



Takeda Pharmaceuticals North America, Inc.

Takeda Supplier Registration User Guide

v1.0



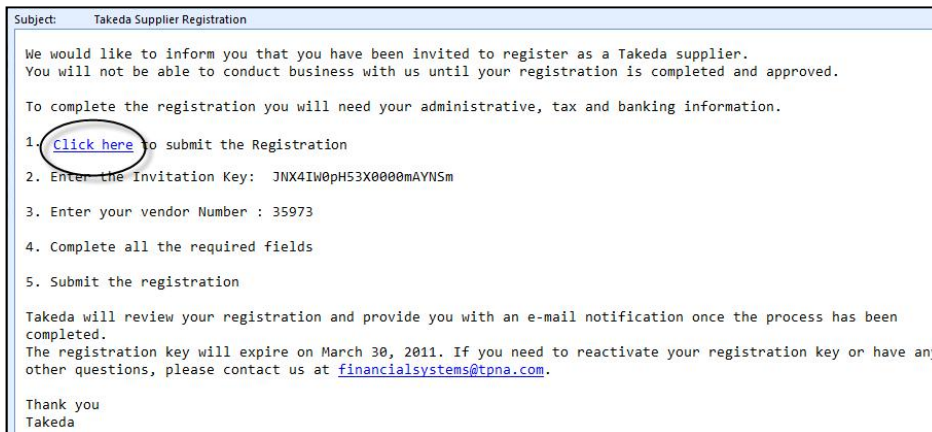
1.0 OVERVIEW

Takeda utilizes an automated supplier registration solution. A supplier will receive an e-mail detailing the registration link, invitation key and Takeda vendor number which will allow them submit your registration information electronically. Upon approval a confirmation e-mail will be sent and the supplier will be fully set up to receive purchase orders and payments.

2.0 REGISTRATION E-MAIL & VERFICATION

The supplier will receive an e-mail containing the link to the Takeda registration page. If the e-mail was not received, check the spam/junk folder to ensure that the e-mail was not filtered out.

1. Click on the Click here link to access the registration
2. Ensure that all administrative and banking information as well as a signed tax form to complete the registration are available



3. Enter the invitation key and vendor number which was provided in the e-mail

Note: The invitation key expires after 21 days for security reasons. If the invitation key expired, please contact Takeda to have a new key generated.

4. Click the Submit button



3.0 REGISTRATION COMPLETION

The registration will require the submission of all information that is required by Takeda to fully set up a supplier to receive purchase orders as well as payments.

1. The supplier can view the terms and conditions by clicking on the Terms of Use & Privacy Policy link
2. To accept, check the box next to I accept the Terms of Use & Privacy Policy

Note: A supplier cannot submit a registration without agreeing to the Terms of Use & Privacy Policy.

Submit Registration

Terms and Conditions | Company Details | Payment Information | Bank Information | Industry Information | Attachments

Supplier Terms and Conditions

Please click here to view the Takeda [Terms of Use & Privacy Policy](#). If you are not in agreement with these terms, you will not be able to proceed with the registration.

I accept the Terms of Use & Privacy Policy

3. Click on the Company Details tab
4. The supplier name, address and contact details have already been populated, but can be edited if required
5. Enter a doing business as name into the Business name field, if required

Note: The Corporate Name field has a limit of forty characters. If the company name is longer than forty characters the Business Name can be utilized for the additional characters

6. Enter the address as it appears on the tax form such as W-9 or W8-BEN

Note: Either a street address or PO Box can be provided, but not both

Terms and Conditions | **Company Details** | Payment Information | Bank Information

Company Details

Corporate Name: * Major Company LLP

Business Name: Major

Address as it appears on the W-9 or W8-BEN

Street / PO Box: 342 Hipperich

Postal Code/City: * 12342 New Mainz

Country: * USA

State/Province: Indiana



- The PO Correspondence Details will be utilized to submit purchase orders. The PO Communication E-mail field is required since it is Takeda's preferred method of PO submission.
- Complete tax classification information. It is required to provide either a SSN, Tax ID or VAT Reg. No.

PO Correspondence Details

Contact Person: Michelle Long

Business Phone No: 2321231212 Extension: 12

Business Fax Number: 1231232323 Extension: 7

Mobile Number: 2032122020

PO Communication email: Michelle.Long@major.com [Definition](#)

Tax Classification Structure.

