CEO/COO Company Profile

		Keisha Wilson
Company Name: (Required)	First Name: (Required)	Fax: 202-659-2170
Campany, Address 1, (Decisional)	Last News (Dequired)	Or email at kwilson@naw.org
Company Address 1: (Required)	Last Name: (Required)	er email at tumber @mailerg
Company Address 2:	Title: (Required)	
Company City: (Required)	Email Address: (Required)	
Company State:		
Company Zip: (Required)		
Company Zip. (Required)		
Company Phone (10 digits): (Required)		
Company Fax (10 digits): (Required)		
Website Address:		
Are you an NAW member?:	Annual Sales Volume:	
	Number of SKUs:	
Wholesalar Distributor trade associations in which you hold	Number of Skos.	
Wholesaler-Distributor trade associations in which you hold membership:	Inventory turns per year:	
Briefly describe your customer base:	Sales Growth by Acquisition (annual %):	
T. I		
Total number of locations (US Only):	Sales Growth by Internal Expansion (annual %):	
Number of distribution centers (US Only):	Does your company use an Enterprise Resource Planning (ER	3P)
	system? If yes, please specify:	W)
Average number of orders shipped daily:		
	What inventory accounting method does your organization use?:	
Average gross margin:	•	
	Top three challenges going into 2014	
Number of suppliers:		
Average order size:		
Average order size.		
Average line items per order:		
	4	
Net margins before taxes as a percent of sales:	Top three initatives for 2014	
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Please fill out and Fax to