

Customer Master Training Guide



Customer Related Files

Maintain

- 1. Alpha Customer
- 2. Change Alpha Cust#
- 3. Customer / Ship to
- 4. Country Code Maintenance
- 5. State Code Maintenance
- 6. Salesman
- 7. Customer Type
- 8. Customer Class
- 9. Customer Group
- 10. Service Charge**
- 11. Tax Rate
- 12. Terms
- 13. Territory
- 14. Shipping Menu
- 15. Mailing System
- 16. Prospect Master
- 17. Order Template Menu
- 18. Commission Type
- 19. Facility
- 20. GPO

Listing

- 21. Alpha Customer
- 22. Country
- 23. State Code
- 24. Salesman
- 25. Customer Type
- 26. Customer Class
- 27. Customer Group
- 28. Service Charge
- 29. Tax Rate
- 30. Terms
- 31. Territory
- 32. Mailing System
- 33. Prospect Master
- 34. Label Menu
- 35. Commission Type
- 36. Facility
- 37. GPO

Enter Selection or END :

CONTACTS	MAINT	DRILL	EXECINQ	REPORTS	CAPT OFF	VIEW	CRM.MENU	VRM.MENU		
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off		Popup

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ALPHA CUSTOMER MAINTENANCE

CUST NAME

MESSLER

1.CUST NO

100197

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

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HELP	OK/END	INSERT	LDELETE	PFEVPG	NEXT PG	INQUIRY	CANCEL	Off			Рзррр
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ALPHA CUSTOMER NUMBER MAINTENANCE

OLD ALPHA CUST # KESSLER

INTERNAL CUST # 100197

NEW ALPHA CUST #

r1r

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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Customer / Ship-to Maintenance

1. Customer Master Maintenance

2. Customer Detail Maintenance

3. Ship-To Maintenance

4. Customer Notes Maintenance

5. Customer Product Order Notes Maintenance

Enter Selection or END :

	CONTACTS	MAINT	DRILL	EXECINQ	REPORTS	CAPT OFF	VIEW	CRM.MENU	VRM.MENU		
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup

Customer Master Maintenance

Internal #

100197

Created

07/02/01

Customer# KESSLER

1.Name KESSLER REHAB GROUP
 2.Address 1 100 CENTRAL AVE
 3.Address 2
 4.Address 3
 5.City EAST ORANGE
 6.State NJ Country
 7.Zip Code 07002 8.Res/Comm C
 9.DEA Code
 10.A/R Contact
 11.Telephone 973-628-3150
 12.Fax Number 973-621-2242
 13.Email
 14.Master A/R
 15.Cust Class 01 HOSPITALS
 16.Cust Type 02 DOCTORS,CLINICS
 17.Cust Group
 18.Territory
 19.Spec Inst
 20.Purch Cont
 21.Purch Phone

22.Spec Prc Cont#
 23.Ship to Code
 24.Ship Method
 25.Ship Zone
 26.Terms Code
 27.Taxable
 28.Tax Juris
 29.Tax Exempt #
 30.Service Chg
 31.Credit Method
 32.Credit Limit
 33.Credit Days
 34.Credit Hold
 35.Accept B/O
 36.Accept Partial
 37.Accept Subs
 38.Department
 39.Prc Hld Exempt
 40.ALC Priority
 41.Inactive Flag

R
 01 UPS
 01 NET 30
 N
 NJ NEW JERSEY
 Y # Days 90
 00
 10000
 N
 Y
 Y
 Y
 N

XXXXXX

PAGE 1 OF 5

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	NOTES	INQUIRY	CANCEL	Off	Userfile	PopUp
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 13.EMail
 14.Master A/R
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 23.Ship to Code R
 24.Ship Method 01 UPS
 25.Ship Zone
 26.Terms Code 01 NET 30
 27.Taxable N
 28.Tax Juris NJ NEW JERSEY
 29.Tax Exempt #
 30.Service Chg Y # Days 90
 31.Credit Method 00
 32.Credit Limit 10000
 33.Credit Days
 34.Credit Hold N
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Customer Master Maintenance Internal# 100197

Customer# KESSLER

42.Dea# 55.Freight Class

43.Dea Exp Date 56.Charge Freight Y

44.Drug Type 1. 57.Frt Surcharge % 0.00

2. 58.Frt Surcharge \$ 0.00

45.License # 59.Frt Min Dol 0

46.Med Data Sht N 60.EDI Cust#

47.Monthly Bill N 61.Recv 850.EDI N

48.Serv Co# 01 62.Send 855 EDI N

49.Serv Whse 001 63.Send 856 EDI N

50.Hospital ID# 64.Send 810 EDI N

51.Admin Fee % 0.00 65.Cust.PO # Y

52.Label Fee 0.00 66.Wild Card

53.Facility 67.DUNS Number

54.Credit Card Data 68.Dunning Flag N

Type Card# Exp Verify#

Name : Corp

Type Card# Exp Verify#

Name : Corp

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Name : Corp

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Customer Master Maintenance Internal# 100197

Customer# KESSLER

Manifest/Routing Info

78.Call Day 3 WEDNESDAY

79.Primary Route NJ Stop 10 NJ ROUTE

80.Secondary Route Stop

Customer Form Flags

81.Pack Slip Template

82.Pick Slip Price N 88.Combined Statement

83.Pack Slip Copies 89.Sort Invoice

84.Invoice at Packing Fax Form Fax Number

85.Print Order Conf 90.Pickslip

86.Invoice Copies 1 91.Packslip

87.Intl Customer Flag 92.Invoice

E-Mail Form

E-Mail Address

93.Pickslip

94.Packslip

95.Invoices

96.GPO

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E-Mail Form

E-Mail Address

93.Pickslip

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Customer Master Maintenance Internal# 100197

Customer# KESSLER

97.Customer Serv Rep SF SYFERTIG

A/R Contact A/R Phone 973-628-3150

A/R EMail

Purch Contact Purch Phone

98.Additional Contacts

	Contact Name	Description	Phone#	Fax#	Ext
	E-Mail Address				
1					
2					
3					
4					
5					

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

PAGE 4 OF 5

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Customer Master Maintenance Internal# 100197
Customer# KESSLER

Remote Net Info/Flags
69.Percent Usage
70.Display Pricing
71.Reg Date Flag
72.Dept No. Flag
73.Customer PO Flag
74.Reg # Flag
75.Ordered-By Flag
76.Association Codes

77.Authenticate Flag

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

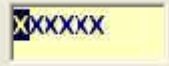
PAGE 5 OF 5

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CUSTOMER DETAIL MAINTENANCE

COMPANY	01	TSHMEDICAL SUPPLY	
CUST #	KESSLER		KESSLER REHAB GROUP
1.SALESMAN	004	INHOUSE SALES	
2.STATEMENT	Y		
3.CREDIT LIM		0	18.INVOICE COMPLETE N
4.PRICE POINT			19.DELETE FLAG
5.DISC POINT			
6.COMM POINT			
7.COMM %		0.00	
8.TOTAL DISC		0.00	
9.INCLUDE S1	Y		
10.INCLUDE S3	Y		
11.INCLUDE S4	Y		
12.INCLUDE S5	Y		
13.INCLUDE S6	Y		
14.INCLUDE S7	Y		
15.SALESMAN 2			
16.TEMPLATE#			
17.PRODUCT LINE/SALESMAN			
1.			
2.			
3.			

