

Supplier Reference Manual

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N.A. LOGISTICS TRANSPORTATION	888-765-9572
INTEGRATION (EDI)	616-787-1648

INTRODUCTION

GENERAL

Access Business Group's (ABG) objective is to ensure that all shipments and related documents including invoices will be consistent with the information on our purchase orders and will be easily cross-referenced to our purchase orders. This will allow smooth handling and receipts of products and timely payments of invoices. If goods are rejected upon receipt and returned to supplier for rework at a non-ABG location, the supplier will credit ABG for the returned goods and issue an invoice for the quantity shipped back to ABG.

ABG markets and distributes products to millions of Independent Business Owners. ABG is committed to customer satisfaction; therefore we require the packaging and protection of all Finished Goods to be in compliance with the requirements stated within this book.

Practices and Procedures not consistent with the requirements set forth in this document are not allowed unless pre-approved by ABG/Amway Buyer. ABG reserves the right to refuse delivery of any load not complying with the requirements contained herein. Failure to comply may also result in delay of receipt, delay in invoice payment, or charge back for rework or freight expenses. Rework charges to meet specifications are charged a processing fee of \$80 and a labor charge up to \$50 per hour.

ELECTRONIC DATA INTERCHANGE

ABG has recognized the many benefits of EDI and is actively implementing this technology throughout the organization. You are encouraged to pursue an EDI trading partnership with us. For more information, please contact our ABG Integration Department at 616-787-1648 or e-mail it to <u>integrationcenter@amway.com</u>

ELECTRONIC FUND TRANSFER

Accounts Payable prints checks every two weeks in order to eliminate paperwork and mail delivery time, we encourage you to sign up for electronic fund transfer through Automated Clearing House (ACH). *Please fill out the form Exhibit 7 (Page 15) and e-mail to accounts.payable.us@amway.com*

For Canada Only suppliers e-mail to accounts.payable.ca@amway.com

ARRIVAL DEFECTS REPORTING

The purpose of Arrival Defects Reporting (ADR) is to provide performance data and feedback to suppliers. A web based system will collect data and generate reports indicating arrival defects regarding on-time delivery, order accuracy, packing slips, labeling, packaging and other receiving requirements. This information will be shared with suppliers by their buyer. Repetitive and/or severe arrival defects will be subject to corrective actions.

PRODUCT LABELING

ALL PROGRAMS

The following information must appear on all shipping containers/master shippers. The label format and terminology for each product must meet ABG requirements. Any change to ABG labeling requires approval from ABG prior to implementation. Many of the requirements are common for each program, however, there are some non-negotiable differences for specific programs. ABG/Amway uses the lowest transactional unit (LTU) for ordering, purchasing and inventory management. LTU is defined as the lowest level of product packaging which could be made legally saleable and is not further divisible into identical units. (LTU=each.) The Master is the outer most carton, the carton that is placed on the pallet. The number of LTU's in the Master must be indicated on the Master label. The inner carton/case/bundle/pack, if any, should also indicate the LTU. See Exhibit 1 (Page 9) for suggested label format. If custom labeling is not used, supplier's labeling must be approved by ABG/Amway Buyer in advance.

Hazardous products require ORMD labeling on the outside of each carton.

Products being sold in Canada must include bilingual description, weight, and warnings.

ABG part/SKU number

Official and complete number as shown on the purchase order. This number must be kept separate from all other markings. UPC barcode or vendor model number may be used with prior authorization from buver.

Production dates

Production dates are not to be mixed within a case or master shipper, except for variety packs. For variety packs, the production dates on the case and/or the master shipper must match the supplier's oldest manufactured date on any of the product within the variety pack. A traceable production date must appear on each consumable package. Suppliers must use the 4-digit Julian date that reflects their lot/batch number on all master cartons and inner packaging labels if applicable. See Exhibit 1 (Page 9) for example.

Net weight statement requirements

Food and drug product must conform to U.S. Federal and/or international regulations covering unit of measure labeling. A net weight statement must be present on selling unit and shipping container, if one and the same.

