

THE SYSTEMS HOUSE
MASTER DISTRIBUTION DOCUMENTATION

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STARTUP

MASTER DISTRIBUTOR STARTUP INSTRUCTIONS

The Master Distributor System developed by The Systems House is a comprehensive set of business application programs designed to serve the needs of companies in the distribution and wholesale industries.

Contained in MDS are the modules needed to perform the day-to-day operational functions of the company such as order entry, invoicing, inventory control, purchasing and accounts payable. By design, these modules provide, as a by-product, the accounting information needed to report on the performance of the corporation, and to serve as a tool for management to direct future activities of the organization.

The modules included in MDS are:

- * Order Entry
- * Invoicing
- * Accounts Receivable
- * Accounting Reports
- * Pricing and Discounting
- * Costing and Inventory Evaluation
- * Inventory Management and Control
- * Raw Materials Inventory Control
- * Purchase Order Management
- * Physical Inventory Procedures
- * Sales Analysis
- * Accounts Payable
- * Payroll
- * Fixed Assets Accounting
- * General Ledger
- * Financial Reporting
- * Point of Sale
- * Vendor Transmissions
- * COS
- * Lot Control
- * Warranty Tracking

The objective of this document is to provide specific operating instructions to those who will work with the system on a day-to-day basis.

STARTUP

MASTER DISTRIBUTOR STARTUP INSTRUCTIONS (CONTINUED)

The following sheets contain, for each module, a list of items that will be covered during each training session.

After you have completed training for a specific module:

1. Review the sheets with your trainer and check off the topic covered.
2. Write in any additional comments, if necessary.
3. Sign the sheets and return them to us.

MASTER FILE LOAD SHEET INSTRUCTIONS

The following pages also includes load sheets for the master file programs. The master file load sheets contain the information necessary to enter your master file data into the MDS systems.

You may make copies of these documents and use them whenever a new master file needs to be created or modified or during initial master file setup.

MDS BACKUP RECOMMENDATIONS

We recommend that you consistently create backup copies of your system. This will help ensure adequate recovery from potential system and environmental problems, as well as to provide you with a 'snapshot' of your data should a need occur at some time in the future.

While the schedule shown below will provide a basic level of recoverability, we suggest that it be reviewed with your legal and accounting advisors.

DAILY BACKUPS

We recommend that you back up all your data files daily. Retain each days backup for 10 days.

WEEKLY BACKUP

We recommend that each week at the close of business you create two backups, the second is used for offsite storage of your data. Retain each at least 5 weeks.

MONTHLY (PERIOD END)

Prior to running your month or period end procedures, we recommend:

Accounts Receivable - run a normal days end backup.

Accounts Payable - Run a normal days end backup. The A/P and G/L backup can be used if closing needs to be run during the day.

G/L - Run the A/P, G/L backup provided.

Note: We recommend a separate backup even if you are running the A/P and G/L closings sequentially.

Retain these backups for thirteen months (fourteen periods). We suggest that a second copy of monthly backups be kept offsite for added safety.

MDS BACKUP RECOMMENDATIONS

ANNUAL (FYE)

Prior to running year end procedures, run the month end backups as above. In addition, a complete system backup should be made. The backup should include data, application programs, and the operating system. This backup should be created in duplicate with one copy going offsite.

PROGRAMS

Whenever programs are added or changed, we suggest that the program files be backed up.

GENERAL

Most backup procedures overwrite the data that exists on the tape or diskette being used. For this reason, a backup tape or diskette should be used once, and not again, until its retention period is over. Most magnetic media has a write protection device that should be used to prevent inadvertent erasure.

MASTER FILE LOAD SHEETS

The following pages contain load sheets for the Master file programs. You may make copies of these documents and use them whenever a new master file needs to be created or modified or during initial master file setup.

