

PERSONAL COMMERCIAL SOLICITATION EVALUATION

PRIVACY ACT STATEMENT

AUTHORITY: Section 301 of Title 5 U.S.C.

PRINCIPAL PURPOSE(S): Information on this form will be used to document the experience with the sales representative who provides the Service member with this evaluation. This information will be maintained at the installation level. It may be forwarded to officials within the Department of Defense responsible for oversight of personal commercial solicitation practices if further action is required. These officials may need to make contact concerning the solicitation described in questions 2, 3, and 4. Service member response will help ensure sales representatives conduct themselves fairly and in accordance with DoD Instruction 1344.07. This information will be maintained as part of a case file in the event proceedings are considered necessary to deny or withdraw permission for the sales representative and/or the company to solicit on one or more installations.

ROUTINE USE(S): None.

DISCLOSURE: Voluntary. There is no consequence to the Service member for not completing this evaluation.

Please take a moment to respond to the following questions concerning your experience with the sales representative who provided you this evaluation. Your response will help ensure sales representatives conduct themselves fairly and according to the policies outlined in DoD Instruction 1344.07.

When you have completed this evaluation, please send it to the Installation Commander or his/her designated representative. Please do not give the completed evaluation back to the sales representative to mail for you.

1. SALES REPRESENTATIVE WHO CONTACTED YOU AND HIS OR HER COMPANY

a. NAME OF SALES REPRESENTATIVE	b. COMPANY NAME
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2. MAKING THE APPOINTMENT <i>(Mark (X) "Yes" if any of the following are true)</i>	YES	NO
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a. The sales representative <u>failed to</u> make an appointment in advance to see me.	<input type="checkbox"/>	<input type="checkbox"/>
b. The <u>initial</u> contact to schedule an appointment occurred <u>while I was on duty</u> (during normal duty hours).	<input type="checkbox"/>	<input type="checkbox"/>
c. My <u>initial</u> contact with the sales representative was in response to a notice in an official installation bulletin, marquee, announcement or newsletter that said he or she would be on the installation during a specific time or at a specific place.	<input type="checkbox"/>	<input type="checkbox"/>
d. A superior in my chain of command advised or required me to meet with the sales representative.	<input type="checkbox"/>	<input type="checkbox"/>
e. The sales representative made <u>initial</u> contact with me via a government phone, fax, or computer.	<input type="checkbox"/>	<input type="checkbox"/>

3. TIME AND PLACE OF THE APPOINTMENT <i>(Mark (X) "Yes" if any of the following are true)</i>	YES	NO
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a. The sales presentation took place on the installation <u>while I was on duty</u> (during normal duty hours).	<input type="checkbox"/>	<input type="checkbox"/>
b. The sales presentation took place during a mandatory group meeting with other DoD personnel or as part of a military service sponsored financial education program.	<input type="checkbox"/>	<input type="checkbox"/>
c. The sales presentation took place in an unauthorized or restricted area.	<input type="checkbox"/>	<input type="checkbox"/>
d. The sales representative used an on-base facility as a showroom to display his or her product or services. (This does not include displays conducted by military family members in their on-base residence.)	<input type="checkbox"/>	<input type="checkbox"/>

4. CONDUCT DURING THE APPOINTMENT <i>(Mark (X) "Yes" if any of the following are true)</i>	YES	NO
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a. I was unduly pressured to buy the product or service.	<input type="checkbox"/>	<input type="checkbox"/>
b. I was not given the adequate facts, or was induced to purchase based on factors other than the merits of the product or service.	<input type="checkbox"/>	<input type="checkbox"/>
c. I was offered an incentive to meet with the sales representative, purchase the product or service, or drop a competing offer.	<input type="checkbox"/>	<input type="checkbox"/>
d. The sales representative is a DoD employee of senior rank.	<input type="checkbox"/>	<input type="checkbox"/>
e. The sales representative implied that he or she is sponsored or endorsed by the military, the installation or my unit. (For example, the representative used an official or unofficial title such as "unit advisor" or "installation consultant.")	<input type="checkbox"/>	<input type="checkbox"/>
f. The sales representative had a military pay allotment or direct deposit form in his/her possession, or requested "MyPay" account access or PIN number.	<input type="checkbox"/>	<input type="checkbox"/>

5. YOUR CONTACT INFORMATION

a. NAME <i>(Last, First, Middle Initial)</i>	b. HOME TELEPHONE NUMBER <i>(Include area code)</i>	c. WORK TELEPHONE NUMBER <i>(Include area code)</i>
d. E-MAIL ADDRESS	e. UNIT ADDRESS	