

SCHOOL BOARD OF OKALOOSA COUNTY
INTER-OFFICE VENDOR COMPLAINT FORM

FROM: _____ **DATE:** _____
SCHOOL / DEPARTMENT

TO: PURCHASING DEPARTMENT
BAY AREA ADMINISTRATION
120 LOWERY PLACE SE
FT WALTON BEACH, FL 32548
PH: (850) 833-7668 FAX: (850) 833-6327

VENDOR NAME: _____

TYPE OF PROBLEM: (CHECK ONE)

PURCHASE ORDER ____ CONTRACTED SERVICE ____ OTHER ____

REFERENCE NUMBERS:

PURCHASE ORDER #: _____ BID # _____

DESCRIBE PROBLEM BELOW:

SIGNATURE: _____

PURCHASING USE ONLY:
