

**KFCM VENDOR RECORDS – ARTISIAN / CRAFTER**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address where product is made:  
\_\_\_\_\_

What is the Product/s \_\_\_\_\_

\_\_\_\_\_

List of Raw materials used


List of tools and/or equipment used for making product


Please give a brief description of the process you use to create your product/s


<b>I have read and understood the KFCMS Artisan/Crafter Vendor Regulations-Refer to the Rules of Operation</b>
<b>Applicants Signature</b> _____ <b>Date</b> _____

If further space is required please use multiple forms or the back portion of this sheet