

KÖRBER Group
Tobacco Division
Supply Management
Supplier Questionnaire

| | | | | | | |
|-------------------------------|--------------------------|--------------------------|----------|--------------------------|--------------|--------------------------|
| Supplier specification | Manufacturer | <input type="checkbox"/> | Sub-con | <input type="checkbox"/> | | |
| | Dealer | <input type="checkbox"/> | Services | <input type="checkbox"/> | Supplier no. | |
| Industrial Sector | | | | | SIC-no. | |
| General Data | | | | | | |
| Short name | | | | | | |
| D-U-N-S-No. | | | | | | |
| Name | | | | | | |
| Address | | | | | | |
| Phone | | | | | | |
| Fax | | | | | | |
| E - mail address/Web | | | | | WEB - page | <input type="checkbox"/> |
| Visitor address | | | | | | |
| Language | | | | | | |
| Legal structure | | | | | | |
| Founded (year) | | | | | | |
| Shareholders | | | | | | |
| Cooperations | | | | | | |
| Group member of | | | | | | |
| D-U-N-S-No. | | | | | | |
| Locations of production | | | | | | |
| Employers' association | <input type="checkbox"/> | Yes | _____ | <input type="checkbox"/> | No | |
| Supplier since | <input type="checkbox"/> | date | _____ | <input type="checkbox"/> | New | |
| Contact Partner | | | | | | |
| | Name | Function | Phone | Fax | E - Mail | |
| Management | | | | | | |
| Sales | | | | | | |
| Shipping | | | | | | |
| Manufacturing | | | | | | |
| Quality Management | | | | | | |
| R&D/Design | | | | | | |
| After Sales/Service | | | | | | |
| Purchasing | | | | | | |
| Finance/Controlling | | | | | | |

Supplier Questionnaire

Product Range - Main Products -, Technologies, Measurement tools

Please state eClass- and/or UNSPSC-code if available

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|--|--------------------------|--------------------------------|
| | | |
| | | |
| | | |
| | | |
| | <input type="checkbox"/> | air conditioned measuring room |
| | <input type="checkbox"/> | List of machinery |
| | <input type="checkbox"/> | Company brochure |

Reference Customers

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| |

| Company Data | Last fiscal year | Current fiscal year | Next (expect.) fiscal year |
|----------------------------|------------------|---------------------|----------------------------|
| Turnover with Körber Group | | | |
| Total turnover | | | |
| Export share in % | | | |
| Balance sheet total | | | |
| Equity capital | | | |
| Annual net profit | | | |
| Employees administration | | | |
| Employees manufacturing | | | |

Assessment/Evaluation market position, situation of the market

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Quality Management

Quality Certifications DIN/GEN/ISO _____ dated _____

Others by _____ dated _____

Software

| | | |
|----------------------|------------------------------------|-----------------------------|
| ERP system | <input type="checkbox"/> Yes _____ | <input type="checkbox"/> No |
| Commodity management | <input type="checkbox"/> Yes _____ | <input type="checkbox"/> No |
| Design software | <input type="checkbox"/> Yes _____ | <input type="checkbox"/> No |

Remarks

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Date _____ Originator _____