
 Vendor Name	ARLINGTON CARPENTRY
Address 1	3213 W 34TH ST
Address 2	SUITE 200
City State Zipcode	ORLANDO, FL 32567

Contact Name	STEVE WALLMAN
Other Address	
E-mail Address	steve@arlingcarp.com

Worker's Compensation Insurance Expiration Date	05/01/01
General Liability Insurance Expiration Date	05/01/01

Telephone	407/658-9987
Fax	407/658-9988
Beeper	321/877-9999
Mobile	321/525-6999

Default Cost Account 	236	TRIM LABOR
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<input checked="" type="checkbox"/> Print a 1099 Form for this Vendor	Social Security Number or Federal ID	658-28-2888
<input checked="" type="checkbox"/> Create Lien Waivers for this Vendor	Payment Terms	1ST & 15TH
<input checked="" type="checkbox"/> Vendor is ACTIVE	Year to Date Payments	7,863.58

Add Vendor**Cancel / Exit**