Store Name & Contact Info HERE

Featured Vendor of the Month Program

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| **Vendor:** | | **Month:** | | **EndCap #:** | |
| **Contact Person:** | | **Phone & Email:** | | | |

| BRAND NAME | PRODUCT | FLAVOR | SIZE | BUY-IN DATE | UPC | WHSLE PRICE | RETAIL PRICE | DISC WHSLE % OFF | SALE PRICE | AMT ORD | TOTAL COST | SOLD $ | QNTY SOLD | RE ORDER |
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