1 NEW CUSTOMER

___*NEW PROSPECT

* DATE 3-19-20

* SALES ASSOCIATE Gwen Roe

* BRANCH 23

* CUSTOMER / PROSPECT NAME Hatzel & Buehler

SHIPPING ADDRESS 1922 Oak Street
Kenova WV 25530

INVOICING ADDRESS 3381 Congo Rd
Circleville, OH 43113

* CONTACT NAME Lafe Lyons

* PHONE NUMBER 304-453-1632

FAX NUMBER

EMAIL ADDRESS L.Lyons@Hatzeland.Buehler.com

* NEW LEAD OR PAST CUSTOMER new

* NUMBER OF EMPLOYEES ? Changes often New office loc.

* SALES POTENTIAL #40.000

PRODUCT TARGET

* TYPE OF BUSINESS

- [x] INDUSTRIAL
- [x] CONSTRUCTION
- [ ] MACHINE / FAB
- [ ] RESELLER
- [ ] GOVT / HOSPITAL
- [ ] OIL FIELD
- [ ] railcar repair

NOTES