

EDI Trading Partner Questionnaire/Profile

Please fill out this form for each Trading Partner

Shaded area for IQMS internal use only



Company Name		Tribar Manufacturing	
Contact Name(s) & Phone Number(s)	EDI Coordinator	Joseph Gitter – 517.545.4200 x161 joe.gitter@tribarmfg.com	
	IT Manager	Bulldog IT Services (support@itbulldog.com)	
	Order Entry		
Vendor Number		NA	
ISA Information 08:8102310716		GXS/OpenText	
Number of Eplants? 0		Use Multicurrency? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

TRADING PARTNER INFORMATION

Trading Partner Name			
Contact Name(s)			
Address			
Email address/Website URL			
Phone/FAX		AIAG Compliant?	<input type="checkbox"/> YES <input type="checkbox"/> NO
ISA ID Code		Code Qualifier	

TELECOMMUNICATIONS INFORMATION (VAN, ftp, internet, etc.)

	Method of communication	Contact Name & Phone# (if available)
Yours	VAN – OpenText (GXS)	
Trading Partner's		

TRANSACTION SET INFORMATION

Transaction Set Name	Send	Receive	Version/Release #	Implementation Date	Mapping Specs Rcv'd Date
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>			

IMPORTANT: Please provide mapping specifications/documentation detailing each segment if available. Please attach a sample raw data file, which contains all required segments for a transaction set.