The sheets contain the information needed to complete an entry of a specific Master file. The Master files are included on the sheets:

1. Product Master
2. Product Detail
3. Price Maintenance
4. Kit Master Maintenance
5. Product Notes
6. Customer Master Maintenance
7. Customer Detail Maintenance
8. Ship-To Maintenance
9. Salesman Master Maintenance
10. Terms Master Maintenance
11. Contract Price File Maintenance
12. Contract Detail File Maintenance
13. Price 2 Maintenance
14. Vendor Master Maintenance
15. Vendor Detail Maintenance
16. Chart Of Accounts Maintenance
17. Company Master Maintenance

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

Check One	Addition	—
	Deletion	—
	Change	—
EX PROD #:	_____	(25)
1. DESC. 1	_____	(25)
2. DESC. 2	_____	(25)
3. VENDOR #	_____	(8)
4. VND PROD/DESC	_____	(22)
5. PURCH AGENT	_____	(20)
6. UNIT PACK	_____	(5)
7. BOX QTY	_____	(5)
8. CASE QTY	_____	(5)
9. STOCK UM	_____	(2)
10. PRC/COST UM	_____	(2)
11. STD SELL UM	_____	(3)
12. PRUCH UM	_____	(2)
13. MIN SOLD QTY	_____	(6)
14. LIST PRICE	_____	(8)

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

	Check One	Addition	—
		Deletion	—
		Change	—
15.	STANDARD COST	_____	(8)
16.	CURRENT COST	_____	(8)
17.	FOREIGN COST	_____	(8)
18.	SHOW COST	_____	(8)

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
19.	CASH %	_____			(5)
20.	DISCOUNTABLE	_____			(1)
21.	TAXABLE	_____			(1)
22.	DISCONTINUED	_____			(1)
23.	ACCEPT B/O	_____			(1)
24.	PART. SHIP	_____			(1)
25.	INV BYPASS	_____			(1)
26.	STOCK STATUS	_____			(1)
27.	PROD LINE	_____			(6)
28.	PROD CLASS	_____			(3)
29.	PROD TYPE	_____			(3)
30.	WEIGHT	_____.			(7)
31.	PKG CUBE	_____			(10)
32.	BLOCK & TIER	_____		X	(5)

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
33.	CAT PAGE	_____			(5)
34.	LEAD TIME	_____.			(5)
35.	SUB IND	_____			(1)
36.	SUB PROD #	_____			(25)
37.	SUB PRC IND	_____			(1)
38.	MIN GP	_____.			(5)
39.	DISC BREAK IND	_____			(1)
40.	MIN PO QTY	_____			(5)
41.	UNITED	_____			(1)
42.	UNITED STOCK IND	_____			(1)
43.	NO WIPEOUT	_____			(1)
44.	DROPSHIP IND	_____			(1)

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
45.	MNF PROD#	_____			(15)
46.	UNITED PROD#	_____			(15)
47.	CONTRACT COST	_____.			(8)
48.	EXIRATION DATE	_____/_____/_____			(8)
49.	WARRANTY PD	_____			(4)
50.	SERIAL	_____			(1)
51.	QTY FACTOR	_____.			(8)
52.	SEASONAL	_____			(1)
53.	TEMP ITEM	_____			(1)

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

Check One Addition ___
 Deletion ___
 Change ___

- | | | | |
|-----|-----------------|-------------------|----------------|
| 54. | VENDOR | PRODUCT # | ACTIVE |
| | 1. _____ (2) | _____ (15) | ____ (Y/N) (1) |
| | 2. _____ (2) | _____ (15) | ____ (Y/N) (1) |
| 55. | TRANS SHIP IND | _____ | (1) |
| 56. | GROUP NUMBER | _____ | (1) |
| 57. | CONTROLLED DRUG | _____ | (1) |
| 58. | EXPIRATION DATE | _____/_____/_____ | (8) |
| 59. | REBATABLE | _____ | (1) |
| 60. | NDC NUMBER | _____ | (15) |
| 61. | NSN NUMBER | _____ | (13) |
| 62. | BLANKET P.O. | _____ | (1) |
| 63. | P.O. GROUP | _____ | (20) |
| 64. | DEA TYPE | _____ | (2) |
| 65. | MDS FLAG | _____ | (1) |

