

New Product Suggestion Form

We want to hear from you!

To make your new product suggestion, please complete and fax this form to the address below.

To: MDA - Marketing and Communications	From: _____
Fax: (204) 948-3414	Page(s): _____
	Date: _____

Client Information

*Client Name _____ Title: _____

*Organization/Department: _____

*Phone: _____ Fax: _____

*Email: _____

Product Information

*Product Name: _____

*Product Number: _____ Price \$ _____

*Manufacturer: _____ Unit of Measure: _____

Product Description: _____

*Product Found at: _____ Catalogue Page Number: _____

*How many do you buy per year? _____ *per month? _____

Additional Comments: _____

*Required Fields



Thank you for your New Product Suggestion!
We will contact you soon.