

**SUPPLIER PROFILE FORM
(Form 1)**



Action – Please Circle		New Vendor	Change Existing
Company Name		<input type="text"/> <i>Enter the complete legal company name, or registered business name</i>	
Business Registration #		<input type="text"/> <i>Enter Official business number (ie ABN in Australia)</i>	
Dunn and Bradstreet #		<input type="text"/>	
Supplier Address Line 1		<input type="text"/> <i>Enter street address or P.O. Box number of purchasing/payment site</i>	
Supplier Address Line 2		<input type="text"/> <i>Enter suite number or mail stop of your purchasing/payment site.</i>	
Supplier Address Line 3		<input type="text"/>	
City	<input type="text"/>	State:	<input type="text"/>
Postal Code	<input type="text"/>	Country	<input type="text"/>
Telephone	<input type="text"/>	FAX	<input type="text"/>
<i>Please ensure you enter country and area codes</i>			
Purchase Order Deliver	<input type="checkbox"/> e-mail/fax	<input type="checkbox"/>	
<i>This is where Cisco Systems will automatically send Purchase Orders. For e-mails we recommend generic alias e-mails address such as orders@yourcompany.com.au or Cisco.Orders@yourcompany.com.au</i>			
Commodity Type	<input type="text"/>	<i>Please refer over for Cisco Commodity Number</i>	
Payment Terms:	Standard Cisco payment terms are net 30 days	<input type="checkbox"/>	<input type="checkbox"/>
<i>If you believe you have agreed terms other than 30 days, please tick box and add documentation with your forms.</i>			
Method of Shipment		<input type="text"/>	
<i>Enter the freight/courier company to be used and the type of service (ie standard, express, overnight etc)</i>			
Local Freight terms <small>(1) Cisco Pay, (2) Door Delivery Included</small>	<input type="checkbox"/>	International Delivery	DDP Other <input type="text"/>
<i>"Delivered Duty Paid" means that the seller delivers the goods to the buyer, cleared for input, and not unloaded from any arriving means of transport at the named place of destination. The seller has to bear all the costs and risk in bringing the goods thereto including; where applicable, any duty,(which terms bearing the responsibility for and the risk of carrying out customers formalities and the payment of formalities, customs duties, taxes and other charges) for import in the country of destination" (ref Incomterms 2000 ICC Publishing 560)</i>			
Contact E-mail address		<input type="text"/>	
Is the purchasing site also a payment site? Please Circle			Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, Please list other Payment Site(s) below:		<input type="text"/>	
Supplier Address Line 1		<input type="text"/>	
Supplier Address Line 2		<input type="text"/>	
Supplier Address Line 3		<input type="text"/>	
City	<input type="text"/>	State:	<input type="text"/>
Postal Code	<input type="text"/>	Country	<input type="text"/>
Telephone Number	<input type="text"/>	FAX Number	<input type="text"/>
Supplier Contacts		<i>Enter the name, title, department and telephone number for people who are assigned to assist Cisco complete orders and payments in a timely fashion. We suggest that you identify a sales representative or sales manager as well as someone in your accounts receivable department.</i>	
1) Last Name	<input type="text"/>	First	<input type="text"/>
	<input type="text"/>	Initial	<input type="text"/>
Title	<input type="text"/>	Department	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
2) Last Name	<input type="text"/>	First	<input type="text"/>
	<input type="text"/>	Initial	<input type="text"/>
Title	<input type="text"/>	Department	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
eCommerce Contact		<i>Cisco Systems requires suppliers to participate where appropriate in the exchange of EDI transactions with your company using either traditional EDI or a WEB EC solution to support the procurement to payment process. Please provide a contact</i>	
Last Name	<input type="text"/>	First	<input type="text"/>
	<input type="text"/>	Initial	<input type="text"/>
Title	<input type="text"/>	Department	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

