



Thank you for your first order. In order to provide you with the best possible service, we need the following missing information for our administration.

Company name:

Visiting address

Address:

Zipcode:

City:

Postal address

Post office box:

Zipcode:

City:

Purchasing Department

Contact person:

E-mail address:

Phone number:

Mobile number:

Fax number:

Administration Department

Contact person:

E-mail address:

Phone number:

Submit invoice digitally: YES NO

Digitally invoicing email address:

VAT number:

VAT exemption number: (if applicable)

Chamber of Commerce number:

With kind regards,

Optimum Group W&R Etiketten | Sales Support

To be completed by Optimum Group W&R Etiketten

Account manager field service:

Account manager office staff:

Branche:

Automotive

Health care

Ready Made Meals

Beverages

Industrial & OEM

Resale

Bread & Pastry

Intercompany

Retail Other

Chemicals & Detergents

Meat & Poultry

Sport & Diet Nutrition

Confectionary

Non Food Other

Supermarkets

Dairy

Nuts & Savory Snacks

Transport & Logistics

Fish

Personal Care

Wholesale Food

Flora

Pet food

Wholesale Non Food

Food Other

Pharma

Wholesale Packaging

Graphical Industry

Produce