FORM # 1
DATE ___/___/___

PRODUCT MASTER FILE MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
66.	CATCH WGHT FLAG	_____			(1)
67.	MIN AVERAGE WGHT	_____			(5)
68.	MAX AVERAGE WGHT	_____			(5)
69.	SUPP METHOD	_____			(1)
70.	CUSTOMER	_____			(13)
71.	DISPOSITION	_____			(1)
72.	OWNING CO#	_____			(2)
73.	MARK UP PERCENT	_____			(5)

FORM # 2
DATE ___/___/___

PRODUCT DETAIL MAINTENANCE

Check One	Addition	—
	Deletion	—
	Change	—
EX PROD #:	_____	(25)
WAREHOUSE #:	_____	(3)
1. LAST COST	_____	(8)
2. STD COST	_____	(8)
3. MESSAGE	_____	(30)
4. WAREHOUSE LOC		
1. LOC 1	_____	(5)
2. LOC 2	_____	(5)
3. LOC 3	_____	(5)
4. LOC 4	_____	(5)
5. OH NEGATIVE IND	_____	(1)
6. LOT LOGIC IND	_____	(1)
7. UNIT/LEN QTY	_____	(1)
8. CYCLE COUNT CODE	_____	(3)

FORM # 2
DATE ___/___/___

PRODUCT DETAIL MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- 9. USAGE OVERRIDE _____ (6)
- REASONS _____ (30)
- _____ (30)
- DATE (MM/DD/YY) _____/_____/_____ (8)
- EXPIRATION _____/_____/_____ (8)

FORM # 2
DATE ___/___/___

PRODUCT DETAIL MAINTENANCE

Check One	Addition	—
	Deletion	—
	Change	—
13. PLT OVERRIDE	_____.	(3)
REASON	_____	(30)
	_____	(30)
DATE (MM/DD/YY)	_____/_____/_____	(8)
EXPIRATION	_____/_____/_____	(8)
14. LINE PT OVERRIDE	_____	(6)
REASON	_____	(30)
	_____	(30)
DATE (MM/DD/YY)	_____/_____/_____	(8)
EXPIRATION	_____/_____/_____	(8)
15. STOCKED AT WHSE	_____	(1)
16. VELOCITY	_____	(1)
17. TREND SOURCE	_____	(1)
18. SEASONAL	_____	(1)
19. REPLEN METHOD	_____	(1)
20. PO COST OVERRIDE	_____.	(5)

FORM # 2
DATE ___/___/___

PRODUCT DETAIL MAINTENANCE

	Check One	Addition	—
		Deletion	—
		Change	—
21.	REPLENISH FLAG	_____	(3)
22.	LOCATIONS	_____	(5)
23.	ENVIRONMENTAL	_____	(1)

FORM # 3
DATE ___/___/___

PRICE MAINTENANCE

Check One Addition —
 Deletion —
 Change —

1.	A.	QTY BREAK	B.	PRICE	C.	DISC%	D.	COMM%
1.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
2.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
3.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
4.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
5.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
6.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
7.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
8.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
9.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
10.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
11.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
12.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
13.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
14.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)
15.	_____	(6)	_____	(8)	____.____	(5)	____.____	(5)

FORM # 4
DATE ___/___/___

KIT MASTER MAINTENANCE

Check One Addition ___
 Deletion ___
 Change ___

EX PROD # _____ (25)

1.	COMPONENT PROD #		COMPONENT QTY
1.	COMP 1	_____ (25)	_____ (6)
2.	COMP 2	_____ (25)	_____ (6)
3.	COMP 3	_____ (25)	_____ (6)
4.	COMP 4	_____ (25)	_____ (6)
5.	COMP 5	_____ (25)	_____ (6)
6.	COMP 6	_____ (25)	_____ (6)
7.	COMP 7	_____ (25)	_____ (6)
8.	COMP 8	_____ (25)	_____ (6)
9.	COMP 9	_____ (25)	_____ (6)
10.	COMP 10	_____ (25)	_____ (6)
11.	COMP 11	_____ (25)	_____ (6)
12.	COMP 12	_____ (25)	_____ (6)
13.	COMP 13	_____ (25)	_____ (6)
14.	COMP 14	_____ (25)	_____ (6)
15.	COMP 15	_____ (25)	_____ (6)

