

SUPPLIER UPDATE FORM

Please complete all sections below and return completed form to
your primary contact via email.

Company (Name & Remit to Address):	
Accounts Receivable Contact Name:	
Accounts Receivable Email:	
Company Website:	
Sales Representative Name:	
Phone:	
Email:	
Primary Internal Contact Name:	
Phone:	
Email:	
Backup Internal Contact Name:	
Phone:	
Email:	
HPP Champion Contact Name (See HPP Manual):	
Phone:	
Email:	
Email Purchase Orders To:	
Sonnys HFI Payment Terms:	
Freight Terms:	
ISO Certification & Type:	(Please include copy of your current certification when returning this form.)

Below is our updated company and contact information.
Please update your records accordingly.

Bill To and Ship To Address:	Sonny's Backroom by Hydra-Flex
	Dock 6
	8401 Eagle Creek Parkway
	Savage MN 55378
AP Department Contact Email:	hydraflexaccountspayable@sonnysdirect.com
Main Phone:	952-808-3640
Website:	www.hydraflexinc.com
Purchasing Contact:	Jessica Gerenz
Title:	Sr. Purchasing Manager
Phone:	952-808-3640 x23034
Email:	jessica.gerenz@sonnysdirect.com