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Supplier Name and Address	
Name	
Address	
City, State	
Zip Code	
Main Number	
Website	

Supplier "Remit To" Address	
Name	
Address	
City, State	
Zip Code	

Supplier Sales Contact	
Name	
Direct #	
Mobile #	
E-Mail	


Orders Should be Sent To	
Name	
E-Mail	
Payment Terms	N45 – Optional terms require approval

Certifications	
AS	
ISO	
ITAR	
NADCAP	

Forms Needed – May Require Signatures	
Supplier Survey	
Nondisclosure Agreement	
W-9	
Payment Terms	

Form Filled Out By	
Name	
Title	
Date	
Signature	

Dynamax, Inc. – Internal Only	
Supplier Code	
Supplier Group	
Expiration Dates	
Scope of Approvals	

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APPROVALS:

	Department / Title	Printed Name	Signature	Approval Date
Author	Supply Chain Manager	Michael Skrypek	-Signature on file-	08/22/2025
Reviewer	Quality Engineer	Ayden Lopez	-Signature on file-	08/22/2025

REVISION HISTORY

Revision	Description of Changes
1.0	Previously PUR-001-F8. Updated to correct document format and organized cells.