



CUSTOMER PROFILE

For Questions concerning your account

Call: 508.394.5022

Fax: 508.394.0992

P. O. BOX 1475, 485 ROUTE 134, HARNEY'S PLAZA, SOUTH DENNIS, MA 02660

GENERAL INFO

SALES PERSON: _____

DATE: _____

CUSTOMER INFORMATION

Business Name _____

Contact Name # 1 _____

Contact Name _____

Phone () _____

Emergency Phone () _____

Fax () _____

E-mail _____

Kitchen Manager _____

Individual Placing Orders _____

Accounts Payable _____

BILL TO:

Name _____

Address _____

City _____ State _____ Zip _____

SHIP TO:

Name _____

Street Address _____

City _____ State _____ Zip _____

DELIVERY INFORMATION

Receiving Hours _____

Days Closed _____

Delivery Days _____

Requested Delivery Time _____