Local Vendor Price Reduction Agreement (VPRA) Worksheet

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: _____

Commissary Copy