Specific to Poly Bags

Due to state laws, all poly bags less than 1 MIL thick MUST be labeled as:

"Warning: To avoid danger of suffocation, keep this plastic bag away from babies and children. Do not use this bag in cribs, beds, carriages, or playpens. The plastic bag could block nose and mouth and prevent breathing. This bag is not a toy."

Bags **MUST** be heat sealed or taped.

- 1. Heat seal **MUST** withstand normal handling.
- 2. Tape MUST be a minimum of 3/4 "
- 3. Fold-over flaps **MUST** be taped.

Inner Boxes: DO NOT pack poly-bagged merchandise in inner boxes within a master carton (unless specifically requested).

Jewelry Items

All individual packages for all jewelry items must be labeled with the Amway sku number along with the country of origin in English and French. For watches, the country of origin should be stated for the movement.

PACKAGING REQUIREMENTS

<u>GENERAL</u>

When shipping case is too small for pallet handling and storage, master cartons are to be used. Preferred size for master cartons is W=11", H=10", L=25". Dimensions larger than the recommended measurements require approval from your ABG/Amway Buyer.

<u>REMAILERS</u> (individual reshippers)

Certain ABG selling units in various programs may require remailers. This recommendation will be indicated on the Confirmation Letters that are sent out to suppliers, or you may contact your ABG/Amway Buyer with questions. Please note: Remailer carton size must be consistent from shipment to shipment for the life of the program. All items in the Ribbon Gift & Incentive program require individual remailers and cannot be prepriced.

ABG individual reshipper (remailer) carton requirements are as follows:

Reshipper to be minimum 200 pound test, C-flute single wall corrugated carton with all flaps secured **(totally sealed)** for shipping and handling. Container must be plain brown carton unless pre-approved by ABG/Amway Buyer. Reshipper and protective inner packing must be able to meet UPS and Parcel Post shipping requirements, which include ASTM test method D999 and D775. *See Exhibit 2 (Page 10)* for drop test procedure. Minimum carton size is 3³/₄ X 5["] X ³/₄ for warehouse handling.

For hazardous or ORM-D products, corrugate requirement are as follows:

20 pounds or less - 200 pound test or 32 ECT (Edge Crush Test) Greater than 20 pounds - 275 pound test or 44 ECT

PALLET SPECIFICATIONS AND LABELING

- See Exhibit 3 (Page 11) for pallet diagram.
- 48" X 40" 4-way entry pallets are to be used.
- All pallets must have a minimum under clearance of 3^{5/8}" for fork entry.
- Skid deck must be smooth and free of nail protrusions, knots, and other damaging projections.
- Pads (corrugate, fiber, etc) are not to be used between pallet and product.

All pallets must conform with "specification and grades for hardwood warehouse permanent or returnable pallets" of the National Wooden Pallet and Container Association. Access Business Group requires a GMA #1 or better pallet. Pallets made of ash will not be accepted.

- ABG does not exchange pallets.
- ABG will except CHEP pallets. ABG status with CHEP is an active nonparticipant.

Only one ABG part number/SKU or vendor UPC/model number to a pallet is allowable. Mixed

• production dates on a pallet are acceptable if clearly marked and identified. See Exhibit 4 (Page 12).

Please record the part number/SKU and the quantities or each production date accurately on the

- worksheet. The worksheet must then be placed on the front of the pallet under the shrink-wrap, or securely attached inside the shrink-wrap.
- Pyramidal pallet loads are not acceptable.
- Overall height of units including pallets is not to exceed 53".
- Containers must not extend over the perimeter of the pallet base. Cartons should be placed right side up on pallets.

Gross weight of product and pallet should not exceed 3,000 pounds. Product is to be secured by

- stretched wrap or plastic banding. Preferred gross weight of individual cartons is 30 pounds, not to exceed 40 pounds.
- Pallet patterns (tie and tier) for each stock number must be consistent and not change from pallet to pallet or order to order.

PACKING SLIP REQUIREMENTS

Packing slips must accurately reflect the information provided on our purchase orders (reference numbers, units of measure, etc.) in order to properly receive and match accurately with invoices to ensure timely payment.