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

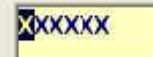


HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Page
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CUSTOMER DETAIL MAINTENANCE

COMPANY	01	TSHMEDICAL SUPPLY	
CUST #	KESSLER		KESSLER REHAB GROUP
1.SALESMAN	004	INHOUSE SALES	
2.STATEMENT	Y		
3.CREDIT LIM		0	18.INVOICE COMPLETE N
4.PRICE POINT			19.DELETE FLAG
5.DISC POINT			
6.COMM POINT			
7.COMM %		0.00	
8.TOTAL DISC		0.00	
9.INCLUDE S1	Y		
10.INCLUDE S3	Y		
11.INCLUDE S4	Y		
12.INCLUDE S5	Y		
13.INCLUDE S6	Y		
14.INCLUDE S7	Y		
15.SALESMAN 2			
16.TEMPLATE#			
17.PRODUCT LINE/SALESMAN			
1.			
2.			
3.			

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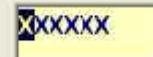


HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рзррр
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2.STATEMENT	Y		
3.CREDIT LIM		0	18.INVOICE COMPLETE N
4.PRICE POINT			19.DELETE FLAG
5.DISC POINT			
6.COMM POINT			
7.COMM %		0.00	
8.TOTAL DISC		0.00	
9.INCLUDE S1	Y		
10.INCLUDE S3	Y		
11.INCLUDE S4	Y		
12.INCLUDE S5	Y		
13.INCLUDE S6	Y		
14.INCLUDE S7	Y		
15.SALESMAN 2			
16.TEMPLATE#			
17.PRODUCT LINE/SALESMAN			
1.			
2.			
3.			

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

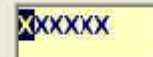


HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Page
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CUSTOMER DETAIL MAINTENANCE

COMPANY	01	TSHMEDICAL SUPPLY	
CUST #	KESSLER		KESSLER REHAB GROUP
1.SALESMAN	004	INHOUSE SALES	
2.STATEMENT	Y		
3.CREDIT LIM		0	18.INVOICE COMPLETE N
4.PRICE POINT			19.DELETE FLAG
5.DISC POINT			
6.COMM POINT			
7.COMM %		0.00	
8.TOTAL DISC		0.00	
9.INCLUDE S1	Y		
10.INCLUDE S3	Y		
11.INCLUDE S4	Y		
12.INCLUDE S5	Y		
13.INCLUDE S6	Y		
14.INCLUDE S7	Y		
15.SALESMAN 2			
16.TEMPLATE#			
17.PRODUCT LINE/SALESMAN			
1.			
2.			
3.			

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :



HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рзррр
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Ship To Maintenance

Customer #

KESSLER

KESSLER REHAB GROUP

Ship To #

R

1.Ship To Name

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

19.Pick Priority

2.Ship To Addr1

20.DEA#

3.Ship To Addr2

21.DEA Expires

4.Ship To Addr3

22.License#

5.City

23.Drug Type

6.State

Country

1

7.Zip Code

8.DEA Code

2

9.Ship Method

24.Phone#

3

10.Ship Zone

25.Res/Com

11.Special Instr

29.Pack Slip Template

12.Tax Juris.

13.Tax Exempt #

30.Facility

14.Service Whse

15.Admin Fee %

0.00

31.Inactive Flag

16.Primary Route

Stop

17.Secondary Route

Stop

18.Attention

Ship To Maintenance

Customer #

KESSLER

KESSLER REHAB GROUP

Ship To #

R

1.Ship To Name

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

19.Pick Priority

2.Ship To Addr1

20.DEA#

3.Ship To Addr2

21.DEA Expires

4.Ship To Addr3

22.License#

5.City

23.Drug Type

6.State

Country

1

7.Zip Code

8.DEA Code

2

9.Ship Method

24.Phone#

3

10.Ship Zone

25.Res/Com

11.Special Instr

29.Pack Slip Template

12.Tax Juris.

13.Tax Exempt #

14.Service Whse

30.Facility

15.Admin Fee %

0.00

31.Inactive Flag

16.Primary Route

Stop

17.Secondary Route

Stop

18.Attention

Ship To Maintenance

Customer #

KESSLER

KESSLER REHAB GROUP

Ship To #

R

1.Ship To Name

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

19.Pick Priority

2.Ship To Addr1

20.DEA#

3.Ship To Addr2

21.DEA Expires

4.Ship To Addr3

22.License#

5.City

23.Drug Type

6.State

Country

1

7.Zip Code

8.DEA Code

2

9.Ship Method

24.Phone#

3

10.Ship Zone

25.Res/Com

11.Special Instr

29.Pack Slip Template

12.Tax Juris.

13.Tax Exempt #

30.Facility

14.Service Whse

15.Admin Fee %

0.00

31.Inactive Flag

16.Primary Route

Stop

17.Secondary Route

Stop

18.Attention

Ship To Maintenance

Customer #

KESSLER

KESSLER REHAB GROUP

Ship To #

R

1.Ship To Name

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

19.Pick Priority

2.Ship To Addr1

20.DEA#

3.Ship To Addr2

21.DEA Expires

4.Ship To Addr3

22.License#

5.City

23.Drug Type

6.State

Country

1

7.Zip Code

8.DEA Code

2

9.Ship Method

24.Phone#

3

10.Ship Zone

25.Res/Com

11.Special Instr

29.Pack Slip Template

12.Tax Juris.

13.Tax Exempt #

30.Facility

14.Service Whse

15.Admin Fee %

0.00

31.Inactive Flag

16.Primary Route

Stop

17.Secondary Route

Stop

18.Attention

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off	SnagIt	Popup
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Customer #

KESSLER

KESSLER REHAB GROUP

Ship To #

R

26.PRODUCT LINE/SALESMAN

1.	---		
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

27.SALESMAN 1

28.SALESMAN 2

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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Customer Notes Maintenance

Valid Output Codes

Customer#

KESSLER
KESSLER REHAB GROUP

A - All Systems
O - Order Entry
AR - Accounts Receivable

1.Line	Note	Date	Output	Expires	Co	Print
1.	-----					
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

Customer Notes Maintenance

Valid Output Codes

Customer#

KESSLER
KESSLER REHAB GROUP

A - All Systems
O - Order Entry
AR - Accounts Receivable

1.Line	Note	Date	Output	Expires	Co	Print
1.	REVIEW ALL ORDER WITH CREDIT	10/10/06	A		ALL	N
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						

Customer Product Order Notes Maintenance

Customer	KESLER
	KESLER REHAB GROUP
Product	02-AL
	ANKLE STIRRUP AIRCAST LFT

Print on

Line	Note	Pick Ticket	Invoice
1.	-----		
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

Customer Product Order Notes Maintenance

Customer	KESSLER
	KESSLER REHAB GROUP
Product	02-AL
	ANKLE STIRRUP AIRCAST LFT

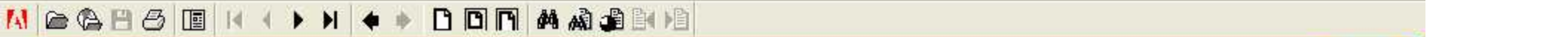
Print on

Line	Note	Pick Ticket	Invoice
1.	VERIFY MINIMUM SELL QUANTITY OF 12		Y
2.			N
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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PAGE 1 ***** CUSTOMER MASTER FILE LISTING ***** DATE 10:08:51am 16 Oct 2006

CUST.MAST.	A.CUST.NO....	NAME AND ADDRESS.....	TAXABLE TAX JURIS	A/R CONT.....	PHONE.NO.....	TC	CM	CRLIM..
100636	BNDA	BAHAMAS NATIONAL DRUG AGENCY P.O. BOX 85431 NASSAU FF	N			01	05	0
100635	FS	PCOD SERVICES P.O. BOX 21314 NASSAU FF	N			01	05	0
100497	GUTMH	GUTTENBURG MUN HOSPITAL 2ND & MAIN GUTTENBURG IA 52052	N	IAG		01	05	10,000
100197	KESSLER	KESSLER REHAB GROUP 100 CENTRAL AVE EAST ORANGE NJ 07002	N	NJ	973-628-3150	01	00	10,000
100631	LMHS	LEE MEMORIAL HDSP FT MYERS FL 30912	N			01	05	0
100476	MARCOV	MICHAEL MARCOWITZ MD 4360 KENNEDY BLVD	Y	IAG	718-555-1212	01	04	5,000