Tax Recipient Type: Corporation

Sole Proprietor Sale/Pur.tax

Tax Number(Enter one of the Fields Which is applicable)

SSN: []

Tax ID: 123123123 8

VAT Reg. No.: []

- Click on the Payment Information tab.
- Enter the Remittance Name which payments should be made out to.
- If the remittance address is different than the address provided in the Company Details tab, click the check box
- Enter the remittance address, if required
- Provide the contact information regarding any payment questions
- Select payment method
- Select the Currency by clicking the search box. It is also possible to type it in directly: USD for US dollar, CAD for the Canadian dollar and MXN for the Mexican Peso.

Terms and Conditions Company Details **Payment Information** Bank Information Industry Information

Remittance Information

Remittance Name: * Major Products LLC 10

Uncheck the box if the remittance address is same as the contact address

Address where payments should be mailed to:

PO Box: * 4 Douglas Lane 11

Postal Code/City: * 06812 New Fairfield 12

Country: * USA

State/Province: Connecticut

Contact for questions regarding payments:

Contact Name: VALERIE STONE

Phone No: 2122390909 Extension: 13

Fax Number: 2122899090 Extension:

Email: * valeriestone@com

Payment Method

Select all Payment Methods if applicable

Check

ACH Transfer 14

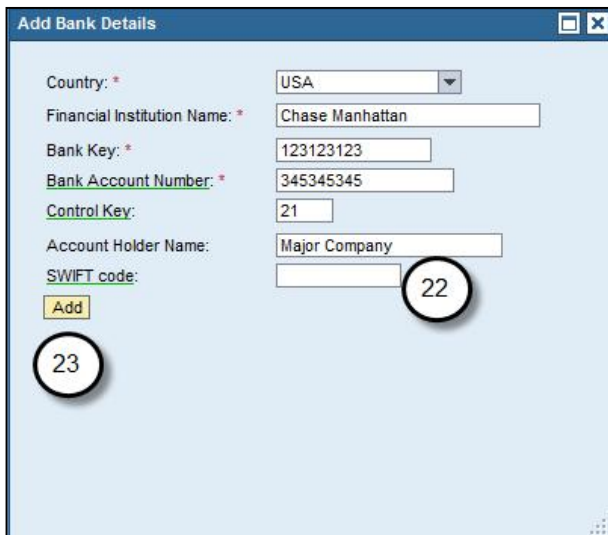
Wire Transfer

Payment Currency: * USD 15

16. Click the Bank Information tab to add the bank that should be receiving payments
17. Click the Add button



18. Select the country of the bank
19. Provide the name of the bank in the Financial Institution Name
20. Enter the bank key and account number.
21. Provide a control key and account holder name if required
22. SWIFT Code is only required for non-US banks
23. Click the Add button





24. Click on the Industry Information tab
25. Review the definition of the Health Care Practitioner (HCP) and answer the question by selecting Yes or No from the drop down
26. Select the Primary Industry type that will be supplied to Takeda from the drop down

Terms and Conditions Company Details Payment Information Bank Information **Industry Information** Attachments

Health Care Professional

Do any of the following describe your individual or organizational entity with regards to your relationship with Takeda Pharmaceuticals North America, Inc.?

- Licensed Healthcare Professional
- Pharmacy or Benefits Plan Manager
- Employee of a purchaser (including hospitals, payers, group purchasing organizations)
- Clinical investigator or a member of their staff
- University
- Medical Association or Organization
- Hospital or Clinic
- Trade Association

Individual or organizational entity is a supplier that manages fee-for-service activities for Takeda including meetings, research activities, consulting and/or advisory arrangements, grants, or travel and/or meal related expenses with any of the following Healthcare Professionals:

- Licensed Healthcare Professional
- Pharmacy or Benefits Plan Manager
- Clinical investigator or a member of their staff

Industry Information

Primary Type of Industry:

27. Select the business classification, if applicable, and provide the certification number as well as expiration date of the government issues certificate verifying classification status

Note: If a business classification has been selected a copy of the actual certificate has to be included in the Attachment section.

28. If there is a second business classification, click the Yes radio button
29. Select the second business classification from the drop down and provide the certification number as well as expiration date of the government issues certificate verifying classification status
30. Repeat Step 29 until all Business Classifications have been added.
31. Answer the Foreign Corrupt Practices Act by selecting Yes or No from the drop down

Business Classification

Primary Business Classification:

Certification Number:

Expiry Date:

Do you have Secondary Business Classification?

