

KFCM VENDOR RECORDS – ARTISIAN / CRAFTER

Date received: _____

Name: _____

Business Name: _____

Address where product is made/assembled: _____

What is the Product/s

List of Raw materials used (Give detailed description)

List of tools and/or equipment used for making product

Please give a brief description of the process you use to create your product/s (Explain how your product is transformed and reflects the required 50% enhancement of the purchased products) refer to Rules of Operation for more detailed explanation

Please check the box when you have read and understood the KFCMS Rules of Operation/Regulations and before you have submitted your application.

Signature _____ Date _____

If further space is required please use multiple forms or the back portion of this sheet