

New Vendor Profile

COMPANY INFORMATION & REPRESENTATION	
Vendor:	Remit to Address:
Vendor Rep:	
Phone:	Fax:
Broker:	Address:
Broker Rep:	
Phone:	Fax:
ORDER REQUIREMENTS & PRICING	
Minimum Order:	Delivery Fees: 🗆 Yes \$ 🗆 No
Lead Time:	Bracket Pricing:
Payment Terms:	Pick-up Allowance:
F.O.B. Points:	First Order Extended Terms: 🗌 Yes 🗌 No
EXPECTATIONS & NEEDS	
Golbon Supplier: 🗆 Yes 🗆 No	PO Transmission: 🗆 Email 🗆 EDI 🗆 Fax
New Product Guarantee: 🗌 Yes 🗌 No	Email:
Feature Allowances:	Fax:
Bill Back Method: Deduct Check	Supplier Review: Quarterly Annually
SALES & MARKETING SUPPORT	
Marketing Program: 🗌 Yes 🗌 No	Product Training:
Trade Show: 🗌 Yes 🗌 No	Sales Team Presentation: Yes No
Bookings: 🗌 Yes 🗌 No	DSR Spiffs:
Promotional Schedule: Yes No	Customer Rebates:
Product Sampling:	Customer Coupons: 🗌 Yes 🗌 No
POS Materials:	
PROTECTION	
Proof of insurance: 🛛 Yes 🗆 No	HACCP: 🗆 Yes 🗆 No
USDA Food & Safety Grant of Inspection: Yes No	*Update certificate when applicable.
Signature:	Date: