Contact Information Template for Maintaining Essential Service/Activity: Critical Partners

|  |
| --- |
| **Product/Service:** |
| **Supplier Name:** |
| **Street Address:** |
| **City/ Province/Postal Code:** |
| **Contact Person: Alternate Contact:** | **Phone No.: 24-hour No.: Fax No.: Other No.:****Email:** |
| **Comments:** |

|  |
| --- |
| **Product/Service:** |
| **Vendor Name:** |
| **Street Address:** |
| **City/ Province/Postal Code:** |
| **Contact Person: Alternate Contact:** | **Phone No.: 24-hour No.: Fax No.: Other No.:****Email:** |
| **Comments:** |

|  |
| --- |
| **Product/Service:** |
| **Vendor Name:** |
| **Street Address:** |
| **City/ Province/Postal Code:** |
| **Contact Person: Alternate Contact:** | **Phone No.: 24-hour No.: Fax No.: Other No.:****Email:** |
| **Comments:** |