FORM # 5
DATE ___/___/___

PRODUCT NOTES

Check One Addition ___
 Deletion ___
 Change ___

WAREHOUSE _____ (3)

PRODUCT _____ (25)

1. NOTES

DATE _____ (8)

NOTE _____ (35)

OUTPUT _____ (1)

A - ALL SYSTEMS
P - PURCHASING
C - CUSTOMER SERVICE

FORM # 6
DATE ___/___/___

CUSTOMER MASTER MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
	EX CUST #:	_____			(13)
1.	SLD TO NA	_____			(25)
2.	SLD TO A1	_____			(25)
3.	SLD TO A2	_____			(25)
4.	SLD TO A3	_____			(25)
5.	CITY A4	_____			(25)
6.	STATE	_____			(2)
7.	ZIP	_____ - _____			(9)
8.	DEA CODE	_____			(1)
9.	A/R CONT	_____			(20)
10.	PHONE #	_____	_____	_____	(10)
11.	FAX #	_____	_____	_____	(10)
12.	MASTER AR #	_____			(13)
13.	CUST CLS	_____			(2)
14.	CUST TYPE	_____			(2)
15.	TERRITORY	_____			(2)

FORM # 6
DATE ___/___/___

CUSTOMER MASTER MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
16.	SPEC INST	_____			(20)
17.	CONTRACT#	_____			(13)
18.	PURCH CONTACT	_____			(20)
19.	PURCH PHONE	_____			(10)
20.	SHIPTO CODE	_____			(1)
21.	SHIP METHOD	_____			(2)
22.	SHIP ZONE	_____			(3)
23.	TERMS CODE	_____			(2)
24.	TAXABLE	_____			(1)
25.	TAX JURIS	_____			(5)
26.	TAX EXEMPT #	_____			(15)
27.	SERV. CHRGR	_____			(1)
28.	CREDIT METH	_____			(2)
29.	CREDIT LIM	_____			(7)
30.	CREDIT HOLD	_____			(1)
31.	ACCEPT B/O	_____			(1)
32.	ACCEPT PART	_____			(1)

FORM # 6
DATE ___/___/___

CUSTOMER MASTER MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
33.	ACCEPT SUB	_____			(1)
34.	INV COPIES	_____			(1)
35.	DEPT#	_____			(5)
36.	PRC HLD EXEMPT	_____			(5)
37.	ALC PRIORITY	_____			(1)
38.	DUN FLG	_____			(1)
39.	DEA #	_____			(9)
40.	DEA EXP. DATE	_____			(8)
41.	LN TYPE	_____	_____		(2)
		_____	_____		(2)
42.	LICENSE NO.	_____			(15)
43.	MED DATA SHEET	_____			(1)
44.	CYBIND	_____			(1)
45.	SERV CO#	_____			(2)
46.	SERV WHSE	_____			(3)
47.	HOSPITAL ID#	_____			(7)
48.	#BEDS THIS YR	_____			(4)

FORM # 6
DATE ___/___/___

CUSTOMER MASTER MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- 49. #BEDS LAST YR _____ (4)
- 50. #BEDS PREV YR _____ (4)
- 51. #ADMISSIONS THIS YR _____ (4)
- 52. #ADMISSIONS LAST YR _____ (4)
- 53. #ADMISSIONS PREV YR _____ (4)

