WHOLESALE GROCERS JETRO CASH & CARRY

2021 SELF DEMO PROGRAM INVOICE & PRODUCT INFORMATION SHEET

Where Restaurants Shop RESTAURANT DEPOT

V#A21-475647

BB NUMBER: _____ **VENDOR #:** _____ **DATE:** _____

VENDOR NAME: _____ **CONTACT NAME:** _____

PHONE NUMBER: _____ **CONTACT EMAIL:** _____

STORE INFORMATION:

(ENTER THE # OF DEMOS IN EACH LOCATION - SUBJECT TO AVAILIBILITY)

NF INDICATES NONFOOD OR UNOPENED FOOD PRODUCT DEMOS ONLY

INDICATES NEW 2021 LOCATIONS - VERIFY OPEN BEFORE SCHEDULING

EAST

NY METRO

110	111	112	121	144	161	163	167	171 (NF)	173	194	801	803	806	807	818	819	821	832	874	895

PHILLY

116	804	808	810	852

NEW ENGLAND

150	160	802	811	814	815	820 (NF)	822	834	882 (NF)

MID ATLANTIC

125	185	805	809	812	816	817	823	827	828	855

MIDWEST

MIDWEST

430	435	450	451	454	455	460	462	467	468	542	546	547	548	578	579

OHIO VALLEY

433	434	449	452	456	463	559	564	572	583	584

MID STATES

401	412	415	416	419	420	421	424	427	428	431	453	457	461	565	566

FLORIDA

402	411	413 (NF)	414	417	418	422	425	426	458	523	576	586

WEST

SOCAL

119	122	130	141	143	153	154	156	157	601	602	603	610	628

NORCAL

136	145	162	650	659	663	664

CO/SLC

652	653	660

TEXAS/OKC

168	169	170	175	701	702	703	706	707	708	709	711

SOUTHWEST

137	138	139	704

PNW

506	651	655	658	661

LOUISIANA

453	457

PRODUCT DEMO INFORMATION:

PREFERRED MONTH(S): JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

ITEM#: _____ **UPC#:** _____ **DESCRIPTION:** _____ POS COOKING

ITEM#: _____ **UPC#:** _____ **DESCRIPTION:** _____ POS COOKING

ITEM#: _____ **UPC#:** _____ **DESCRIPTION:** _____ POS COOKING

SELF DEMO RATE INFORMATION*

* Product used in demonstrations is not included in the rate and will be billed via a store-level adjustment voucher (AV).

Demo / Site Fee

$ 75 per event

_____ **DEMOS COMMITTED**

***** REQUIRED *****

All personnel performing demos MUST provide their Food Handler Certificate, agree to our Health & Safety protocol, and provide Certification of Insurance before they can perform demos.

TOTAL TO BE PAID $ 0

ADJUSTMENTS: 0

PAYMENT METHOD: Deduct

SPECIAL INSTRUCTIONS:

By signing below, you authorize Restaurant Depot / Jetro Corporate to automatically deduct payments quarterly for fees incurred by demonstrations conducted in our warehouses. The amount committed is non-refundable.

VENDOR SIGNATURE: _____ **BUYER SIGNATURE:** _____

VENDOR PRINT: _____ **BUYER PRINT:** _____