ARMD

Employee Data List for _____ (List each rooftop separately)
Date: _____

First Name	Last Name	E-mail Address (Required)	Dealership Position: 1-Senior Mgt, 2-CCO, 3-Sales Mgt, 4-F&I Mgt, 5-Office staff, 6-BDC Staff, 7-Sales Staff, 8-Services Staff, 9-Parts Staff

Who is to receive weekly reports?	Name	Email	
Dealer			
GM			
CCO			
Other-Specify			

Send completed form to info@getarmd.com or fax to 800-967-5308

Employee information can be obtained from your payroll list.