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www.troyers.com

48 HOUR LEAD on All SAMPLES - PKG and CASES (note weekend doesn't count)

DSR Sample Request Form

(please complete all blanks in this box)

DSR Name : _____ **Date :** _____

Troyer Item # : _____

Item Description : _____

Vendor Name : _____

Customer # (s) : _____

Customer Name(s) : _____

Customer Name(s) : _____

Reason for Sample Request : _____

Samples on Stock items only

Anticipated weekly usage on this item :

Sample P/U @ **Goshen** **Bloomington** **Crossroads**

Send Sample to - ATTN : _____

Route : _____ **Ship Date** _____

Any additional information on reason for new item request : _____

Once all lines are completed Email to Troyer Samples (samplerrequest@troyers.com) & Category Manager

Purchasing Team and Troyer Outlet

Approved **Declined** **Pull from Inventory** **Vendor to send sample**

Credit Memo **Vendor #** _____ **Price to Charge :** _____

1. Outlet Receives Sample Request and Processes

2. Sample Orders are to be entered under Vendor Name

*** Note each Sample Order needs to be by Vendor**

*** Vendor #06000 for TN / Goshen Ship**

*** Vendor #05995 for TC / Bloomington Ship**

3. Sample Orders only to be entered by Clarissa or Purchasing Team

4. All Sample Orders to be billed back by Analyst Team by Credit Memo