Take Advantage of this Great Opportunity to be Listed **FREE** in the OPIS/STALSBY Petroleum Supply Europe Database

Please list Corporate Headquarters information below:

Company Name: 

Corporate HQ Address: 

City: ___________________ State: ______ Country: __________ Zip: ______

PO Box: _______________ PO City: ___________________ PO Zip: __________

Main Phone: ___________________ Main Fax: ___________________

Alternate Contact Numbers: ___________________

Website: ___________________

Main Email: ___________________

---

**Petroleum Supply & Service Company Categories** *(Please choose from list below)*

<table>
<thead>
<tr>
<th>Supply Categories</th>
<th>Service Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Brokers*</td>
<td>□ Banking/Financial</td>
</tr>
<tr>
<td>□ Consumer End Users</td>
<td>□ Consultants*</td>
</tr>
<tr>
<td>□ Crude Oil</td>
<td>□ Environmental Oil Services</td>
</tr>
<tr>
<td>□ Diesel Exhaust Fluid</td>
<td>□ Equipment Suppliers</td>
</tr>
<tr>
<td>□ Feedstocks/Intermediates</td>
<td>□ Hydrocarbon Treatment</td>
</tr>
<tr>
<td>□ MTBE</td>
<td>□ Information Services</td>
</tr>
<tr>
<td>□ Natural Gas Liquids</td>
<td>□ National Associations*</td>
</tr>
<tr>
<td>□ Oil Refiners*</td>
<td>□ Service Companies</td>
</tr>
<tr>
<td>□ Petrochemicals</td>
<td>□ Software Management</td>
</tr>
<tr>
<td>□ Specialty Fuels-AvGas/SubOctane Fuels*</td>
<td>□ Testing/Inspection</td>
</tr>
<tr>
<td>□ Transportation/Storage</td>
<td>□ Training/Education</td>
</tr>
<tr>
<td>□ Wholesale Refined Product Distributors/Jobbers</td>
<td></td>
</tr>
</tbody>
</table>

* Please select products handled in box BELOW.

---

If you are an Independent Oil Refiner, Specialty Fuels Company, Trader, Broker, Consultant, or National Association, Please check the products your company handles.

<table>
<thead>
<tr>
<th>Products Handled</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Crude Oil</td>
</tr>
<tr>
<td>□ Diesel Exhaust Fluid</td>
</tr>
<tr>
<td>□ Distillates</td>
</tr>
<tr>
<td>□ Gasoline</td>
</tr>
<tr>
<td>□ Jet Fuel</td>
</tr>
<tr>
<td>□ Marine Fuel</td>
</tr>
<tr>
<td>□ Natural Gas Liquids</td>
</tr>
<tr>
<td>□ Residual Fuel</td>
</tr>
</tbody>
</table>

---

To Order A Copy Of This Database:
Call 800-854-7179 or visit www.opisnet.com/energy-directories.aspx

To Update or Submit Listing Information:
Fill out this form in Adobe Acrobat then print and fax it to 800-450-5864, or email it to opisstalsbylistings@opisnet.com.

Questions?
If you have any questions regarding this form please contact:

**Bonnie Walling**
732-730-2536
bwalling@opisnet.com

**Deborah D’Alessio**
732-730-2552
ddalessio@opisnet.com

(page 1 of 2)
PERSONNEL INFORMATION SECTION

PERSONNEL 1

Please list a contact person that is responsible for updating the entire listing for each edition.

List in Book? □

First Name: ____________________________________________  Last Name: ________________________________

Nickname: ____________________________________________  Job Title: ________________________________

Phone: __________________________  Cell: __________________________  Fax: __________________________

Email: ____________________________________________  Messaging ID: __________________________

Office Name/Location (if different from main company listing): ____________________________________________

City: ____________________________________________  State: __________  Zip: __________________________

Please choose a classification category from below for Personnel 1 (You may choose more than one).

☐ Brokerage  ☐ Executive Supply  ☐ MTBE  ☐ Refined Products  ☐ Risk Management

☐ Commercial Fuels  ☐ Feedstocks/Intermed  ☐ Natural Gas Liquids  ☐ Sales/Marketing

☐ Crude Oils  ☐ Finance Supply  ☐ Operations/Logistics  ☐ Specialty Fuels

☐ Exchange/Scheduling  ☐ Marine  ☐ Petrochemicals  ☐ Trading

PERSONNEL 2

First Name: ____________________________________________  Last Name: ________________________________

Nickname: ____________________________________________  Job Title: ________________________________

Phone: __________________________  Cell: __________________________  Fax: __________________________

Email: ____________________________________________  Messaging ID: __________________________

Office Name/Location (if different from main company listing): ____________________________________________

City: ____________________________________________  State: __________  Zip: __________________________

Please choose a classification category from below for Personnel 2 (You may choose more than one).

☐ Brokerage  ☐ Executive Supply  ☐ MTBE  ☐ Refined Products  ☐ Risk Management

☐ Commercial Fuels  ☐ Feedstocks/Intermed  ☐ Natural Gas Liquids  ☐ Sales/Marketing

☐ Crude Oils  ☐ Finance Supply  ☐ Operations/Logistics  ☐ Specialty Fuels

☐ Exchange/Scheduling  ☐ Marine  ☐ Petrochemicals  ☐ Trading

PERSONNEL 3

First Name: ____________________________________________  Last Name: ________________________________

Nickname: ____________________________________________  Job Title: ________________________________

Phone: __________________________  Cell: __________________________  Fax: __________________________

Email: ____________________________________________  Messaging ID: __________________________

Office Name/Location (if different from main company listing): ____________________________________________

City: ____________________________________________  State: __________  Zip: __________________________

Please choose a classification category from below for Personnel 3 (You may choose more than one).

☐ Brokerage  ☐ Executive Supply  ☐ MTBE  ☐ Refined Products  ☐ Risk Management

☐ Commercial Fuels  ☐ Feedstocks/Intermed  ☐ Natural Gas Liquids  ☐ Sales/Marketing

☐ Crude Oils  ☐ Finance Supply  ☐ Operations/Logistics  ☐ Specialty Fuels

☐ Exchange/Scheduling  ☐ Marine  ☐ Petrochemicals  ☐ Trading

(To add additional personnel, please make copies of this page and complete it accordingly)