



MANUFACTURER BALLOT 2009 DISTRIBUTOR OF THE YEAR AWARD

Name: _____ Company: _____

LIST AND RANK EACH DISTRIBUTOR WHO CARRIES YOUR PRODUCT LINE, AND ACCOUNTS FOR AT LEAST 2% OF YOUR TOTAL SALES VOLUME. IN EACH CATEGORY, ON A SCALE OF 1-10 (1 = Low 10 = High).

| Distributor Name | Sales | Promptness of Payment | Product Enthusiasm | Parts & Service Dept. | Marketing Support | Customer Support | Total Points |
|------------------|-------|-----------------------|--------------------|-----------------------|-------------------|------------------|--------------|
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You may photocopy this ballot should you require additional sheets.
Please return via fax to 847.290.9121 or via e-mail to vcabrera@coin-op.org.
Deadline to place your ballot is Friday, February 12, 2010.