PAGE 1 *****CUSTOMER DETAIL FILE***** DATE 10:20:19am 15 Oct 2006

CUST#.....	CUST.NO	CO#	CUSTOMER NAME.....	SLSM	STMT	PRICE	DISC%	DISC	COMM%	COMM	CREATE.DT	SALES \$. YTD...
UMC	100139	01	UNIVERSITY MEDICAL CENTE	001	Y		0.00		0.00		05/29/01	154,384
MERCYKFP	100156	01	MERCY KALONA FAM PRACTIC	004	Y		0.00		0.00		06/01/01	3,259
MERCYCSA	100172	01	MERCY CARE 2ND AVENUE	003	Y		0.00		0.00		06/07/01	4,572
MERCYCJA	100178	01	MERCY CARE JOHNSON AVENU	003	Y		0.00		0.00		07/18/01	24,017
MERCYWL	100181	01	MERCY SERVICE WEST LIBER	004	Y		0.00		0.00		06/18/01	8,544
MERCYCVV	100184	01	MERCY CARE VERNON VILLAG	003	Y		0.00		0.00		06/19/01	17,483
MERCYCMAR	100190	01	MERCY CARE MARION	003	Y		0.00		0.00		06/20/01	32,030
KESSLER	100197	01	KESSLER REHAB GROUP	004	Y		0.00		0.00		07/02/01	55,842
MERCYCIND	100205	01	MEDICAL ASSOCIATES OF	003	Y		0.00		0.00		07/06/01	37,310
MERCYCB	100240	01	MERCY CARE BLAIRSFERRY	003	Y		0.00		0.00		07/20/01	20,596
MERCYMCC	100293	01	MERCY MEDICAL CENTER	004	Y		0.00		0.00		08/08/01	1,408
STANFORD	100307	01	STANFORD UNIVERSITY	001	Y		0.00		0.00		08/13/01	0
MERCYIC	100330	01	MERCY HOSPITAL	002	Y		0.00		0.00		08/30/01	804
MERCYSIC	100335	01	MERCY SERVICES IOWA CITY	002	Y		0.00		0.00		08/31/01	0
MERCYFC	100353	01	MERCY FITNESS CENTER	003	Y		0.00		0.00		09/14/01	1,458



PAGE 1 *****CUSTOMER SHIP TO FILE LIST***** DATE 10:27:03am 16 Oct 2006

A.CUST.NO.... SHIP.# NAME AND ADDRESS..... SHIP.METH SHIP.ZONE SPEC.INST..... TAX.JUR TAX.EXEMPT

STANFORD	ORIHOS	DEPT OF ORTHOTIC SCIENCE	01		IAG
		ST AMBROSE UNIVERSITY			
		C/O CHRIS HVORKA			
		1536 HARRISON STREET			
		DAVENPORT IA 52803			

UMC	052803	PEDIATRIC CARDIOLOGY	01		IAG
		1236 166TH AVE			
		FAX 353-8447			
		NEW YORK NY 10017			

UMC	BOWEN	UNIVERSITY MEDICAL CENTER	01	FAX TY 353-5970	IAG
		43321 7TH AVENUE			
		FAX 353-5970 TY			
		NEW YORK NY 10018-2345			

UMC	CDENT	UNIVERSITY MEDICAL CENTER	01		IAG
		COLLEGE OF DENTISTRY			
		NEW YORK NY 10019-1460			

UMC	CHSPEC	CHILD HEALTH SPECIALTIES	01	CREDIT CARD	IAG
		ROOM 230 CCD			
		NEW YORK NY 10019			

UMC	CWS	UNIVERSITY MEDICAL CENTER	01		IAG
		CHILDREN & WOMENS SERVICE			
		2331 3RD AVENUE			

Country Code Maintenance

Country Code 000

1.Description

U.S.A.

2.Freight System Desc

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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State Code NJ

1.Description

NEW JERSEY

2.Time Zone

1 Eastern Time

3.Foreign

N


ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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SALESMAN MAINTENANCE

Salesman #

1.Warehouse

2.Territory

3.Name

4.Address 1

5.Address 2

6.Address 3

7.City

8.State

9.Zip Code

10.Phone Number

11.Email Address

12.Commission %

13.Sales Quota

14.Commissionable

15.Vendor

16.PLine

GL#

17.Laptop

18.Goal

19.Comm Type

20.P/C

Description

Comm%

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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SALESMAN MAINTENANCE

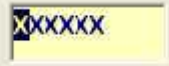
Salesman #

1.Warehouse
 2.Territory
 3.Name
 4.Address 1
 5.Address 2
 6.Address 3
 7.City
 8.State
 9.Zip Code
 10.Phone Number
 11.Email Address
 12.Commission %
 13.Sales Quota
 14.Commissionable
 15.Vendor
 16.PLine
 GL#

17.Laptop
 18.Goal
 19.Comm Type

20.P/C	Description	Comm%
<input type="text" value="1."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="3."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="4."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="5."/>	<input type="text"/>	<input type="text"/>

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :



HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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SALESMAN MAINTENANCE

Salesman #

1.Warehouse

2.Territory

3.Name

4.Address 1

5.Address 2

6.Address 3

7.City

8.State

9.Zip Code

10.Phone Number

11.Email Address

12.Commission %

13.Sales Quota

14.Commissionable

15.Vendor

16.PLine

GL#

17.Laptop

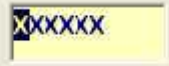
18.Goal

19.Comm Type

TEST COMM TYPE 01

20.P/C	Description	Comm%
<input type="text" value="1."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="2."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="3."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="4."/>	<input type="text"/>	<input type="text"/>
<input type="text" value="5."/>	<input type="text"/>	<input type="text"/>

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :



HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
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CUSTOMER TYPE MAINTENANCE