- The packing slip must be located on the exterior of the last pallet or container loaded on each trailer and must be easily accessible.
 - Shipments of less than the truckload must have the packing slip located on the exterior of one of the pallets.
- The envelope must be clearly marked "packing slip."
- The envelope must be securely attached to prevent accidental removal, but not stapled so as to hinder removal or tear papers. It is recommended that adhesive-backed envelopes be used when possible.
- The packing slip must indicate the Access Business Group part number/SKU (Stock Number), vendor UPC or model number, and full 7 digit purchase order number from the purchase order contract.
- The packing slip must indicate whether it is a partial or complete order and state "partial" on incomplete orders.
- Packing slips must indicate complete breakdown of ABG part number/SKU or vendor UPC model number, quantities per order with corresponding production dates on products with shelf life.
- The packing list unit of measure must be the same as the purchase order unit of measure.

SHIPPING AND TRANSPORTATION

GENERAL

Multiple orders shipping within the same week and destined for the same location should be consolidated and shipped on one Bill of Lading. The shipment should be coordinated to ensure all orders deliver by the earliest requested delivery date. On-time delivery is measured by ensuring products are delivered no sooner than five (5) days prior to the requested arrival date, and no later than the requested arrival date.

All shipments under 150 pounds do NOT require delivery appointments and FedEx Ground is the preferred method of shipment.

All shipments (prepaid or collect) over 150 pounds require delivery appointments.

Please call our Global Transportation Department at 888-765-9572, option 3, to schedule a delivery appointment.

COLLECT SHIPMENTS

The instructions below are for all COLLECT orders/shipments, which are arranged by our North American Logistics-Transportation Department in Ada, Michigan, when shipping your product(s) to Access Business Group facilities. We are asking your support in complying with the below requirements when communicating a pickup request.

IMPORTANT INSTRUCTIONS ROUTING GUIDE/SHIPPING INFORMATION

For all order/shipments less than 150 pounds

Ship parcels weighing less than 150 pounds and with COLLECT terms via FedEx Ground <u>COLLECT</u>. (Any exceptions will have to be determined and agreed upon by ABG.)

- Purchase Order Numbers **must** be noted in the reference field.
- FedEx will invoice shipping charges directly to Amway.
- FedEx Ground <u>COLLECT</u> does **not** require the use of an Amway account number for billing purposes when you create a shipping label. Vendors will ship on their own account number.
- Amway will **not** provide a FedEx account number to vendors.
- FedEx Ground <u>COLLECT</u> labels can be generated from FedEx Software, <u>www.fedex.com</u>, using a pre-printed label provided by FedEx, or via in-house shipping systems.
- If you need assistance with the FedEx Ground <u>COLLECT</u> process, please visit <u>www.fedex.com</u>. See Exhibit 8 (Page 16).

For all orders/shipments greater than 150 pounds

Forty-eight (48) hours prior to the *ship available date* provided on your purchase order, call the ABG transportation vendor line toll free at 1-888-765-9572 and select Option 2. This number is available 24 hours a day EST beginning 11 p.m. Sunday evening to 11 p.m. Friday evening. You will be asked to provide detailed information regarding your shipment to ensure accurate scheduling.

- All purchase order/line numbers available for pick up (ex. 18564 OP).
- Total pieces, pallets, weight, and/or cube.
- Ship from location and location ID number (see below).
- Ship to location
- Pickup date and promised delivery date/due date
- Supplier reference/confirmation number (if utilized).
- Commodity, i.e., raw materials, hazardous, temperature sensitive, etc.

We reserve the right to reject and return any merchandise that fails our quality inspection processes or to charge you with any expenses incurred including an additional \$80 charge for administrative processing in preparing merchandise for shipment because of your failure to comply with the requirements of this specification.

Any of the above requirements that cannot be complied with must be approved by the buyer.

SHIPPING AND TRANSPORTATION (continued)

Once the shipment is accepted by our carrier (within 1-2 days), a confirmation sheet will be faxed to the shipper. Our carrier will call to confirm the pickup date and schedule an appointment, if required.

