



**Free Listing Form  
Product Source Guide 2013**

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Please provide us with your current listing information. This form **MUST** be signed before it is returned. This will ensure your **FREE** listing in the **PRODUCT SOURCE GUIDE 2013**.

**ACT NOW!! This may be your last chance!! Please mail or FAX forms by August 17th!**

**CURRENT INFORMATION**

Company: \_\_\_\_\_  
Division: \_\_\_\_\_  
Address1: \_\_\_\_\_  
Address2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Corporate Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Toll Free: \_\_\_\_\_  
Email: \_\_\_\_\_  
Website Address: \_\_\_\_\_  
Mailing Contact: \_\_\_\_\_

**CORPORATE INFORMATION:** Please provide your company's name, address and phone(s) exactly as you wish it to appear in the **PRODUCT SOURCE GUIDE 2013**.  
The mailing contact will be the person to receive this form for the next year's Product Source Guide.

Use additional sheet(s) to report information if there is not enough room. **PLEASE CLEARLY MARK THE APPROPRIATE RESPONSE.**

1) Please check your company's Primary Function Status.

( ) Associations ( ) Retail Group  
( ) Wholesaler/Distributor ( ) Sales Agent  
( ) Manufacturer ( ) Service

2) Please list your **GEOGRAPHICAL AREA SERVED**. Please use **US/Canada** mail code abbreviations.

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

**IMPERATIVE: This form MUST be signed and returned, even if you have no changes.**

( ) **YES! Please contact me for advertising in the Product Source Guide.**

**PLEASE RETURN IMMEDIATELY!**

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

## Free Listing Form Product Source Guide 2013

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3) Provide the name and title up to four (4) **KEY EXECUTIVES** in your company. (Names provided without titles will not be printed.) We will only list four.

	Exec1	Exec2	Exec3	Exec4
Name				
Title				
Phone				
Fax				

4) Please provide the full address and phone number of any **BRANCH OFFICES** you have. Please submit information **ALPHABETICALLY** by **STATE**. If you need more room, please use an additional sheet of paper.

	Country	State	City	Zip	Address1	Phone	Toll Free	Fax
1								
2								
3								
4								
5								

5) **Product Listing:** Please list any products your company supplies, including any appropriate trade/brand name(s). Please use the enclosed sheet of category codes to update your listing. If you need more room, please use a separate sheet of paper. Please follow the example format for your listings.

	Description	Line	Product ID
Example:	Accessories, Decorative	(fountain modules, murals, floor medallions)	0080
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

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Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_