CUSTOMER TYPE

1.DESC

2.SALES G/L#

3.COST OF GOODS G/L#

4.SALES RTN GL#

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

CUSTOMER TYPE MAINTENANCE

CUSTOMER TYPE

01

1.DESC

HOSPITALS

2.SALES G/L#

3.COST OF GOODS G/L#

4.SALES RTN GL#

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

CUSTOMER CLASS MAINTENANCE

CUSTOMER CLASS

04

1.DESCRPTION

PHARMACY

2.FRT MIN DOLLARS

0

3.FRT SURCHARGE %

0.00

4.FRT SURCHARGE \$

0.00

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

CUSTOMER CLASS MAINTENANCE

CUSTOMER CLASS

04

1.DESCRPTION

PHARMACY

2.FRT MIN DOLLARS

0

3.FRT SURCHARGE %

0.00

4.FRT SURCHARGE \$

0.00

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

CUSTOMER GROUP MAINTENANCE

CUSTOMER GROUP

002

1.DESC

DOCTORS

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

SERVICE CHARGE MAINTENANCE

STATE

1.DESCRPTION

2.DEFAULT # OF SERVICE CHARGE DAYS

SERV CHG%

DOLLARS

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

SERVICE CHARGE MAINTENANCE

STATE

1.DESCRPTION

2.DEFAULT # OF SERVICE CHARGE DAYS

SERV CHG%

DOLLARS

1.	1.50	500.00
2.	1.00	9999.00
3.	0.00	0.00
4.	1.00	12221.00

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

TAX RATE MAINTENANCE

TAX JURISDICTION

1.TAX %

2.JUR. DESC

3.TAX G/L #

4.CHARGE TAX ON FRT

5.STATE %

6.COUNTY %

7.CITY %

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Print

TAX RATE MAINTENANCE

TAX JURISDICTION

00319

1.TAX %

2.JUR. DESC

3.TAX G/L #

4.CHARGE TAX ON FRT

5.STATE %

0.000

6.COUNTY %

0.000

7.CITY %

0.000

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Print

TERMS MAINTENANCE

TERMS CODE 01

1.DESC NET 30

2.DISC % 0.00

3.TYPE

4.TERM DAYS 30

5.DUE DAYS 0

6.CUTOFF DATE

7.DUE DATE

8.CC PROMPT N

9.VALID OVERRIDES

1	23	CREDIT CARD
2	30	COD
3		
4		
5		
6		
7		

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

TERMS MAINTENANCE

TERMS CODE 01

1.DESC NET 30

2.DISC % 0.00

3.TYPE

4.TERM DAYS 30

5.DUE DAYS 0

6.CUTOFF DATE

7.DUE DATE

8.CC PROMPT N

9.VALID OVERRIDES

1	23	CREDIT CARD
2	30	COD
3		
4		
5		
6		
7		

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

TERRITORY MAINTENANCE

TERRITORY CODE

01

1.DESC

TERRITORY 01

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэсп
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

Shipping Related Files

Maintain

Listing

1. Ship Method

6. Ship Method

2. Ship Rate

7. Ship Rate

3. Ship Zone

8. Ship Zone

4. Truck Route

9. Truck Route

5. Freight Class

10. Freight Class

Enter Selection or END :

OE	CONTACTS	MAINT	DRILL	EXECINQ	REPORTS	CAPT OFF	VIEW	CRM.MENU	VRM.MENU		
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup

Shipping

Method

Maintenance

Shipping Method

03

1.Description

FEDEX

2.Account Number

0450-6078

3.BOL Flag

4.Shipper No.

5.Ship Wait

N

6.Website URL

7.Worldship Desc

8.Saturday Del

N

9.Scale On

10.Carton Counting

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Рэпу

Shipping

Method

Maintenance

Shipping Method

03

1.Description

FEDEX

2.Account Number

0450-6078

3.BOL Flag

4.Shipper No.

5.Ship Wait

N

6.Website URL

7.Worldship Desc

8.Saturday Del

N

9.Scale On

10.Carton Counting

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Рэпу

SHIP RATE FILE MAINTENANCE

SHIP METHOD

03 FEDEX

SHIP ZONE

164

1. CALCULATION TYPE

N

2. STRAIGHT RATE/LB

0.00

3. LN# WEIGHT RATE

LN#	WEIGHT	RATE
1.	0.0	0.00
2.	0.0	0.00
3.	0.0	0.00
4.	0.0	0.00
5.	0.0	0.00
6.	0.0	0.00
7.	0.0	0.00
8.	0.0	0.00
9.	0.0	0.00
10.	0.0	0.00

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэраp
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

SHIP RATE FILE MAINTENANCE

SHIP METHOD

03 FEDEX

SHIP ZONE

164

1. CALCULATION TYPE

N

2. STRAIGHT RATE/LB

0.00

3. LN# WEIGHT RATE

LN#	WEIGHT	RATE
1.	0.0	0.00
2.	0.0	0.00
3.	0.0	0.00
4.	0.0	0.00
5.	0.0	0.00
6.	0.0	0.00
7.	0.0	0.00
8.	0.0	0.00
9.	0.0	0.00
10.	0.0	0.00

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэраp
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

SHIPPING ZONE MAINTENANCE

SHIPPING ZONE

006

1.DESC

TRI-STATE AREA

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off		Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	-------

Delivery ROUTE Maintenance

Delivery Route

NJ

1.Description

NJ ROUTE

2.Comments

ENTER LINE # TO CHANGE, ADD TO ADD STOPS, DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

Freight Class Maintenance

Freight Class Code

001

1.Description

Standard Charges

	Dollars	Charge Freight	Percent	Local Whse Only
2.Tier 1	0.00		0.00	
3.Tier 2	0.00		0.00	
4.Tier 3	0.00		0.00	

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP

OK/END

INSERT

LDELETE

PFEV PG

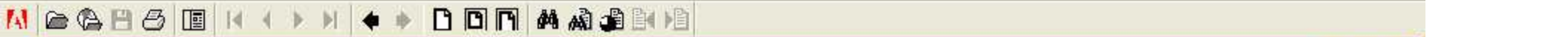
NEXT PG

INQUIRY

CANCEL

Off

Show hidden icons



PAGE 1 ****SHIPPING METHOD FILE LIST**** DATE 12:56:47pm 13 Oct 2006

SHIP.METHOD	SHIPPING DESCRIPTION	ACCOUNT NUMBER	SHIPPER #	BILL OF LADING FLAG	SHIP WAIT FLAG
01	UPS				N
02	UPS BLUE				N
03	FEDEX	0450-6078			N
04	OUR TRUCK				N

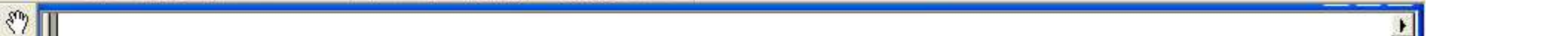
4 records listed.



PAGE 1 ***SHIPPING RATE FILE LIST*** DATE 01:18:00pm 13 Oct 2006

SHIP.KEY	SHIP. METHOD	SHIP METHOD DESCRIPTION..	SHIP ZONE	CALC.IND	WEIGHT	RATE..	LBS.RATE
01	01	UPS		UPS	0.0	0.00	0.00
02	02	UPS BLUE		UPS BLUE	0.0	0.00	0.00

2 records listed.



01:18:03pm 13 Oct 2006 PAGE 1

*** SHIPPING ZONE FILE LIST ***

SHIP_ZONE DESCRIPTION.....

