



## CITY OF HOLLYWOOD, FLORIDA

### OFFICE OF PROCUREMENT AND CONTRACT COMPLIANCE

#### Department/Office Contract Renewal Evaluation Form

Date: 03/04/2024	
Department/Office: City Clerk	Division/Area: Records and Archives
Contact Person: Edgar Cristo	Title: Records Manager
Contact Phone Number: 954-921-3545	Contact Email Ecristo@Hollywoodfl.org
Purchase Order/Blanket Purchase Order #: PA600343	
Contract Expiration Date: 07/03/2024	
Vendor: Postal Center International, Inc	Contact Person: Eugene Saint Jean
Contact Phone Number: 800.430.7241 Ext.2950	Contact Email: eugenese@surfpci.com
Good/Service: Mail Services	Solicitation #:

1. How would you rate the quality of goods/services?

☐ Excellent ☒ Good ☐ Satisfactory ☐ Poor

2. How would you rate the courteousness of the vendor's personnel?

☒ Excellent ☐ Good ☐ Satisfactory ☐ Poor

3. With regards to the goods or services provided, how satisfied are you with the following items?  
(Please check one per category)

	Excellent	Good	Satisfactory	Poor
Overall Quality	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frequency of Contact	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness to request(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Are all goods/services on the contract being performed at the agreed upon price, time and terms?

☒ Yes ☐ No

If no, please explain?

5. If you contacted the vendor, were all your questions and/or issues resolved to your complete satisfaction?

☒ Yes ☐ No ☐ Did not need to contact the vendor

If no, please explain?

6. Has invoicing been timely, accurate and in accordance with the contract?

☒ Yes ☐ No

If no, please explain?

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7. Does the Department/Office recommend renewing a contract based upon the available renewal options when the current agreement expires?

☒ Yes ☐ No

If no, please explain?

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8. Please state any additional comments about your experience with this vendor and the goods/services provided:

**It has been a pleasure to work with PCI. Eugene, Alison, and Jide are always there when I needed them.**

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Department/Office Director's Name:

*Patricia A. Cerny*

Department/Office Director's Signature:

*Patricia A. Cerny*