Note: The location ID number referenced above is indicated on the Pickup Confirmation sheet. To help expedite future call-in requests, please retain this ID number and refer to it when scheduling subsequent orders/ shipments.

Bill of Lading provided to the carrier **must** include:

- ABG Trip Number (boxed in on the confirmation sheet.) See Exhibits 5 and 6 (Page 13 and 14).
- All Purchase Order and PO Line numbers being shipped.
- Marked Third Party Bill to:

Access Business Group (Amway) Freight Payment, 80-1A 7575 Fulton Street East Ada, MI 49355 For Canada Only orders: Amway Canada Corporation PO Box 7777 London Station Maine London Ontario N5Y 5V6

Access Business Group's facilities are all equipped with modern, adjustable dock plates which can service standard semi-trailer rigs with decks from 47" to 57" in height. Flatbed trailers, moving vans, pickup trucks, single axle trucks and the like cannot be used to make deliveries.

ABG utilizes 3,500 pound capacity forklifts during the unloading process. All Carriages should be substantial enough to accept entry of these machines. Truck drivers will be expected to follow all dock safety rules and established ABG receiving procedures while on the plant property. All ABG properties have a ban on any tobacco product usage.

INVOICE REQUIREMENTS

To avoid delays and to ensure prompt and accurate payments, we request that you construct your invoice in accordance with the information noted below.

E-Mail all non-EDI invoices, for the United States to <u>ap.invoices@amway.com</u>, for Canada to <u>accounts.payable.ca@amway.com</u>

We are required to have a completed W9 on file for your company prior to making any payments to you. The required form is available through the IRS website <u>www.irs.gov/irs-pdf/fw9.pdf</u> or we have a link from our supplier site at <u>www.supplier.alticor.com</u>. Choose the **purple** link entitled USA, choose Accounts Payable from the list along the left side of the site.

Another form located on this site that you should also complete is:

ACH Enrollment Form. This will facilitate an electronic payment being sent to you. Non-ACH payments are subject to a delay. *Please fill out the form in Exhibit 7 (Page 15) and e-mail it to <u>address.book@amway.com</u>.*

If you need assistance or have any questions, for United States contact <u>ap.support@amway.com</u> or for Canada <u>ap.inquiry.ca@amway.com</u>.

Each Invoice must contain the following:

- Supplier Name and Address
- Payee Name and Remit to Address
- Supplier Telephone and Fax Number
- Supplier Invoice Number
- Supplier Invoice Date
- ABG Purchase Order Number and PO Order Type. The invoice will be returned to the supplier if the PO number and PO order type is not provided. If the purchase order number and order type was not provided by ABG, please include a contact name and telephone number
- Supplier Payment Terms per purchase order contract
- Bill of Lading Number
- Shipment Date
- · Quantity shipped per purchase order per line number
- Description Product name or trade name, ABG part number/SKU, vendor UPC/model number, ABG description
- Unit Price
- Billing Unit of Measure
- Net Amount
- Pallet cost, if applicable
- Freight costs, if applicable. Include the freight carrier, PRO/Tracking Number and Trailer Number
- Tax, if applicable Michigan Direct Pay to Michigan Permit Number is F38-1736584
- Total Amount Due

SAMPLE SHIPPING LABELS

Description must be in English and French if product is sold in Cananda.

Hazardous products require ORMD labeling on the outside of each carton.

MASTER SHIPPER LABEL

SKU

DESCRIPTION

of eaches (lowest transactional unit)

Julian Date

BAR CODE (Optional)

(Import products must include vendor part number and country of origin)

INNER LABELS (carton/case/bundle/pack, etc.)



DESCRIPTION

of eaches (lowest transactional unit)

Julian Date

BAR CODE (Optional)

(Import products must include vendor part number and country of origin)

SKU needs to match the stock number on the Purchase Order excluding 0000's that may follow a SKU.

Example: 701234, 701234R1, 701234R2

Julian Date of manufacture, is the year followed by the day of the year.

Example: 9236

9 being the year of manufacture 2009, 236 being the 236th day of 2009.