SUPPLIER PROFILE FORM
Cisco Supplier Commodity Category Number



Number	High Level Description	Sub Level as a Guide	Comm Owner
25	Motor Vehicles	Leases, Car Parking, Cleaning, Maintenance etc. Not Rental Cars (ref 90)	WPR
27	Tools and General Machinery	Manual and Power tools	WPR
32	Electronics Components and Suppliers	Circuit boards, Memory, Semiconductor etc, for R&D purposes, not internal business use.	IT
39	Lighting and Electrical Accessories Supplies and Services		WPF
41	Laboratory, Measuring, Observing and Testing Equipment		Research
43	Communications, Computer Equipment, Peripherals, Components, Telecommunications		IT
44	Office Equipment, Accessories and Suppliers	Stationery, Paper, Photocopiers, Fax Machines, scanners, White Boards etc.	WPR
45	Printing, Photographic, Audio Visual Equipment Suppliers and Services		Marketing/ WPR
46	Security and Safety Equipment and Services	Surveillance, Access Control Systems, Alarm Systems, Security Services,	WPR
50	Food and Beverage Supplies and Services		WPR
53	Apparel		Marketing
55	Published Products	Newspapers, Magazines, Professional Publications, internet news services etc.	Marketing ALL
56	Furniture and Furnishings		WPR
72	Building, Construction, Real Estate and Maintenance Services		WPR
76	Cleaning Services		WPR
78	Transportation, Storage, Warehousing, Logistics and Mail Services		Logistics
80	Management, Business Professional and Administrative Services	Management Consultants, Legal Services, Corporate Administrative Services	Finance
81	Engineering, Research and Technology Bases Services		Research
82	Marketing, Editorial, Design, Graphics, Art Related Services	Marketing, Advertising, Publicity	Marketing
83	Public Utilities and Public Sector	Water, Electricity. Library	WPR
84	Financial and Insurance Services	Debt and Credit Management, Audit Taxation, Banking, Insurance, Investment, Superannuation	Finance
85	Healthcare Services		HR
86	Education and Training Services		Training
89	Human Resource Services	Recruitment, Temporary Staff, Payroll Services, Counseling Services, Outplacement	HR
90	Travel, Accommodation, Venue, Entertainment Services	Function Centres, Hotels, Entertainment, Amusement Parks, Exhibitions, etc	Travel/ Training/ Marketing
93	Political and Civic Affairs Services		Marketing
94	Organisations and Clubs	Professional Associations, Staff Associations, Sponsorships	Marketing ALL
99	Other		WPR

(Please note this is based on a subset on UNSPSC, but is modified for Cisco's own use.)

**SUPPLIER PROFILE FORM
PAYMENT AND BANKING INFORMATION**



Company/Supplier Name		
Action – Please Circle	New Vendor	Change Existing

If you have listed more than one paysite, please photocopy and complete for each paysite.

Payment Site			
Action – Please Circle	New Vendor	Change Existing	
Payment Type – Please Circle all applicable	Visa	Cheque	Wire/EFT
If you do not accept Visa, please advise if you plan to in the future. <i>Please note Visa is Cisco's preferred payment method for transactions under USD1,500</i>	No	Yes	Date
Enter Payment Currency Code	Local Currency:		or circle: USD

If Payment by Visa only is selected, no further information on this page is required.

DOMESTIC PAYMENT SITES (Form 2A)

Account Holder Name:			
Bank Name:			
Branch Name:			
Branch Clearing Zone (applicable for <i>India Only</i>)			
Bank Number (Bank ID):			
Branch Number:			
Account Number:			
Remittance Format		(Mail, e-mail, Fax)	
Enter email/fax details			
Authorisation for Payment to Bank			
We authorise Cisco Systems to initiate payments to the bank identified above.			
Name			
Title			
Signature			
Date			

INTERNATIONAL PAYMENT SITES (Form 2B)

Please fill out this form only if you have an international paysite.

