98. Vendor Information Sheet	
Name of Firm	Phone
Address	
Headquarters Office	
	dividual 🗖 Other
Date Business Started	
President/Principal Owner	
Other Officers	
If so, when and what type?	or services to our company before? Yes No
List current customers and their appro-	ximate purchase value
List trade references (name, phone)	
List bank references (name, branch, ph	none)
	D /
Completed by	Date
Approved by	Date