100085 999999

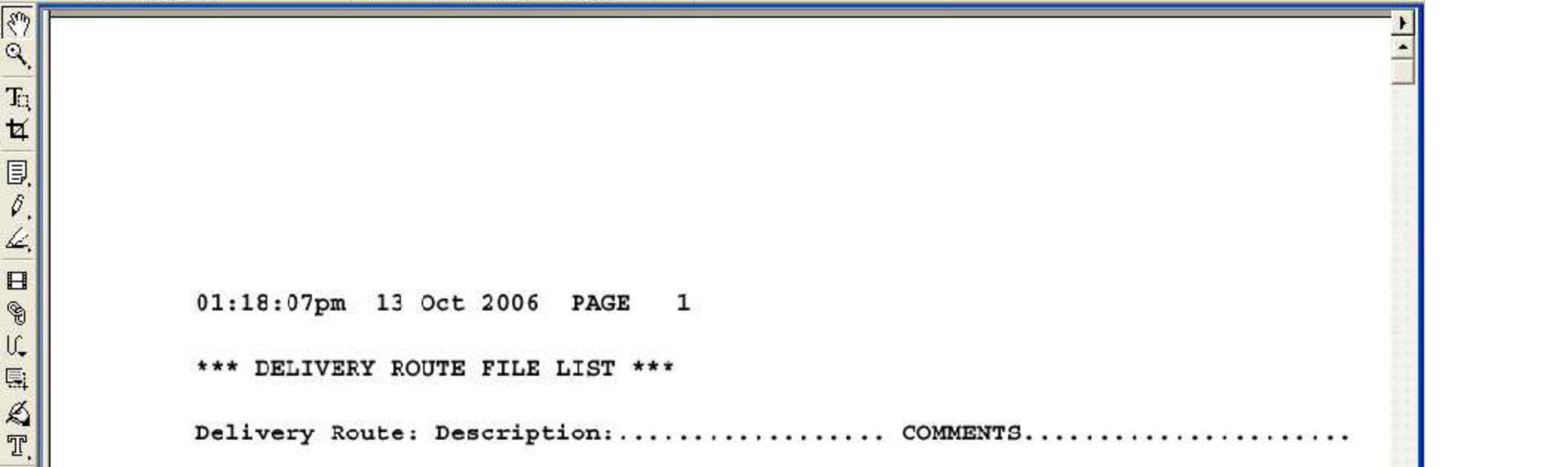
100091 ANIMAL
CHIEF
PARKS

100105 HENNLT

100106 CORALV
IOWACI
NOLIB

100108 ENT
LAB
OCCUM
ORTHO
RHEUM

100109 KATZ
LAB



01:18:07pm 13 Oct 2006 PAGE 1

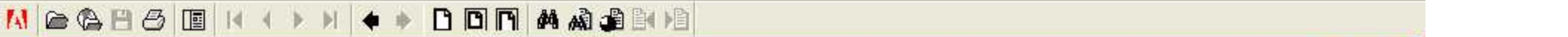
*** DELIVERY ROUTE FILE LIST ***

Delivery Route: Description:..... COMMENTS.....

NJ NJ ROUTE

NY NY ROUTE

2 records listed.



Freight Class Listing Date 13 Oct 2006 Page 1

ID..... 001
Description. Standard Charges

ID..... 002
Description. Special Charges

2 records listed.

LABEL MAINTENANCE

LABEL #

0111720

1.SLD TO NA

KAREN THOMAS

2.SLD TO A1

CRANE CHEVROLET

3.SLD TO A2

1039 ROUTE 46 EAST

4.SLD TO A3

5.CITY

CLIFTON

6.STATE

NJ

7.ZIP

07013

8.A/R CONT

KAREN THOMAS

9.PHONE #

973-888-1010

10.TYPE

AR

11.SOURCE

12.CUST

Y

13.SLSM INSIDE

003 LISA FERTIG

14.SLSM OUTSIDE

001 SYFERTIG

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

LABEL MAINTENANCE

LABEL #

0111720

1.SLD TO NA

KAREN THOMAS

2.SLD TO A1

CRANE CHEVROLET

3.SLD TO A2

1039 ROUTE 46 EAST

4.SLD TO A3

5.CITY

CLIFTON

6.STATE

NJ

7.ZIP

07013

8.A/R CONT

KAREN THOMAS

9.PHONE #

973-888-1010

10.TYPE

AR

11.SOURCE

12.CUST

Y

13.SLSM INSIDE

003 LISA FERTIG

14.SLSM OUTSIDE

001 SYFERTIG

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

Ex Prospect#

MARCOW

100476

18. Lead Source

Y

19. Current System

20. Number of Users

21. Sales Dollars

0.00

22. Number of Employees

1

23. Close Date

24. Probability of Close

25. Proposal Date

26. Competition

27. Next Step

N

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

PAGE 2 OF 2

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

UserFile

Popup

Ex Prospect#

MARCOW

100476

18. Lead Source

Y

19. Current System

20. Number of Users

21. Sales Dollars

0.00

22. Number of Employees

1

23. Close Date

24. Probability of Close

25. Proposal Date

26. Competition

27. Next Step

N

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

PAGE 2 OF 2

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

UserFile

Popup

Order Template Menu

Maintain

File List

1. Template Creation from (SALES.4)

2. Order Template

3. Order Template

Enter Selection or END :

OE	CONTACTS	MAINT	DRILL	EXECINQ	REPORTS	CAPT OFF	VIEW	CRM.MENU	VRM.MENU		
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup

Order Template Creation from (SALES.4)

1. Company	01	TSHMEDICAL SUPPLY
2. Cust Class	01	HOSPITALS
3. Number of items (Maximum of 150)		150
4. Descending Year to Date (1) Sales\$ (2) Quantity		1
5. (1) This Year (2) Last Year		1
6. Template#		0101

Press <RETURN> to Process Report, Line# to Change, or ABORT :



HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

COMPANY/ORDER TEMPLATE MAINTENANCE

CO# 01 TEMPLATE# GLOVES

1. DESC GLOVES TO BUY 2.CUST# [] []

3. PRODUCT#	PRODUCT DESCRIPTION	M/C	TEMP QTY	U/M
1.484001	GLOVES SENSICARE SM 100/B		2	BX
2.484002	GLOVES SENSICARE MD 100/B		2	BX
3.484003	GLOVES SENSICARE LG 100/B		2	BX
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

XXXXXX

Line# to Change, 'ADD' Lines, '0' to Accept, 'ABORT' or 'DELETE':

Pit Spcls	HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
-----------	------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

COMPANY/ORDER TEMPLATE MAINTENANCE

CO# 01 TEMPLATE# GLOVES

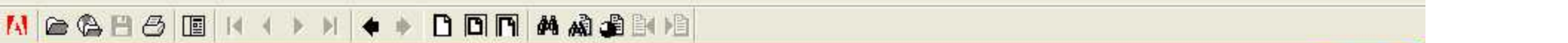
1. DESC GLOVES TO BUY 2.CUST# [] []

3. PRODUCT#	PRODUCT DESCRIPTION	M/C	TEMP QTY	U/M
1.484001	GLOVES SENSICARE SM 100/B		2	BX
2.484002	GLOVES SENSICARE MD 100/B		2	BX
3.484003	GLOVES SENSICARE LG 100/B		2	BX
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

XXXXXX

Line# to Change, 'ADD' Lines, '0' to Accept, 'ABORT' or 'DELETE':

Pit Spcls	HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
-----------	------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------



04:37:28pm 13 Oct 2006 PAGE: 1

ORD.TEMPLATE FILE LISTING

CO TEMPLATE#	DESCRIPTION
01 GLOVES	GLOVES TO BUY

**
*

1 records listed.

COMMISSION TYPE MAINTENANCE

Commission Type

00

1.Description

DEFAULT

2.Table

	GP%	Comm%
1.	25.00	5.00
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэсп
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	------

Facility File Maintenance

Facility Code

12400

1.Facility Name

2.Facility Addr1

3.Facility Addr2

4.Facility Addr3

5.City

6.State

 Country

7.Zip Code

8.Phone#

9.Contact Name

10.Chain Code

11.Chain SubCode1

12.Chain SubCode2

13.Chain SubCode3

14.Chain SubCode4

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Popup

Facility File Maintenance

Facility Code

12400

1.Facility Name

2.Facility Addr1

3.Facility Addr2

4.Facility Addr3

5.City

6.State

<input type="text"/>	Country	<input type="text"/>
----------------------	----------------	----------------------

7.Zip Code

8.Phone#

9.Contact Name

10.Chain Code

11.Chain SubCode1

12.Chain SubCode2

13.Chain SubCode3

14.Chain SubCode4

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Popup

GPO Maintenance

GPO

1412008

1.Description

FEDERATION OF DEPT. STORES

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

HELP

OK/END

INSERT

LDELETE

PFEV PG

NEXT PG

INQUIRY

CANCEL

Off

Рэпу



PAGE 2 **ALPHA CUSTOMER FILE LIST** DATE 10:02:19am 16 Oct 2006

ALPHA.CUST CUST.NO CUST.NAME.....

