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BUSINESS ACTIVITY (CHOOSE ONE):

Primary Secondary

- 03.** Carpet Cleaning Contractor
- 04.** Disaster Repair/Restoration Contractor
- 02.** Building Service Contractor
- 01.** Floor/Carpet Maintenance Contractor
- 05.** Commercial Cleaning Service Contractor
- 07.** Distributor
- 09.** Sales Agent/Rep Firm
- 99.** Other (please specify): _____

JOB FUNCTION (CHOOSE ONE):

- 01.** Corporate Management
- 02.** General Management
- 03.** Cleaning/Building Maintenance
- 04.** Sales
- 99.** Other (please specify): _____

NUMBER OF PEOPLE EMPLOYED (CHOOSE ONE):

- 04.** Over 50
- 03.** 26 - 50
- 02.** 11 - 25
- 01.** 10 or Less

COMPANY'S ANNUAL SALES VOLUME (CHOOSE ONE):

- 05.** Over \$1,000,000
- 04.** \$500,000 to \$1,000,000
- 03.** \$250,000 to \$499,999
- 02.** \$100,000 to \$249,999
- 01.** Under \$100,000

NUMBER OF SERVICE VEHICLES (CHOOSE ONE):

- 03.** More than 6
- 02.** 4 - 6
- 01.** 1 - 3

DO YOU AUTHORIZE/SPECIFY PURCHASES FOR YOUR COMPANY?

- Yes
- No

Promo: KXAWCC