

# Target Dealer List

(For Distributor Planner Use)

## Recommendations for participating dealers:

- \* Potential to grow revenue
- \* Ability or personnel to administer programs
- \* Receptive to distributor marketing programs
- \* Commitment to tracking results

## Current Customers

1. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

2. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

3. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

4. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

5. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

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6. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
 On Aviator  Signed Commitment Form  Scheduled for Workshop

7. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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8. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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9. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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10. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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11. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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12. Company Name \_\_\_\_\_  
Area of Concentration \_\_\_\_\_  
Authorization Contact \_\_\_\_\_  
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## Prospects

13. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

14. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop

15. Company Name \_\_\_\_\_

Area of Concentration \_\_\_\_\_

Authorization Contact \_\_\_\_\_

On Aviator  Signed Commitment Form  Scheduled for Workshop