

# Contractor Quality Control Form

Please fill this form out ELECTRONICALLY and email a copy to XXXXXX

## 1. Summary Table

Cttee	Sitting Date	QC by	Contractor	<u>Timeliness</u>				<u>Errors</u>							
				Start Time	Finish Time	Contractor Deliver Time	Hansard Deliver Time	Count total for each type of error and enter in relevant box							
				Format: dd/mm/yy hh:mm (e.g. 14/12/10 15:22)				[ CAT 1 ]	[ CAT 2 ]	[ CAT 3 ]					
								ID	Omission	Name	Mishear	Misreport	Typo	Inconsistency	Proofing

## 2. Error Details

Error types are categorised into:

**Category 1:** ID, Omission

**Category 2:** Name, Mishear, Misreport

**Category 3:** Typo, Inconsistency, Proofing

Please list all **CAT 1, 2 and 3** errors, **copying and pasting the relevant sentence/s** to show the error and suggested correction. Please detail the error in the following sequence: **question number**, category and type of error; copy of error and correction; brief description of nature and/or consequences of the error.

## 3. Comments on reporting

Comments on accuracy:

Comments on readability, punctuation and sentence making:

**Overall assessment:**