 

**Social Enterprise Network**

**Derby City Council - Buyers Guide pro-forma**

Please complete this including the organisations full contact details and a brief description, in bullet point format, of the goods and/or services you can deliver in Derby City.

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| --- | --- |
| **Name/Contact** |  |
| **Organisation name** |  |
| **Organisation status** |  |
| **Registration numbers** |  |
| **Address** |  |
| **Postcode** |  |
| **Tel** |  |
| **Email** |  |
| **Goods and/or services your organisation can offer** | |
|  | |

**Please return your completed form to** [**sen@communityactionderby.org.uk**](mailto:sen@communityactionderby.org.uk)