EXHIBIT 2

DROP TEST PROCEDURES

1. With the package in its stable shipping position, face one end of the container with the manufacturer's joint on the observer's right.

STEP A: Identify the surfaces as follows:

- #1 top
- #2 right side
- #3 bottom
- #4 left side
- #5 near end
- #6 far end



STEP B: Identify the edges by the numbers of the two surfaces which form that edge. For example, the edge formed by the top and right side is identified as 1-2.

STEP C: Identify corners by the numbers of the three surfaces which meet to form that corner. For example, the corner formed by the right side, bottom, and near end is identified as 2-3-5.

Note: Any flat surface, such as a table top, may be used if set at the prescribed height, dropping package onto a hard, flat floor.

2. Determine drop weight as follows:

Package weighs 1 – 21 lbs.	 Set height at 30 inches
Package weighs 22 – 40.99 lbs.	 Set height at 24 inches
Package weighs 41 – 60.99 lbs.	 Set height at 18 inches
Package weighs 61 – 100.00 lbs.	 Set height at 12 inches

3. Drop package from predetermined height, in the following order: Let go of package. DO NOT THROW.

- A. 2-3-5 corner first
- B. shortest edge radiating from that corner
- C. next longest edge radiating from same corner E
- D. largest edge radiating from same corner
- E. flat on one of the smallest sides
- F. flat on opposite smallest side
- G. flat on one of the medium sides
- H. flat on opposite medium side
- I. flat on one of the largest sides
- J. flat on opposite largest side



4. After completing the TEN drops, open package and inspect for damage.

Note:

Package is <u>acceptable</u> if there is not damage to the item and the package still affords reasonable protection. Package is <u>unacceptable</u> if the item comes open during testing, the item is damaged, or no longer affords reasonable protection to the item.



The drawing below is a sketch of a "GOOD" 48" x 40" 4-way GMA #1 or better pallet.

NOTE: Deck board spacing requirements



STRINGERS:

Not split through or broken. No double stringers. No block patches.

MIXED PRODUCTION DATES

SKU#_____

PRODUCTION DATE	QUANTITY
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TRUCK LOAD EXAMPLE



Pickup Confirmation

Contact: (888) 765-9572, Option 2

* Please attach this sheet to the carrier's Bill of Lading *									
JASPER PRODU 7702 EAST ALLIA APPT REQUIRED	NCE PK MO 8333] WY-CROSS 64804							
TRIP NUMBER: 00000097556MThe trip number must be referenced on the carrier's BOL along with the Bill To address below.Bill To:Amway Corporation, Freight Payment 80-1A 7575 Fulton Street East Ada, MI 49355									
Carrie Available Da Promised Delive	t e: 4/30		E LLC Weight: Skids:		395		er will call to co edule an appoi		
Pickup/Refe PO Number	s): 76 [°] JD	711MQ E 05/04 OOD GRADE				SPAULDI	BUSINESS NG SERVIC ULDING PL	CE CEN	-

Routing Guide link: www.supplier.alticor.com > USA > Shipping



LESS THAN TRUCK LOAD

EXAMPLE



Pickup Confirmation

Contact: (888) 765-9572, Option 2

* Please attach this sheet to the carrier's Bill of Lading *					
Location ID: 2963422 IKEDA 147-06 176TH ST					
JAMAICA NY 11434					
Phone: Fax:					
TRIP NUMBER:00000359377SThe trip number must be referenced on the carrier's BOL along with the Bill To address below.					
	Bill To:	Amway Corporation, Freight Payment 80-1A 7575 Fulton Street East Ada, MI 49355			
Carrier*: UPS FREIGHT		*The carrier will call to confirm the pickup date and schedule an appointment, if required.			
Available Date: 4/27/2012	Weight: 785				
Promised Delivery: 4/30/2012	Skids: 1				
Pickup/Reference #: NA		Ship To:			
PO Number(s): 736046OP1000 SS		MID WEST REGIONAL SERVICE CENTER ACCESS BUSINESS GROUP LLC			
PKGIII		7575 FULTON STREET EAST ADA MI 49355			
Pickup/Reference #: NA		Ship To:			
PO Number(s): 733740OP1000 SS		MID WEST REGIONAL SERVICE CENTER ACCESS BUSINESS GROUP LLC 7575 FULTON STREET EAST			
PKGIII		ADA MI 49355			

