



LOCAL VENDOR  
THREE (3) DAYS ONLY

WITH CITY UTILITY ACCOUNT: FREE  
WITHOUT CITY UTILITY ACCOUNT: \$3.00

COMPANY NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

FEDERAL TAX ID #: \_\_\_\_\_ DL#: \_\_\_\_\_

LOCATION: \_\_\_\_\_

PRODUCT(S) TO BE SOLD: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

CUSTOMER PRINT NAME: \_\_\_\_\_

CUSTOMER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

RECEIPT#: \_\_\_\_\_ FEE PAID: \_\_\_\_\_