

REQUEST FOR WHOLESALE INFORMATION - Page 1 of 2

We initially need to know where & what your interest is. This will help us assist you further with the proper information that you specifically need to learn more about our products & services.

CONTACT INFORMATION			
Company Name:			Page 1 of 2
Type of Business (<i>Circle one</i>): Corporation Partnership LLC Individual			
Year Established: _____ State of Incorporation (if applicable): _____			
TAX ID # FOR YOUR COUNTRY: EIN (USA), ABN (AU) Or VAT (EU), etc. _____ You are required to follow local import & regulatory laws as they pertain to the country where you will be selling.			
Your Full Name & Title:			
Additional Partner(s): Full Name & Title			
Phone:	Mobile:	Fax:	
Email:		Additional Email:	
Billing Address:			
City:	State:	Country:	Postal Code:
Shipping Address (<i>if different than Billing</i>):			
City:	State:	Country:	Postal Code:
Kindly fill out all questions below so we can assign you the correct sales associate, as well as send all pertinent information. Thank you!			
How did you hear about our company? <i>(Please be as descriptive as possible.)</i>			
Have you ordered from us previously? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No, but I did request information at another time <input type="checkbox"/> Not sure			
Do you have an existing business? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please tell us about it.			
<input type="checkbox"/> Expanding product line <input type="checkbox"/> Changing from existing supplier <input type="checkbox"/> Other			
If you answered no above: What best describes your business? (Check all that apply)			
<input type="checkbox"/> Just researching <input type="checkbox"/> Start-up: (looking for low qty) <input type="checkbox"/> Start-up: (can order in qty or bulk)			
<input type="checkbox"/> Other:			
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Do you currently sell cosmetics? Yes No Other:

Whom do you or will you sell to? Direct Sales Retailers Distributors
 E-Commerce Other (Please explain)

Do you have a website or social media presence or store now? Yes No If yes, can you share?

WWW._____ WWW._____ WWW._____

Which country/countries do you plan on selling in?

My budget for this project is:

Less than \$500 \$500 - \$1,000 \$1,000 - \$3,000 \$3,000 - \$10,000 \$10,000 - \$30,000
 Other No plan on ordering now

Do you have a need by or launch date? Yes No Other:

Are you looking for a full product line or a specific item or category? Full Line Item / Category

Specifics (If any)

Please continue below and answer all that apply to you. (The more details the better)

FOR COSMETICS:

Are you interested in ready-to-label products (includes shade/ingredient labels, where applicable)?

Yes No I don't know

Are you interested in packaged products *without* shade/ingredient labels, so that you may create and apply your own?
(Minimums start at 24 PCs per shade.)

Yes No I don't know

Are you interested in having us print your logo onto the products? (Minimums start at 144 PCs per Package Style.)

Yes No I don't know

Do you have a logo? Yes No

Are you interested in bulk-size products (no packaging)?

Yes No I don't know

Are you interested in custom filling your own packaging or creating custom colors? (Minimums start at 2,000 PCs per color.)

Yes No I don't know

Other

FOR BRUSHES & ACCESSORIES:

Are you interested in stock brushes or custom brushes? (Minimums start at 144 PCs per style for custom.)

Stock Custom I don't know

If stock, are you interested in adding your name or logo to the brush handles? (Logo printing minimums start at 144 PCs per style.)

Yes No I don't know

Thank you so much for taking the time to fill this out. Now that we have a better understanding of your needs, we assign a dedicated sales rep to contact you (if we haven't already done so). They will contact you with their direct email. If you do not receive an email within a few days, please check your spam and or email us back at Info@BrushesbyKaren.com
Please return this form to the email address from which it was sent.