| Customer Product Information Form  This form to be completed within 48 hours of receipt |                                |  |
|---|--------------------------------|--|
|   |                                | Incomplete Fields remain "gray." If a field does not apply, enter "NA" |
| THIS SECTION TO BE FILLED OUT BY BUYER ( CUSTOMER)                                      |                                |  |
|   |                                |  |
| Concept(s)  | Hopdoddy                       |  |
| Item  | BBQ Sauce                      |  |
| Buyer   | Dave Wicker                    |  |
| Product to be in Distribution by  | ASAP                           |  |
| Reason for Notification   | Spec Change                    |  |
| If this is a Replacement Product, Please indicate product being replaced                | Ventura Foods BBQ Sauce        |  |
| Estimated Usage (Cases) per month per unit  | 2                              |  |
| If Promotional or Test Product - Please Provide Promo Dates                             | NA                             |  |
| If this is a Test Product - Please list Test Stores                                     | NA                             |  |
| Centers Affected, Please list   | All                            |  |
| Information Submitted By  | David Wicker                   |  |
| Date  | 4/12/2023                      |  |
|   |                                |  |
| THIS SECTION TO BE FILLED OUT BY VENDOR   |                                |  |
| Vendor  | ATX Specialty Foods            |  |
| Vandar Addraga  | 300 Gateway Blvd, Bldg 100     |  |
| Vendor Address City, State & Zip  | Kyle TX 78640                  |  |
| Production Facility Location  | 300 Gateway Blvd, Bldg 100     |  |
| City, State & Zip   | Kyle TX 78640                  |  |
| Shipping Location   | 300 Gateway Blvd, Bldg 100     |  |
| City, State & Zip   | Kyle TX 78640                  |  |
| City, State & Zip   | Ryle 17 70040                  |  |
| Contact Person  | Anna Vagnoni                   |  |
| Phone #   | 512-633-8904                   |  |
| Fax #   | N/A                            |  |
| E-Mail Address  | avagnoni@atxspecialtyfoods.com |  |
|   |                                |  |
| Product Information   |                                |  |
| Item Description  | Hopdoddy BBQ Sauce             |  |
| Manufacturer Item #   | HDY-107                        |  |
| UPC Code #  |                                |  |
| GTIN#   | 817719011865                   |  |
| Scanable Bar Code - Outside of Case (Select One)  | Yes                            |  |
| Scanable Bar Code - On Inner Packs (Select One)   | No                             |  |
| Brand Name Printed on Case Label (Select One)   | Yes                            |  |
| If Brand Name is Yes, Put in Brand Name for the Product                                 | Hopdoddy                       |  |
| Country of Origin   | USA                            |  |
| Catch Weight  | No                             |  |
| Food Product Only - Is this Product Trans Fat Free? (Select One)                        | No                             |  |
| Food Product Only - Is this Product Gluten Free? (Select One)                           | No                             |  |
| Food Product Only - Is this Product Organic (Select One)                                | No                             |  |
| Food Product Only - Is this Product Kosher? (Select One)                                | N/A                            |  |
| Food Product Only - Is Item labeled as Halal? (Select One)                              | NO                             |  |
| Food Product Only - Is the Product cooked or raw? (Select One)                          | Cooked                         |  |
| Food Product Only - Child Nutrition (CN) Designation?                                   | No                             |  |
| FDA Seafood Hazard ?  | No                             |  |

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|---|----------------------------------|---------------------------|-----|
|   |                                  | Chemical Product ?        | No  |
|   |                                  | Storage Type (Select One) | Dry |
| Master Sell Unit (Select One)   | Case                             |                           |     |
| Inner Package Quantity  | 5                                |                           |     |
| Inner Package Size  | 8lb                              |                           |     |
| Inner Package Type (Select One)   | Bag                              |                           |     |
| Total Shelf Life (Days)   | 365                              |                           |     |
| Minimum Remaining Shelf Life when Received (Days)   | 90                               |                           |     |
| Rotate By (Select One)  | Received By                      |                           |     |
| Case Gross Weight (lbs.)  | 40.95 LBS                        |                           |     |
| Case Net Weight (lbs.)  | 40 LBS                           |                           |     |
| Case Cube (Case Cube = L x W x H / 1728)  | 0.907118056                      |                           |     |
| Case Dimensions (L x W x H in inches, i.e. 10 x 3 x 6)  | 11 x 15 x 9.5                    |                           |     |
| Number of cases per layer (TI)  | 10                               |                           |     |
| Number of Layers per pallet (HI)  | 4                                |                           |     |
| Product Floor Stocked (Select one)  | No                               |                           |     |
| Minimum order required? (If yes, specify quantity)  | 40                               |                           |     |
| Minimum order (Select Unit of Measure)  | Cases                            |                           |     |
| Lead Time (Calendar or Business Days)   | 3 Weeks (calendar)               |                           |     |
| First Available Shipment Date   | 5/1/2023                         |                           |     |
| Item Payment Terms  | 10 days                          |                           |     |
| Distributor Invoice Cost Delivered  | N/A                              |                           |     |
| Distributor Invoice Cost FOB  |                                  |                           |     |
| Customer Deviated Price Delivered   | N/A                              |                           |     |
| Customer Deviated Price FOB   | N/A                              |                           |     |
| Does the distributor file a bill-back?  | No                               |                           |     |
| Is this a Contracted Item? (Select One)   | No                               |                           |     |
| Is this Product available through DOT Foods at this price?  | No                               |                           |     |
| Name and Company of Person Completing This Form   | Anna Vagnoni ATX Specialty Foods |                           |     |
| Required Information  |                                  |                           |     |
| Product Preparation (include complete cooking and thawing instructions  | Open bag and pour                |                           |     |
| Product Attributes / Features and Benefits  | Hopdoddy Proprietary Sauces      |                           |     |