641-628-31 100197 KESSLER REHAB GRUP
50

973-628-31 100197 KESSLER REHAB GRUP
50

KESSLER 100197 KESSLER REHAB GRUP

319-334-25 100205 MEDICAL ASSOCIATES OF
41

MERCYCIND 100205 MEDICAL ASSOCIATES OF

319-378-83 100240 MERCY CARE BLAIRSFERRY
62

MERCYCB 100240 MERCY CARE BLAIRSFERRY

641-437-34 100293 MERCY MEDICAL CENTER
67

MERCYMCC 100293 MERCY MEDICAL CENTER

STANFORD 100307 STANFORD UNIVERSITY

319-339-36 100330 MERCY HOSPITAL
47

MERCYIC 100330 MERCY HOSPITAL





PAGE 1 **COUNTRY LIST** DATE 10:31:15am 16 Oct 2006

COUNTRY... COUNTRY.DESC..... Freight System Desc.....

020 EAHAMAS

001 CANADA

003 CHINA

004 FRANCE

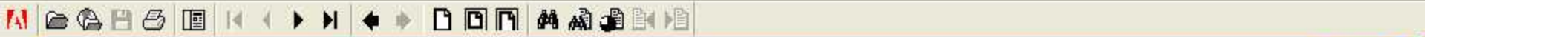
010 ISRAEL

005 ITALY

000 U.S.A.

002 UNITED KINGDOM

6 records listed.



PAGE 1 **STATE LIST** DATE 10:34:37am 16 Oct 2006

STATE.CODE DESC..... TIME.ZONE TIME.ZONE.DESC. FOREIGN

AL	ALABAMA			
AK	ALASKA			
AB	ALBERTA	1	EASTERN TIME	Y
AZ	ARIZONA	2	CENTRAL TIME	
AR	ARKANSAS			
CA	CALIFORNIA			
CZ	CANAL ZONE			
CO	COLORADO	2	CENTRAL TIME	
CT	CONNECTICUT			
DE	DELAWARE			
DC	DISTRICT OF COLOMBIA			
FL	FLORIDA			
FF	FOREIGN			Y
GA	GEORGIA			
GU	GUAM			
HI	HAWAII			
ID	IDAHO			



PAGE 1 *****SALESMAN FILE LIST***** DATE 10:36:40am 16 Oct 2006

SALESMAN.. WHSE TERR NAME AND ADDRESS..... PHONE..... COM.PER PRODUCT CLASSES.....

001 001 01 SY FERTIG 0.0000

00000

002 001 01 DAVID FERTIG 0.0000

52240

003 001 LISA FERTIG 0.0000

52240

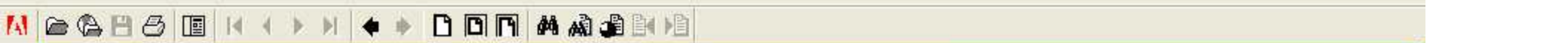
004 001 INHOUSE SALES 0.0000

52240

005 001 KEVIN LYNCH 0.0000

52240

006 001 01 RETAIL SALES 0.0000



PAGE 1 **CUSTOMER TYPE LISTING** DATE 10:43:27am 16 Oct 2006

CUST.TYPE. CUST.TP.DESC..... G/L#..... GLNAME.....

01	HOSPITALS
02	DOCTORS, CLINICS
03	NURSING HOMES
04	PHARMACY
05	MISC, SCHOOLS, MFG, ETC
06	DENTISTS
07	CHIROPRACTIC
08	VETERINARY

8 records listed.

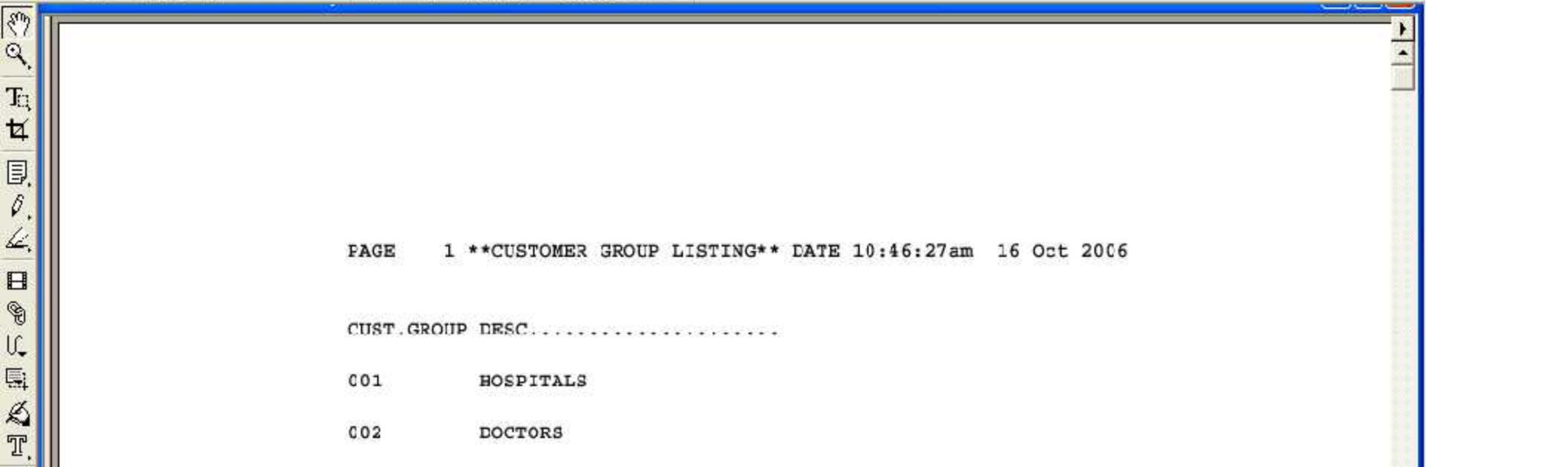
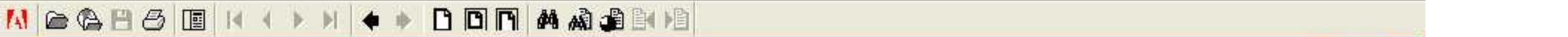


PAGE 1 **CUSTOMER CLASS LIST** DATE 10:46:21am 16 Oct 2006

CUST.CLASS DESC.....

01	HOSPITALS
02	DOCTORS, CLINICS
03	NURSING HOMES
04	PHARMACY
05	MISC, SCHOOLS, MFG, ETC
06	DENTISTS
07	CHIROPRACTIC
08	VETERINARY

8 records listed.

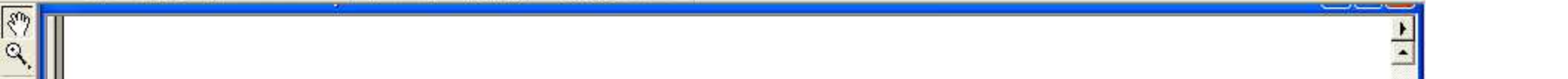
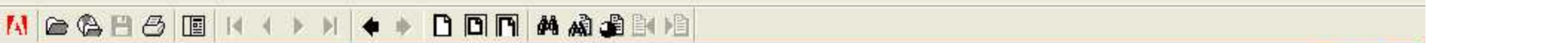


PAGE 1 **CUSTOMER GROUP LISTING** DATE 10:46:27am 16 Oct 2006

CUST.GROUP DESC.....

- 001 HOSPITALS
- 002 DOCTORS
- 003 PHARMACY
- 004 NURSING HOMES
- 005 MISC,SCHOOLS,MFG,ETC
- 006 DENTISTS
- 007 CHIROPRACTIC
- 008 VETERINARY

8 records listed.



