

Amazon Fulfillment Services Supplier Inquiry Form

SUPPLIER INFORMATION					
SUPPLIER NAME					
STREET ADDRESS					
CITY		STATE		ZIP	
PHONE NUMBER		FAX NUMB	ER	1	
DUNS NUMBER			1		
WEBSITE					
NUMBER OF EMPLOYEES		2012 SALES			
PRODUCT/SERVICE CATEGORY:					
STATES/REGIONS WHERE YOU CURRENTLY CONDUCT BUSINESS					
ADDITIONAL INFORMATION					
SUPPLIER CONTACT INFORMATION					
NAME					
TITLE					
EMAIL					
PHONE NUMBER		MOBILE NUMBER			