delivery as scheduled or promised 1 2 3 4 Not Somewhat 3 4 Satisfied Satisfied Very Satisfied 2.) How satisfied are you with the supplier? 1 1 1 3.) Will you use this supplier again? Yes No No				
SECTION 1: SUPPLIER EVALUATION 1.) How would you rate the supplier in the following areas? 1 2 3 4 5 Poor Fair Good Very Good Excellent Overall customer service Image: Color of the service Delivery as scheduled or promised Image: Color of the service 1 2 3 4 Image: Color of the service <				
1 2 3 4 5 Poor Fair Good Very Good Excellent Overall customer service I				
1 2 3 4 5 Poor Fair Good Very Good Excellent Delivery as scheduled or promised 1 2 3 4 1 2 3 4 5 Delivery as scheduled or promised 1 2 3 4 1 2 3 4 1 2 3 4 1 2 3 4 Satisfied Satisfied Very Satisfied 2.) How satisfied are you with the supplier? 3 4 3.) Will you use this supplier again? Yes No				
Poor Fair Good Very Good Excellent Overall customer service I I I I I Delivery as scheduled or promised I				
Overall customer service I </td				
Delivery as scheduled or promised 1 2 1 2 1 2 3 4 Not Somewhat Satisfied Satisfied 2.) How satisfied are you with the supplier? I 3.) Will you use this supplier again? Yes				
1 2 3 4 Not Somewhat Satisfied Very Satisfied 2.) How satisfied are you with the supplier? Image: Control of the supplier? Image: Control of the supplier? Image: Control of the supplier? 3.) Will you use this supplier again? Yes No				
Not Somewhat 3 4 Not Somewhat Satisfied Satisfied Satisfied Satisfied Satisfied Very Satisfied 2.) How satisfied are you with the supplier? Image: Comparison of the supplier? Image: Comparison of the supplier? 3.) Will you use this supplier again? Image: Yes No				
Satisfied Satisfied Satisfied 2.) How satisfied are you with the supplier? Image: Satisfied Image: Satisfied 3.) Will you use this supplier again? Image: Yes No				
2.) How satisfied are you with the supplier? Satisfied 3.) Will you use this supplier again? Yes				
3.) Will you use this supplier again?				
SECTION 2: PRODUCT / SERVICE EVALUATION				
4.) Based on the areas below, how would you rate the products/services provided with this Bid?				
Poor Fair Good Very Good Excellent				
Compliance with specifications				
Quality as compared to similar products/services				
Prices as compared to similar products/services				
Very Unlikely Probably Definitely				
5.) Would you purchase this product/service again?				
SECTION 3: END USER COMMENTS				
Please share any additional information regarding this supplier or the products / services provided. If this supplier's				
performance is unsatisfactory, please tell us why. You may attach an additional sheet if necessary.				
EVALUATION FORM COMPLETED BY:				
Name: Title: Contact Phone #: () -				
School/Department:				
Participant's Signature: Beatriz Miranda Date:				

Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used evaluation of future bids or proposals submitted by this supplier.	l in the
Please return completed evaluation forms to:	
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7720 West Oakland Park Boulevard, Suite 323	
Sunrise, Florida 33351	
For assistance with this form contact us at	
(754) 321-0505 or <u>CLICK HERE</u> to send us an email (include the words Supplier/Product Evaluation Form in the s	ubject)
GENERAL INFORMATION	
Bid #: 57-105N Bid Title: MAIL PROCESSING EQUIPMENT & SUPPLIES	
Purchase Order #: Product/Service Provided: Postage equipment & Su	upplies
Supplier (Company) Name: PITNEY BOWES, INC.	
Contact Name: Peter Tuccio Contact Phone #: (800) 203 - 2581	
SECTION 1: SUPPLIER EVALUATION	State of the second
1.) How would you rate the supplier in the following areas?	_
1 2 3 4 Poor Fair Good Very Good Exc	5 ellent
Overall customer service	
Delivery as scheduled or promised	
Not Somewhat 3 4	-
Satisfied Satisfied Very Sat	isfied
2.) How satisfied are you with the supplier?	1
3.) Will you use this supplier again?	•
SECTION 2: PRODUCT / SERVICE EVALUATION	
4.) Based on the areas below, how would you rate the products/services provided with this Bid?	
1 2 3 4	5
	ellent
Compliance with specifications	
Quality as compared to similar products/services	
Prices as compared to similar products/services	
	4
그는 것 같은 것 같	nitely
5.) Would you purchase this product/service again?	
SECTION 3: END USER COMMENTS	
Please share any additional information regarding this supplier or the products / services provided. If this suppli performance is unsatisfactory, please tell us why. You may attach an additional sheet if necessary.	er's
	•
EVALUATION FORM COMPLETED BY:	
Name: Kobiw abourin Title: BKKP TTT Contact Phone #: 154 32	21823
School/Department: Pauladian High	
Participant's Signature: Date: 9-13-19	•
Auvinsaceuren 11011	
02,2017. V. PWS #1 Page 1 (of 1