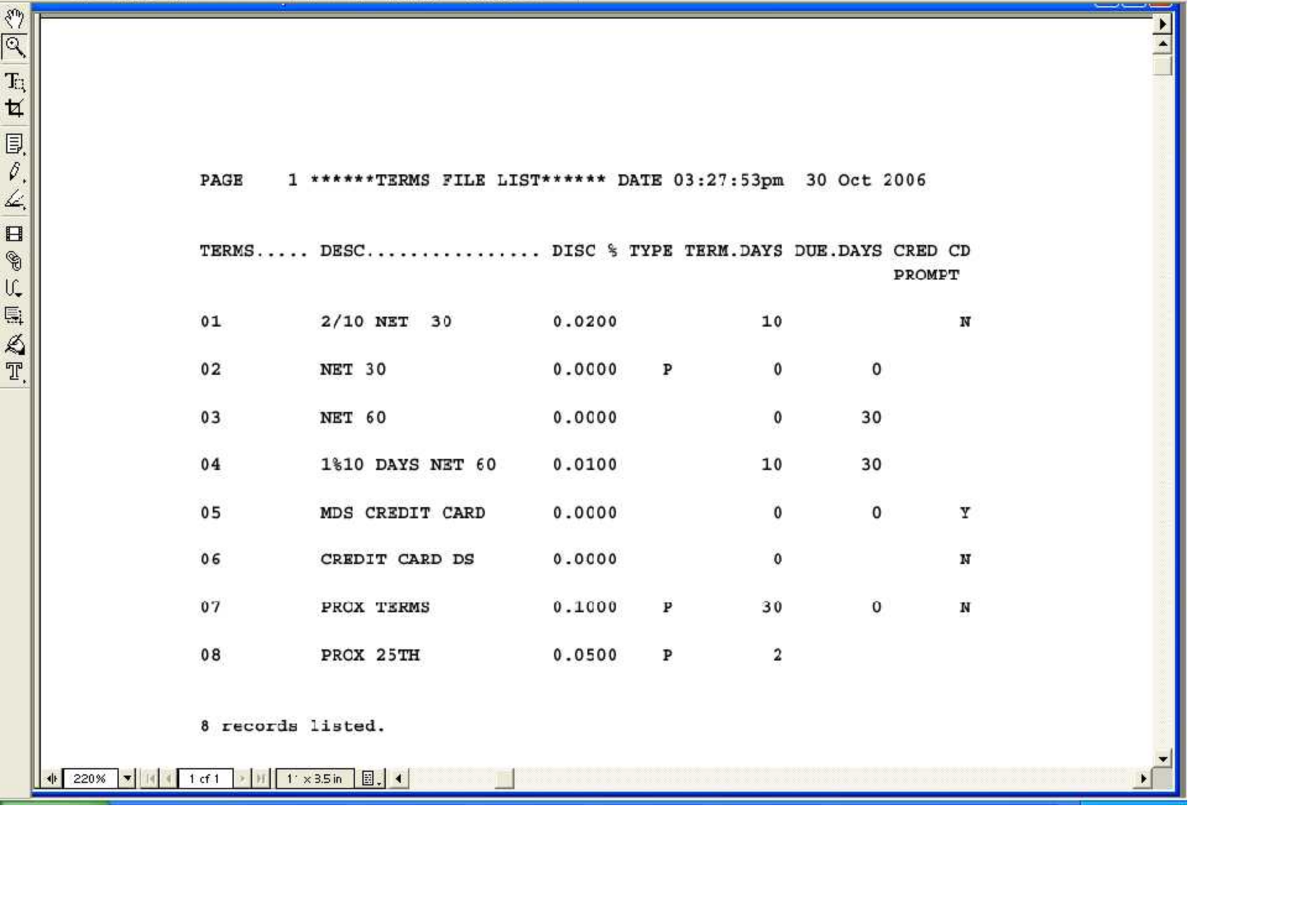
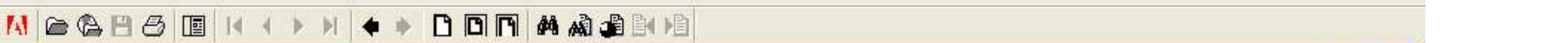
PAGE 1 ****STATE SERVICE CHARGE LIST**** DATE 10:46:30am 16 Oct 2006

SC.STATE..	DESCRIPTION.....	SC%...	\$.BRK.
AP.RPTS		0.0000	
AR.RPTS		0.0000	
CA	CALIFORNIA	0.0100	50000
		0.0175	999999
NJ	NEW JERSEY	0.0150	50000
		0.0100	999900
NY	NEW YORK	0.0150	50000
		0.0100	999900
		0.0000	
		0.0100	122210
			0
OE.RPTS		0.0000	
SA.RPTS		0.0000	
TSH		0.0000	
TTT		0.0000	
XX		0.0200	



PAGE 1 **TAX RATE FILE LIST** DATE 10:53:30am 16 Oct 2006

TAX.RATE..	TAX%..	TAX.JUR	DESC.....	G/L#.....	G/L DESC.....	TAX STATE %	COUNTY% CITY%.
001I94	0.000					0.000	0.000 0.000
002I94	0.000					0.000	0.000 0.000
003I94						0.000	0.000 0.000
004I94	0.000					0.000	0.000 0.000
005I94	0.000					0.000	0.000 0.000
006I94	0.000					0.000	0.000 0.000
007I94	0.000					0.000	0.000 0.000
008I07	0.000					0.000	0.000 0.000
008I08	0.000					0.000	0.000 0.000
008I11	0.000					0.000	0.000 0.000
008I16	0.000					0.000	0.000 0.000
008I17	0.000					0.000	0.000 0.000
008I19	0.000					0.000	0.000 0.000
008I22	0.000					0.000	0.000 0.000
008I23	0.000					0.000	0.000 0.000
008I27	0.000					0.000	0.000 0.000
008I28	0.000					0.000	0.000 0.000



PAGE 1 *****TERMS FILE LIST***** DATE 03:27:53pm 30 Oct 2006

TERMS.....	DESC.....	DISC %	TYPE	TERM.DAYS	DUE.DAYS	CRED CD	PROMPT
01	2/10 NET 30	0.0200		10		N	
02	NET 30	0.0000	P	0	0		
03	NET 60	0.0000		0	30		
04	1&10 DAYS NET 60	0.0100		10	30		
05	MDS CREDIT CARD	0.0000		0	0	Y	
06	CREDIT CARD DS	0.0000		0		N	
07	PROX TERMS	0.1000	P	30	0	N	
08	PROX 25TH	0.0500	P	2			

8 records listed.

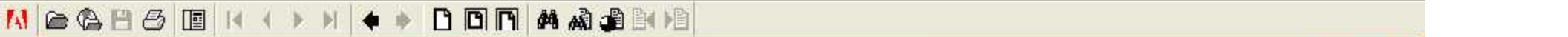


PAGE 1 **TERRITORY FILE LISTING** DATE 11:01:27am 16 Oct 2006

TERRITORY. DESC.....

- 01 TERRITORY 01
- 02 NET 15 DAYS
- 03 2%/10 DAYS NET 30
- 04 NET 45 DAYS
- 05 2% 20 DAYS NET 31
- 06 1% 30 DAYS
- 07 1% 10 NET 30 DAYS
- 08 NET 10 DAYS
- 09 1% 20 NET 30 DAYS
- 10 2.5% 10 NET 30 DAYS
- 11 NET 7 DAYS
- 12 NET 20 DAYS
- 13 NET RETURN MAIL
- 14 NET 25 DAYS
- 15 1% 15 NET 30





PAGE 1 ***** MAILING LIST FILE LISTING ***** DATE 12:56:36pm 15 Oct 2006

LABEL..... CUST.#. NAME AND ADDRESS..... AR.CONT..... PHONE.NO.... TYPE SRC.. CUST SLSM OLSM

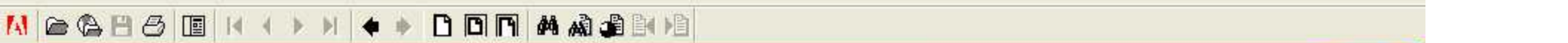
111719 111719 115454

111720 111720 115454

111721 111721 115454

111834 111834 115454

4 records listed.



