



Vendor Application Form

Doing business with the Fort Lauderdale Black Police Officers Association requires the completion of a Vendor Application. Please provide the following information:

Date of application: _____

Company name: _____

Address: _____

City, State Zip: _____

Remit address (if different than business address including city/state/zip): _____

Type of business: _____

Phone: _____ Fax: _____

Company's website: _____

Contact name and telephone: _____

Terms (if any): _____

Special Requests: _____

What items will you be bringing? _____

Representative Name/Number: _____

Company official's Name/Title/Signature: _____