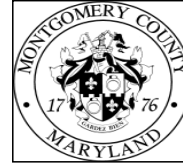


Montgomery County, MD
Alcohol Beverage Services



NEW ITEM SETUP FORM

SUPPLIER ITEM NUMBER:	ABS ITEM NUMBER
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SPECIAL ORDER LIQUOR/WINE: Please attach the front and back of the label for this product and submit with this form.

PRODUCT NAME (As it will appear on your invoice):

BRAND:	BRAND OWNER:	BROKER:	CASE/KEG COST:
CATEGORY: (EX: Italian Red, Gin, Domestic)			
TYPE: (EX: Merlot, Bourbon, Ale)			
PROOF:	FREIGHT:		
SIZE OF UNIT:	TAX:		

PACKAGE: REGION: (EX: Bordeaux, New York, USA, etc.) CONTAINER DEPOSIT: KIT: PALLET CONFIGURATION: TIERS PER PALLET: CASES/KEGS PER TIER: UNITS PER CASE: CASE WEIGHT:	SPECIAL ORDERS <table style="width:100%"> <thead> <tr> <th style="width:50%">CUSTOMER NUMBER</th> <th style="width:50%">NUMBER OF CASES</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td></tr> </tbody> </table>	CUSTOMER NUMBER	NUMBER OF CASES	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
CUSTOMER NUMBER	NUMBER OF CASES																		
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SUPPLIER:	
SUPPLIER SITE (Shipping Address):	
SCC CASE (14 Digit):	
UPC BOTTLE (14 Digit):	

PLEASE ATTACH THE FRONT AND BACK OF THE LABEL FOR THIS PRODUCT AND SUBMIT WITH THIS SETUP FORM. I verify that this item is new and not listed in Montgomery County's portfolio under any tag:

Your Name:

Telephone :