FORM # 7
DATE ___/___/___

CUSTOMER DETAIL FILE MAINTENANCE

Check One	Addition	—
	Deletion	—
	Change	—
COMPANY:	_____	(2)
CUST #:	_____	(13)
1. SALESMAN	_____	(3)
2. STATEMENT	_____	(1)
3. CREDIT LIM	_____	(7)
4. PRICE POINT	_____	(2)
5. DISC POINT	_____	(2)
6. COMM POINT	_____	(2)
7. COMM %	_____._____	(4)
8. TOTAL DISC	_____._____	(4)
9. INCLUDE S1	_____	(1)
10. INCLUDE S3	_____	(1)
11. INCLUDE S4	_____	(1)
12. INCLUDE S5	_____	(1)
13. INCLUDE S6	_____	(1)
14. INCLUDE S7	_____	(1)
15. SALESMAN 2	_____	(3)

FORM # 7
DATE ___/___/___

CUSTOMER DETAIL FILE MAINTENANCE

	Check One	Addition	Deletion	Change	
		—	—	—	
16.	TEMPLATE #	_____			(15)
17.	PRODUCT LINE/SLSM	_____	_____		(6, 3)
		_____	_____		(6, 3)
		_____	_____		(6, 3)
		_____	_____		(6, 3)
18.	INVOICE COMPLETE	_____			(1)
19.	DELETE FLAG	_____			(1)

FORM # 8
DATE ___/___/___

SHIPTO MAINTENANCE

Check One Addition ___
 Deletion ___
 Change ___

- CUST #: _____ (13)
- SHIPTO #: _____ (6)
- 1. SHIPTO NAME _____ (25)
- 2. SHIPTO ADDR1 _____ (25)
- 3. SHIPTO ADDR2 _____ (25)
- 4. SHIPTO ADDR3 _____ (25)
- 5. CITY _____ (15)
- 6. STATE _____ (2)
- 7. ZIP CODE _____ (10)
- 8. DEA CODE _____ (1)
- 9. SHIP METHOD _____ (2)
- 10. SHIP ZONE _____ (3)
- 11. SPEC INSTR _____ (25)
- 12. TAX JURIS _____ (5)
- 13. TAX EXEMPT # _____ (10)
- 14. SERV.WHSE _____ (3)

FORM # 9
DATE ___/___/___

SALESMAN MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

16. PRODUCT CLASS

- | | | | | | |
|----|-------|-----|----|-------|-----|
| 1. | _____ | (3) | 5. | _____ | (3) |
| 2. | _____ | (3) | 6. | _____ | (3) |
| 3. | _____ | (3) | 7. | _____ | (3) |
| 4. | _____ | (3) | 8. | _____ | (3) |

FORM # 11
DATE ___/___/___

CONTRACT PRICE FILE MAINTENANCE

Check One Addition ___
 Deletion ___
 Change ___

- CUSTOMER: _____ (13)
- PRODUCT: _____ (20)
- 1. BEGIN DATE _____/_____/_____ (8)
- 2. END DATE _____/_____/_____ (8)
- 3. PRICE _____.(_____) (8)
- 8. NEW EFFECTIVE DATE _____/_____/_____ (8)
- 9. NEW PRICE _____.(_____) (8)
- 10. CUST ITEM # _____ (25)
- 11. COMM % _____ (5)
- 12. QUANTITY BREAK

LINE	QTY	PRICE	DISC%	COMM%
___ (1)	_____ (6)	____.__(8)	____.__(4)	____.__(4)
___ (1)	_____ (6)	____.__(8)	____.__(4)	____.__(4)
___ (1)	_____ (6)	____.__(8)	____.__(4)	____.__(4)

NOTE: Fields 4 through 7 are display only fields.

