



MANUFACTURER SALES VISIT REQUEST FORM

All manufacturers must fill out this form completely and return to OCS for visit confirmation no later than 3 months prior to confirmation of requested visit.

[Please fax \(858\) 505-1818 or email this completed form to: kathryn@ocsltg.com](mailto:kathryn@ocsltg.com)

Manufacturer Name:

Cell Phone Number:

Date(s) Requested:

What products do you plan to show?

Travel Information:

Date/Time Available for first call:

Date Departing:

Time Last Call Must Finish:

:

PM

(So that you can get to the airport on time!)

Do you want us to schedule time for you to meet with the OCS Staff?

YES

NO

Lunch & Learns: Please note that the cost of lunch and learns consisting of 100% of your product fall under the responsibility of the manufacturer.

Please check here for acceptance of lunch and learn policy:

Notes:

SIGNATURE:
