



# SUPPLIER FORM

Please complete this page and mail to [info@baroness-foods.com](mailto:info@baroness-foods.com)  
(or fax to +852 8239 6442)

Updated 13 Apr 2006

## Company

Name: \_\_\_\_\_  
Adres: \_\_\_\_\_  
Adres: \_\_\_\_\_  
Zip: \_\_\_\_\_  
City: \_\_\_\_\_  
Country: \_\_\_\_\_  
  
Tel: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Website: \_\_\_\_\_  
  
VAT nr: \_\_\_\_\_  
Co. Reg. Nr: \_\_\_\_\_

## Contact

Name: \_\_\_\_\_  
Function: General Manager  
Tel: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Function: Financial Manager  
Tel: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Function: Quality Manager  
Tel: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Function: Sales Manager  
Tel: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
E-mail: \_\_\_\_\_

## Bank Details

Bank: \_\_\_\_\_  
Location: \_\_\_\_\_



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Account: \_\_\_\_\_  
Swift: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Tel/Mail: \_\_\_\_\_

**Payment Terms** Payment: \_\_\_\_\_  
Other: \_\_\_\_\_

**Products** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(and/or attach your own productlist)

**Certification(s)** HACCP YES / NO  
ISO YES / NO  
EFSIS YES / NO  
BRC YES / NO  
ORGANIC YES / NO  
NOP YES / NO  
Other: \_\_\_\_\_

**Remarks** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Prepared by: \_\_\_\_\_  
Function: \_\_\_\_\_  
Date: \_\_\_\_\_

Sign & Stamp:

<b>For use by Baroness Foods only</b>