Routing Guide link: www.supplier.alticor.com > USA > Shipping

ACH ENROLLMENT FORM

VENDOR INFORMATION						
Vendor Name:						
Vendor Address:						
Date: Federal Taxpayer ID:						
Account Status:	count Profile					
BANK INFORMATION						
We would like our disbursements paid via ACH and deposited in the following bank account						
Account Type: Checking Savings						
Bank Name:						
Bank Routing Number:						
Bank Account Number:						
Bank Address: 0	Dity:					
	ate:					
Attach one of the following (check one): Zip Co	ode:					
Bank letter or specification sheet (see your bank representative for information)						
Vendor authorizes Alticor Inc. and its affiliates (individually and collectively referred hereinafter as "Alticor") to initiate electronic credit entries ("ACH Entries") to the bank account shown above (the "Account"). Each ACH Entry that Alticor initiates to the Account shall be subject to the terms of this authorization and the Operating Rules of the National Automated Clearinghouse Association ("NACHA"), as those rules are amended from time to time. This authorization shall remain in full force and effect until Alticor receives written notice from Vendor of its termination and Alticor and Vendor's bank have had a reasonable opportunity to act on the termination notice. Alticor is authorized to initiate credits and debits to the Account to correct any transactions credited/debited in error.						
THIS SECTION COMPLETED BY THE VE	NDOR					
Deta						
Date: Approved by:						
Telephone Number:						
E-mail Address for EFT Confirmation:						
THIS SECTION COMPLETED BY ALTICOR						
Date Received: Approved by:						
Date Entered: Entered by:						
MONTH/DAY/YEAR						

EXHIBIT 8

From www.fedex.com, click on the Ship drop down menu and select Create Shipment.

- Login with your User ID and Password
 - If you do not have a FedEx account, please call 1-866-883-9290 to set up a new account.
- The form below will appear, Please fill out all * areas with the information provided.

	1. From	⊘ <u>Help</u> ⊞ <u>Edit</u>	4. Billing Details ⑦ Help	Select		
Diagon kov	Your Company Nam Michigan, 49546, Uni	e, 1234 Your Company Address, Ada, ted States	* Bill transportation to Collect (Authorized Ground Accounts (Collect (Authorized		
Please key address as	2. To	⊘ <u>Help</u> ⊟ <u>Hide</u>	☐ More reference fields	Ground Accounts		
shown and include your	* Country/Location	United States	P.O. no. Enter ABG PO Number Here	Only) from the drop		
ABG	Company * Contact name	Amway 🗸	Invoice no. Department no.	down box.		
Name.	* Address 1	7575 E Fulton Street		Please		
	Address 2	44-1F	Special Services (optional) ② Help Image: Edit Select additional services for your shipment	key in the Amway		
	* City	Ada	Pickup/Drop-off (optional) ② <u>Help</u> ⊞ <u>Edit</u>	PO		
	* State * Phone no.	Michigan 💌	You are dropping off your package at a FedEx location.	Number in this field.		
	⊕ Perform detailed ad	dress check	E-mail Notifications (optional) ② Help 🗄 Edit			
		 This is a residential address Save new recipient in address book 	Send an e-mail to yourself, the recipient or others indicating the status of your shipment.			
Select FedEx	3 Package & S	hipment Details ② <u>Help</u> 🗆 <u>Hide</u>	Rates & Transit Times (optional)			
Ground	* Ship date	06/20/2012	Amounts are shown in USD Select Service and Transit Time Your Rate			
from the drop down	* No. of packages		Enter more information to get rates and transit times.			
box.	Weight ⑦ Declares Value ②	U.S. Dollars]		
	* Service type	FedEx Ground	5. Complete your Shipment ② Help			
	* Package type	Your Packaging	\square Create a Shipment Profile to store recipient, package and all			