

LOCAL VENDOR PRICE REDUCTION AGREEMENT WORKSHEET

(For use of this form, see DECAD 70-6 ; OPR is RM.)

Vendor Name: _____

Vendor Number: _____

Start Date: _____

End Date: _____

Item Information

UPC/EAN	Item Description	Unit Adj. Amt

Vendor's Signature: _____

Date: _____

Store Director's Signature: _____

Date: _____

Date VPR put into the system: _____

Portal Agreement ID: _____