



Member Profile

Member/Agency _____

Mailing Address _____ County _____

City _____ State _____ Zip _____

Phone Number _____ Website Address _____

(For different, or multiple ship to addresses please attach a separate list)

Shipping Address _____

City _____ State _____ Zip _____

Do orders placed by your Agency personnel require a purchase order number? Yes No

If no, what is the maximum purchase amount that does not require a PO? \$ _____

Add Contact Information on Applicable Agency Personnel:

Superintendent/Executive Director/CEO	Phone Number	Maintenance Supervisor	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Business Manager/City Manager/CFO	Phone Number	Transportation Supervisor	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Purchasing Manager	Phone Number	Athletic Director/Parks Department	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Buyer/City Clerk	Phone Number	Facilities/Public Works Manager	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Accounts Payable	Phone Number	IT Manager	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Food Service Administrator	Phone Number	Warehouse Manager	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number
Operation/Custodial Supervisor	Phone Number	Print Shop Manager	Phone Number
e-mail Address	Fax Number	e-mail Address	Fax Number

Your Name _____ Phone _____ Date _____