



SUPPLIER CONTACT LIST

Date: _____
Supplier Name: _____
Customer Type: _____ Residential _____ Commercial _____ Both

To appear on customer reference sheet:

Address: _____
Telephone: _____
E-mail: _____
Contact Name: _____
Supplier Web Address: _____

Enrollment/Usage Contact: Name _____
Address _____
Telephone _____
Fax _____
E-mail address _____

Nomination/Balancing Contact: Name _____
Address _____
Telephone _____
Fax _____ Cell _____
Instant Message (IM) Address _____
E-mail address _____
Alternate Contact _____

Billing Information: Contact Person _____
Billing Address _____
Telephone _____
Fax _____ Cell _____
E-mail Address _____

Treasury/Financial Info: Contact Person _____
Address _____
Telephone _____
Fax _____ Cell _____
E-mail address _____