Marketplace Supplier e-Commerce Survey

Please fill out survey, Save As (your company name) and return to buyer contact.

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	te:		
Na	me of bu	ıyer:	
Bu	yer conta	act Name:	
		Email:	
		Phone:	
Со	ntract Na	ame:	OA #:
Со	ntract Ca	ategory -	
		·	
1. 9	Supplier	informatio	n
	Compa	ny name:	
Company address:			
Website:			
	Main nu	ımber:	
2.	Busine	ss contact:	Primary Contact:
	1.	Name:	
		Email:	
		Phone:	
		Title:	
			IT Contact:
	2.	Name:	
		Email:	
		Phone:	
		Title:	
			Other Contact:
	3.	Name:	
		Email:	
		Phone:	
		Title:	
3.	Can	your compa	any provide a punch-out enabled commerce site identifying the items under
	cont	ract for your	buyer? Yes: No:
	[If yes	s, answer ques	stions 4-5 and return survey to buyer. If no, answer questions 6-9 and return form to buyer.]
4 .	Can	your compa	any receive cXML orders? Yes: No:
5.	Wha	t is the curre	ent lead time to set up a Test punch-out site?
		-	tion punch-out site?
	Reci	eve a test o	rder?
	Reci	eve a produ	iction order?

6.	Can you provide a spreadsheet with the name, item number, description and contracted price for the goods or services under contract? Yes: No: [If no, you can save, and return survey to buyer without completing questions 7-9]
7.	How many items are under contract for the buyer?
8.	How frequently do items and/or item pricing change?
9.	Do the products or services under contract have configurations options, e.g. color or size? Yes: No: