

RETAILERS REDEEMING MANUFACTURER COUPONS



STANDARD QUESTIONNAIRE

The purpose of this questionnaire is to provide coupon-issuing manufacturers with data on retailers who redeem coupons. All information submitted will be held strictly confidential. This coupon questionnaire must be filled out completely and on file before payment can be issued for coupon submissions.

A separate questionnaire must be prepared for each entity submitting coupons for redemptions (i.e. individual store, division or company).

Name: _____
 Address1: _____
 Address2: _____
 City: _____ St: _____ Zip: _____

Return completed Questionnaire to:

RPR, Inc., MRIS' Customer Service Company
 P.O. Box 724
 Blairstown, NJ 07825
 Or fax to: 1-888-302-8952

All PO Boxes must include Physical Address

A. Type of entity:

- Proprietorship
- Partnership
- Corporation
- Division

Address _____
 City _____ State _____ Zip _____ Phone _____
 EMail _____ Fax _____

B. Entity/Entities for which coupons will be submitted:

- Single store
- Total company
- Division

Number of stores _____
 Number of stores _____

C. Date Business Started: _____

D. How did you obtain this business:

- Purchased
- Started New
- Merger

E. _____
 Company Trade Name or Store Name

F. _____
 Former Store Name (if applicable)

G. _____
 Tax identification or social security number

H. _____
 State of incorporation (if applicable)

I. Wholesale supplier(s) (if applicable)

MAIN

Name _____
 Address _____
 City _____ State _____ Zip _____
 Telephone _____
 Your Customer No. _____

Name _____
 Address _____
 City _____ State _____ Zip _____
 Telephone _____
 Your Customer No. _____

J. Estimated Gross Annual Sales \$ _____

K. Number of Employees _____ Full Time _____ Part Time _____