FORM # 12
DATE ___/___/___

CONTRACT DETAIL FILE MAINTENANCE

	Check One	Addition	—
		Deletion	—
		Change	—
	CONTRACT #	_____	(15)
	VENDOR #	_____	(8)
	PRODUCT LINE	_____	(6)
	PRODUCT #	_____	(25)
1.	VENDORS CONTRACT #	_____	(15)
2.	CONTRACT TYPE (C/P/S/)	_____	(1)
3.	CONTRACT BEGIN DATE	_____/_____/_____	(8)
4.	CONTRACT ENDING DATE	_____/_____/_____	(8)
5.	SELL PRICE DISC %	_____._____	(4)
6.	AGREEMENT SELL PRICE	_____._____	(11)
7.	MINIMUM ORDER UM	_____	(2)
8.	MINIMUM ORDER QTY	_____	(5)
9.	CUST ITEM #	_____	(25)
10.	NET REBATE COST	_____._____	(11)
11.	REBATE% ABOVE COST	_____._____	(4)
12.	REBATE% OFF PRICE	_____._____	(4)
13.	HANDLING PERCENTAGE	_____._____	(4)

FORM # 13
DATE ___/___/___

PRICE.2 MAINTENANCE (PRICE MATRIX)

Check One Addition ___
 Deletion ___
 Change ___

EXT CUSTOMER# _____ (13) CUSTOMER NAME:

INT# ADDRESS:

1.	LN#	P/C	PRODUCT CLASS DESCRIPTION	DISC %
	1	_____	(3)	____.____ (5)
	2	_____	(3)	____.____ (5)
	3	_____	(3)	____.____ (5)
	4	_____	(3)	____.____ (5)
	5	_____	(3)	____.____ (5)
	6	_____	(3)	____.____ (5)
	7	_____	(3)	____.____ (5)
	8	_____	(3)	____.____ (5)
	9	_____	(3)	____.____ (5)
	10	_____	(3)	____.____ (5)

FORM # 14
DATE ___/___/___

VENDOR MASTER MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- VENDOR NO: _____ (8)
- 1. VENDOR NAME: _____ (25)
- 2. ADDRESS-1: _____ (25)
- 3. ADDRESS-2 : _____ (25)
- 4. CITY-STATE: _____ (25)
- 5. ZIP: _____ (10)

****PURCHASE ORDER ADDRESS****

- 6. _____ (25)
- 7. _____ (25)
- 8. _____ (25)
- 9. _____ (25)
- 10. _____ (10)
- 11. CONTACT: _____ (15)
- 12. TELEPHONE: _____ (10)
- 13. FED ID/SS#: _____ (10)
- 14. 1099 REQ: (Y/N) _____ (1)
- 15. MISC DATA1: _____ (25)

VENDOR MASTER MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- 16. MISC DATA2: _____ (25)
- 17. VEND CLASS: _____ (5)
- 18. STD G/L # _____ (16)
- 19. TEMP VEND _____ (1)
- 20. DUNS# _____ (10)
- 21. A/R CUST#: _____ (13)
- 22. PAY STATUS: _____ (1)

****CORRESPONDENT BANK****

- 23. _____ (25)
- 24. _____ (25)
- 25. _____ (25)
- 26. _____ (25)
- 27. _____ (10)
- 28. FRT PD CUTOFFS _____ (5)
- 29. CURRENCY _____ (4)
- 30. PO TYPE _____ (1)
- 31. FAX PHONE # _____ (10)

FORM # 15
DATE ___/___/___

VENDOR DETAIL MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- CO#: _____ (2)
- 1. BANK #: _____ (3)
- 2. DISC PCT: _____ (4)
- 3. DUE DAYS: _____ (3)
- 4. DISC DAYS: _____ (2)
- 5. CUTOFF DATE: _____ (2)
- 6. DUE DATE: _____ (2)
- 7. DISC DATE: _____ (2)

FORM # 16

DATE ___/___/___

CHART OF ACCOUNTS DESCRIPTION MAINTENANCE

Check One Addition ___
 Deletion ___
 Change ___

COMPANY NUMBER _____ (2)

ACCOUNT NUMBER _____ (8)

1. DESCRIPTION _____ (30)

2. TYPE _____ (1)

3. CATEGORY _____ (1)

4. SOCIFC: _____ (2)

10. ACCT HIST FLAG (D/S) _____ (1)

5. P&L LINE#	6. YTD FLAG	7. SCHD#	8. SCHED LN#	9 ALT REPORT#
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)
_____ (2)	_____ (1)	_____ (1)	_____ (2)	_____ (1)

