SACCANI DISTRIBUTING COMPANY CUSTOMER PROFILE NEW ACCOUNT CHANGE OR ADD INFO OLD ACCOUNT#____ CLOSE ACCOUNT OLD DBA NAME ACCOUNT NUMBER FOR CHANGES ONLY LICENSEE LEGAL NAME____ D.B.A. STREET CITY____STATE__ZIP CODE____ PHONE #()____ BUYER____LICENSE #____ DELIVESTRUSINES DICATION: FRONT BACK SIDE RECEIVT123 Main StES SPECIAL INSTRUCTIONS CA DELIVERY DAY: MONDAY / TUESDAY / WEDNESDAY / THURSDAY / FRIDAY CREDIT APPLICATION: YES / NO STORE ETHNICITY: COUNTY 1-ON SALE 2-OFF SALE DRAFT STATUS: OURS/THEIRS/OURS & THEIRS/ OTHER MARKET TYPE: BAR/RESTAURANT/GROCERY/DELI/CONVENIENCE/OTHER BUYING: YES/NO ROUTE# SALESPERSON ACCOUNT