## **LOCATION AGREEMENT**

Date	
Restaurant Name	
Contact	
Address	
	State Zip
Phone	Email
I understand that I will receive 1000 "Magnetic Menus" at NO COST. I agree to distribute the Magnetic Menus to my customers. This agreement transfers with the sale or transfer of management of the restaurant.  Notes:	
Approved by	Account Representative Tommy Babil
Recommended Sponsors	Quield tube
Insurance	Quick Lube
Nursery/Farm/Lawn	
Contractors	
Plumber	
Electrician	
Roofer	
Pest Control	
Real Estate/Home Building	<del></del>
Medical	
Chiropractor	
Dental	
Vet	
Retail/Boutique	
Auto Ponair	T 1: /5 0 1