



RockTenn

Prospective Vendor Form

Contact Information

Contact Name and Title: _____

Company Name: _____

Address: _____

E-mail: _____

Phone number: _____

Fax number: _____

Company Information

Please tell us about your products and services.

Provide us with a short list of your present clients.

_____	_____
_____	_____
_____	_____
_____	_____

Upon receipt, we will review the shared information and if there is an opportunity to apply your services to our current focus, we will contact you. **Fax completed form to Corporate Purchasing at 678-291-7550.**