|  |  |  |
| --- | --- | --- |
|  | **Date:** |  |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Location Information | | | | | | | | | | | | | | | | |
|  | Customer No: | | |  | | | | | Customer Name: | | | |  | |  | |
|  | City: | |  | | | | State: |  | | | Region Code: | |  |  | | |
|  | Branch Manager: | | | |  | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
|  | | Employee Name | | | | Job Title | | | | Email Address | | | | Cell Phone | | Trained | |
| 1 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 2 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 3 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 4 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 5 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 6 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 7 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 8 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 9 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 10 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 11 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 12 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 13 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 14 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 15 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 16 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 17 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 18 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 19 | |  | | | |  | | | |  | | | |  | | Yes / No | |
| 20 | |  | | | |  | | | |  | | | |  | | Yes / No | |
|  | | | | | | | | | | | | | | | | |

*\*Please fill in complete company roster regardless if they have been trained or not\**

|  |  |  |  |
| --- | --- | --- | --- |
| Territory Manager: |  | Date: |  |