FORM # 17
DATE ___/___/___

COMPANY MASTER MAINTENANCE

Check One	Addition	___
	Deletion	___
	Change	___

- | | | | |
|-----|-----------------|-----------------------|------|
| | COMPANY NUMBER | _____ | (2) |
| 1. | COMPANY NAME | _____ | (25) |
| 2. | ADDRESS 1 | _____ | (25) |
| 3. | ADDRESS 2 | _____ | (25) |
| 4. | CITY | _____ | (15) |
| 5. | STATE | _____ | (2) |
| 6. | ZIP | _____ - _____ | (9) |
| 7. | PHONE | _____ - _____ - _____ | (10) |
| 8. | REGISTRATION | _____ | (15) |
| 9. | DEA# | _____ | (9) |
| 10. | P&L BREAK GL# | _____ | (16) |
| 11. | A/P GL# | _____ | (16) |
| 12. | EARNED DISC GL# | _____ | (16) |
| 13. | RETAIN EARN GL# | _____ | (16) |
| 14. | INTER CASH GL# | _____ | (16) |
| 15. | INTER A/P GL# | _____ | (16) |
| 16. | CURR YR EARNGS | _____ | (11) |

FORM # 17
DATE ___/___/___

COMPANY MASTER MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
17.	FISCAL MONTH	_____			(2)
18.	JOURNAL ENTRY#	_____			(6)
19.	VOUCHER#	_____			(6)
20.	GL FORMAT	_____			(16)
21.	GL MATCH	_____			(16)
22.	VENDOR FORMAT	_____			(8)
23.	VENDOR MATCH	_____			(8)
24.	CUSTOMER FORMAT	_____			(13)
25.	CUSTOMER MATCH	_____			(13)
26.	INTERNAL CUSTOMER#	_____			(6)
27.	PRODUCT FORMAT	_____			(25)
28.	PRODUCT MATCH	_____			(15)
29.	INTERNAL PRODUCT#	_____			(6)
30.	CRED AUTH PASSWORD	_____			(6)
31.	CRED REL PASSWORD	_____			(6)
32.	NUMBER CREDIT DAYS	_____			(3)
33.	CASH DISC%	_____			(5)

FORM # 17
DATE ___/___/___

COMPANY MASTER MAINTENANCE

	Check One	Addition	Deletion	Change	
		___	___	___	
34.	MINIMUM ORDERS\$	_____			(6)
35.	CASH METHOD	_____			(2)
36.	WRITE OFF%	_____			(5)
37.	WRITE OFF\$	_____			(7)
38.	GLOBAL MSG	_____			(25)
39.	FAX PHONE	_____			(10)
40.	FRT CUTOFF\$	_____			(5)
41.	AP ALLOWANCE #	_____			(6)
42.	FRT HOLD \$	_____			(5)
43.	FRT HOLD %	_____			(5)
44.	FRT MAX \$	_____			(5)
45.	FRT MAX %	_____			(5)
46.	FRT MIN \$	_____			(5)
47.	FRT MIN %	_____			(5)
48.	AP MDSE GL#	_____			(13)
49.	AP FRT GL#	_____			(13)
50.	AP MISC GL#	_____			(13)

FORM # 17
DATE ___/___/___

COMPANY MASTER MAINTENANCE

	Check One	Addition	Deletion	Change
		—	—	—
51.	AP DISC GL#	_____		(13)
52.	AP DEBIT GL#	_____		(13)
53.	AP CREDIT GL#	_____		(13)
54.	FOR. GAIN/LOSS GL#	_____		(13)
55.	CHECK DS FRT	_____		(1)
56.	NAME	_____		(25)
57.	ADDR1	_____		(25)
58.	ADDR2	_____		(25)
59.	CITY	_____		(15)
60.	STATE	_____		(2)
61.	ZIP	_____		(10)
62.	PHONE	_____		(12)

THE SYSTEMS HOUSE
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