BASSIAN FARMS

New Customer/Vendor Form

Request By Date Submitted Input By								
	Acct Name Billing Address Shipping Address							
INPUT DATA								
	Contacts Chef (1)	Name	Phone					
	Chef (2)							
	A-P (3)							
	Routing: Time Window Master PO							
	Driver Inst							
	Key or Code							
	Credit App Status:							
	Group/Chain Master Acct							
	Invoice Comments							
	Picking Comments							
OFFICE	Customer Code Group/Chain Code							
	Assigned Route							
	Assigned Stop							
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	Credit Terr	ns	Statement Type					
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