The purpose of this evaluation form is to rate a supplier's performance. This form will aid the Procurement & Warehousing

Supplier/Product Evaluation Form

PROCUREMENT & WAREHOUSING SERVICES

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA



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Procurement & Warehousing Services Department (TSSC Building) 7720 West Oakland Park Boulevard, Suite 323 Sunrise, Florida 33351

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	GENERAL	INFORMATION			
	id Title: MAIL PROCESSING EQU	······································			
Purchase Order #:7520	······································	Product/Service	Provided: Pos	tage equipmer	nt & Supplies
	ame: PITNEY BOWES, INC.				
Contact Name: Peter Tu		Contact Phone		- 2581	
		PPLIER EVALUATIO	N		
1.) How would you ra	te the supplier in the followir	ig areas?			
		_1 2	3	4	5
.		Poor Fair	Good	Very Good	Excellent
Overall customer servi					
Delivery as scheduled	or promised				
	an a	1 ²²		3	4
		Not Somew	Sati	sfied Ver	y Satisfied
2) How estisfied are .		atisfied Satisf			
· · · · · · · · · · · · · · · · · · ·	ou with the supplier?				
3.) Will you use this su		Yes No			
	SECTION 2: PRODUC				
4.) Based on the areas	below, how would you rate	the products/service	es provided v	vith this Bid?	
		1 Mar. 2	anina S alahan	4	5
		Poor Fair	Good	Very Good	Excellent
Compliance with speci		anin mising airs airs ar			
Quality as compared to similar products/services					
Prices as compared to similar products/services					
		1	2	3	4
		Very Unlikely	Unlikely	Probably	Definitely
5.) Would you purchas	se this product/service again	· 🗌			
	SECTION 2. EN				
Please share any addit	ional information regarding this :	D USER COMMENT		ovidad If this	
	<u>s unsatisfactory, please tell us w</u>				
				· · · · · · · · · · · · · · · · · · ·	
		ORM COMPLETED B			
Name: Gabriele Villiotis	Title: BudgetKeeper		Contact Pho	ne#: (754)3	323 -4304
School/Department:Sil	ver Trail Middle School 3331	~			1 ¹¹ (1110-1011)
Participant's Signature	<i>////</i>		Date: 09/13/2	2019	
	/~/~/				
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PROCUREMENT & WAREHOUSING SERVICES	Supplier/Product Evaluation Form
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA	** -
Services Department in determining the quality of goods and/	performance. This form will aid the Procurement & Warehousing for services purchased for the District. Your input will be used in the roposals submitted by this supplier.
Please return comple	eted evaluation forms to:
	Services Department (TSSC Building)
	Park Boulevard, Suite 323
Sunrise,	Florida 33351
	this form contact us at
(754) 321-0505 or CLICK HERE to send us an email (inclu	ide the words Supplier/Product Evaluation Form in the subject)
GENERAL I Bid #: 57-105N Bid Title: MAIL PROCESSING EQUIP	NEORMATION MENT & SUPPLIES
Purchase Order #:	Product/Service Provided: Postage equipment & Supplies
Supplier (Company) Name: PITNEY BOWES, INC.	
Contact Name: Peter Tuccio	Contact Phone #: (800) 203 ~ 2581
SECTION 1: SUP	PLIER EVALUATION
1.) How would you rate the supplier in the following	g areas?
	1 2 3 4 5
	Poor Fair Good Very Good Excellent
Overall customer service	
Delivery as scheduled or promised	
	1 2 2
	Not Somewhat Satisfied Very Satisfied
	atisfied Satisfied
2.) How satisfied are you with the supplier?	
3.) Will you use this supplier again?	Yes No
SECTION 2: PRODUCT	/ SERVICE EVALUATION
4.) Based on the areas below, how would you rate t	he products/services provided with this Bid?
	1 the 20 cm of 30 cm 4 5
	Poor Fair Good Very Good Excellent
Compliance with specifications	
Quality as compared to similar products/services	
Prices as compared to similar products/services	
	1 2 3 4
	Very Unlikely Unlikely Probably Definitely
5.) Would you purchase this product/service again?	
	USER COMMENTS
	upplier or the products / services provided. <u>If this supplier's</u> <u>hy.</u> You may attach an additional sheet if necessary.
performance is unsursided by piedse tell us wi	ite. I wa may attash an baattohat meter hinetessaly.
EVALUATION FO	RM COMPLETED BY:
Name: Linda McGrail-Jaime Title: Budgetkeeper	Contact Phone #: (754) 322 -1272
School/Department:Coral Glades High School	
Participant's Signature:	Jame Date: 9/25/19
may My man	<u> </u>
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