Swift Code or Chips ID:			
<i>(For banks located in US, Chips id is required. This will be available from bank.)</i>			
Account Number:			
Intermediary Bank (optional)	Chips ID		
Remittance Format		(Mail, e-mail, Fax)	
Enter email/fax details			
Authorisation for Payment to Bank			
We authorise Cisco Systems to initiate payments to the bank identified above.			
Name			
Title			
Signature			
Date			

**CERTIFICATIONS
(Form 3)**



Company/Supplier Name		
Action – Please Circle	New Vendor	Change Existing

Certification I - Supplier Safety

Please check the first box below if your company will have contractors working on-site at Cisco Systems.

<input type="checkbox"/>	I certify that I have received a copy of the Cisco Systems Contractor Safety Guide and will ensure all personnel working for me will comply with the requirements set forth. I also understand that this is only a guide and not inclusive of all safety hazards.
or	
<input type="checkbox"/>	I certify that I will not have personnel working on-site at Cisco.
Name	
Title	
Company	
Date	
Signature	

Certification II - Code of Ethics

<input type="checkbox"/>	I have received and read the Cisco Supplier Code of Ethics. I understand that this document represents the policies of Cisco and that a violation may disqualify my company from further dealings with Cisco.
Name	
Title	
Company	
Date	
Signature	

Notes to the Certification I - Supplier Safety Guide (Note 6) and Code of Ethics (Note 7) can be sighted via the URL –

http://Www.cisco.com/web/about/ac50/ac142/supplier/about_cisco_become_a_cisco_supplier.html

**BUSINESS INFORMATION
(Form 4)**



Company/Supplier Name		
Please circle one	New Supplier	Change to Existing Information

As part of Cisco's due diligence on its suppliers, some preliminary financial information is required. Should you have a strategic supplier relationship, a supplementary set of requirements will be sent to you.

Please tick the left hand column to indicate that the question has been answered and/or the documentation provided and attached with this schedule.

	Financial Statements: Please supply a copy of your last financial report. If you are a controlled entity of a larger group of companies, then please provide a copy of the last consolidated financial report.																												
	Business Structure: Please supply details of your ownership structure, Company Directors and Management Team (with brief description of roles)																												
	<p>References: Please provide details of 2 references for your company. <i>Note the companies provided should receive similar goods or services to those proposed to Cisco and of similar volumes.</i></p> <table border="1"> <tr> <td>Company Name</td> <td></td> </tr> <tr> <td>Contact Name</td> <td></td> </tr> <tr> <td>Address</td> <td></td> </tr> <tr> <td>Contact Telephone</td> <td></td> </tr> <tr> <td>Contact e-mail</td> <td></td> </tr> <tr> <td>Volume of Business</td> <td></td> </tr> <tr> <td>Percentage of your overall business</td> <td></td> </tr> <tr> <td>Company Name</td> <td></td> </tr> <tr> <td>Contact Name</td> <td></td> </tr> <tr> <td>Address</td> <td></td> </tr> <tr> <td>Contact Telephone</td> <td></td> </tr> <tr> <td>Contact e-mail</td> <td></td> </tr> <tr> <td>Volume of Business</td> <td></td> </tr> <tr> <td>Percentage of your overall business</td> <td></td> </tr> </table>	Company Name		Contact Name		Address		Contact Telephone		Contact e-mail		Volume of Business		Percentage of your overall business		Company Name		Contact Name		Address		Contact Telephone		Contact e-mail		Volume of Business		Percentage of your overall business	
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	<p>Bank Reference: Please provide details of you primary bank. <i>In the event that we need to contact your bank, we will first advise you.</i></p> <table border="1"> <tr> <td>Bank Name</td> <td></td> </tr> <tr> <td>Business Banking Manager Name</td> <td></td> </tr> <tr> <td>Address</td> <td></td> </tr> <tr> <td>Contact Telephone</td> <td></td> </tr> <tr> <td>Year banked with</td> <td></td> </tr> <tr> <td>Facilities Available</td> <td></td> </tr> </table>	Bank Name		Business Banking Manager Name		Address		Contact Telephone		Year banked with		Facilities Available																	
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