PAGE 1 ***** PROSPECT MASTER FILE LISTING ***** DATE 01:03:28pm 16 Oct 2006

PROSPECT.MAST A.PROSPECT.NO NAME AND ADDRESS..... Contact:..... PROS.PHONE.NO PROS.SLSM STATUS.DATE STATUS.TIME

100575	ABCOPS	ABCO FINANCIAL SERVICES PO BOX 7966 70 ARROW ROAD #5 HILTON HEAD SC 29928	JIM FRIEND	404-111-1111	001	09/17/03 13:00
--------	--------	--	------------	--------------	-----	----------------

100476	MARCOW	MICHAEL MARCOWITZ MD 4360 KENNEDY BLVD BROOKLYN NY 10023	MICHAEL MARCOWITZ	718-555-1212	002	05/21/03 14:00
--------	--------	--	-------------------	--------------	-----	----------------

100240	MERCYCB	MERCY CARE BLAIRSFERRY 1790 BLAIRSFERRY ROAD HIAWATHA IA 52233		319-378-8362	003	
--------	---------	--	--	--------------	-----	--

100630	TRINITY	TRINITY MEDICAL CENTER 110 JOSEPH PLACE STATEN ISLAND NY 10314	JOE BUSH	718-111-1111	001	08/04/03 14:00
--------	---------	--	----------	--------------	-----	----------------

100139	UMC	UNIVERSITY MEDICAL CENTER JOHN DOE ACCOUNTS PAYABLE/TRAVEL 400 BROADWAY AVE NEW YORK CITY NY 10016-1460		212-777-1111	001	05/22/03 12:00
--------	-----	---	--	--------------	-----	----------------

5 records listed.

Customer Label Printing Menu

1. Customer Label Print

2. Rolodex Label Print

3. Mailing List Label Print

4. Label Size Setup

Enter Selection or END :

OE	CONTACTS	MAINT	DRILL	EXECINQ	REPORTS	CAPT OFF	VIEW	CRM.MENU	VRM.MENU		
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup

Cust Labels by Zip

1. Zip Code

All

All

2. Enter Label Size (use F7 for lookup)

5161

Press <RETURN> to Process Report, Line# to Change, or ABORT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

Cust Label by Name

1. Enter Label Size (use F7 for lookup)

5160

Press <RETURN> to Process Report, Line# to Change, or ABORT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

Cust Label by Cust No

1. Customer#

All		

2. Enter Label Size (use F7 for lookup)

5161

Press <RETURN> to Process Report, Line# to Change, or ABORT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------



100636 BNDA
 BAHAMAS NATIONAL
 DRUG AGENCY
 P.O. BOX 85431
 NASSAU FF

100497 GUTMH
 GUTTENBURG MUN HOSPITAL
 2ND & MAIN
 GUTTENBURG IA 52052
 10000

100631 LMHS
 LEE MEMORIAL HOSP
 FT MYERS FL 30912
 0

100205 MERCYCIND
 MEDICAL ASSOCIATES OF
 INDEPENDENCE
 1100 1ST STREET EAST
 INDEPENDENCE IA 50644

100240 MERCYCB
 MERCY CARE BLAIRSFERRY
 1790 BLAIRSFERRY ROAD
 HIAWATHA IA 52233
 319-378-8362

100561 MERCYCCP
 MERCY CARE CENTER POINT
 900 EANK COURT
 CENTER POINT IA 52213
 319-849-1252

100150 MERCYCMAR
 MERCY CARE MARION
 3701 KATZ DRIVE
 MARION IA 52302
 319-398-6105

100635 FS
 FOOD SERVICES
 P.O. BOX 21314
 NASSAU FF
 0

100197 KESSLER
 KESSLER REHAB GROUP
 100 CENTRAL AVE
 EAST ORANGE NJ 07002
 973-628-3150

100634 MMD
 MATERIAL MANAGEMENT
 DIRECTORATE
 P.O. BOX 2145
 NASSAU FF

100172 MERCYCSEA
 MERCY CARE 2ND AVENUE
 1444 2ND AVENUE SE
 CEDAR RAPIDS IA 52403
 319-363-2929

100566 MERCYCCR
 MERCY CARE CEDAR RAPIDS
 411 10TH STREET SE #2300
 CEDAR RAPIDS IA 52403
 10000

100178 MERCYCJA
 MERCY CARE JOHNSON AVENUE
 75 SHORT STREET NW
 CEDAR RAPIDS IA 52405
 319-356-6313

100184 MERCYCVV
 MERCY CARE VERNON VILLAGE
 3933 NT VERNON RD SE
 CEDAR RAPIDS IA 52403
 319-363-8148

Mailing List Labels - by Zip Code

1. Enter Label Size (use F7 for lookup)

5161

Press <RETURN> to Process Report, Line# to Change, or ABORT :

XXXXXX

HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Popup
------	--------	--------	---------	---------	---------	---------	--------	-----	--	--	-------

LABEL SETUP FILE

Label ID 5160

1.Label Description AVERY 5160

2.Count 3
3.Rows 5
4.Skip 1
5.Indent 0
6.Size 30
7.Spaces 4
8.Blank C

ENTER LINE # TO CHANGE,DELETE TO DELETE,0 TO ACCEPT :

XXXXXX

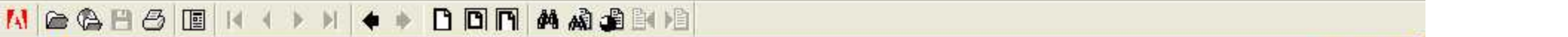
HELP	OK/END	INSERT	LDELETE	PFEV PG	NEXT PG	INQUIRY	CANCEL	Off			Рэпу
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PAGE 1 **COMMISSION TYPE LISTING** DATE 04:22:32pm 16 Oct 2006

COMM.TYPE.	DESC.....	GP%	COMM.PCT	COMM2.PCT
00	DEFAULT	25.00	5.00	3.00
01	TEST COMM TYPE 01	12.99	10.00	20.00
		22.00	30.00	40.00
		26.00	50.00	60.00
		29.00	70.00	80.00
02	NANCY'S COMM TYPE	0.10	17.00	19.00
		30.00	27.00	29.00
03	NANCY'S TEST COMM.TYPE	5.00	3.00	2.00
		6.00	2.00	2.00
17	HI & BYE	0.03	5.00	0.00
		0.20	4.00	0.00
		0.50	3.00	2.00
		10.00	2.00	1.00

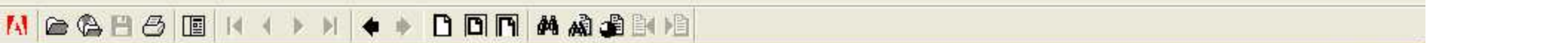
5 records listed.



PAGE 1 *****FACILITY FILE LIST***** DATE 04:38:45pm 16 Oct 2006

FACILITY.CODE	NAME.ADDR.....	COUNTRY	CHAIN.CODE
NORTHEAST	NORTH EAST FACILITY 980 VALLEY ROAD CLIFTON, NJ 07317	000	124500

1 records listed.



SORT GPO GPO DESCRIPTION ID-SUPP LPTR 04:42:27pm 16 Oct 2006 PAGE 1
GPO..... DESCRIPTION.....

78912552 MARTY'S MEDICAL SUPPLIES

1 records listed.



Where to Get More Information

- To contact support call 973-777-8050 or fax 973-777-3063.
- To access the The System's House website the address is: www.tshinc.com

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