No

Yes

Secondary Business Classification

Delete

Document Type	Certification Number	Expiry Date
Small Disadvantaged inc 8A	456456456	31.07.2011
-Select-		
-Select-		
-Select-		
-Select-		

Row 1 of 20

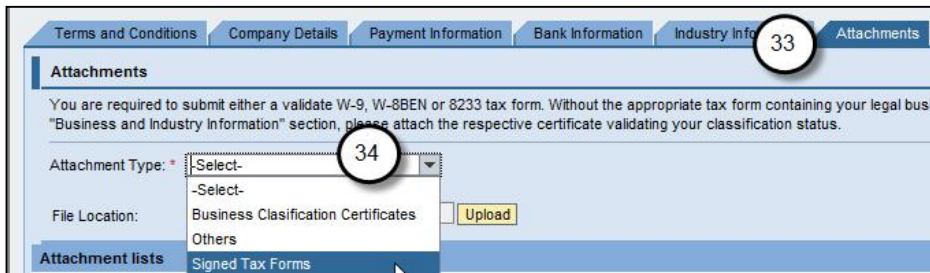
Foreign Corrupt Practices Act

Will you conduct business with or on behalf of Takeda outside the US?

32. Click on the Attachments tab. Each registration has to have a tax form containing the legal supplier name and a signature

Note: Templates of tax forms can be found in the [Supplier Resource](#) section of the Takeda Supplier Collaboration site.

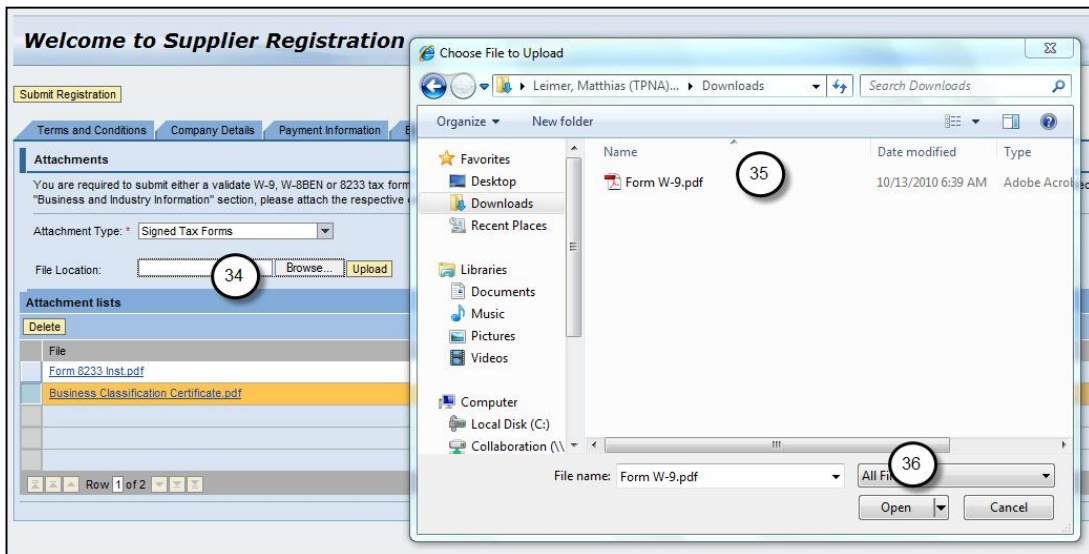
33. Select the Attachment Type from the drop down



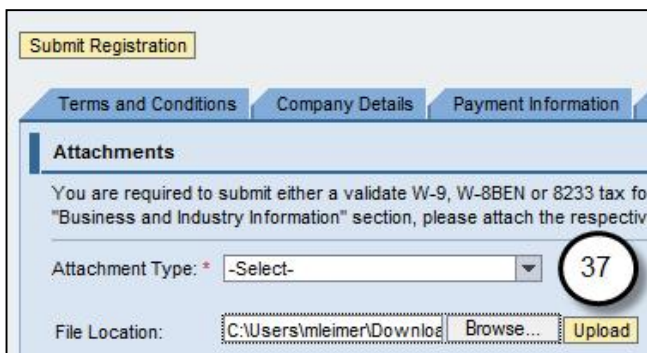
34. Click the Browse button to the document.

35. Select the required document by clicking on it

36. Click the Open button



37. Click the Upload button.

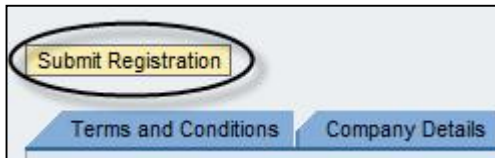


38. Repeat steps 33 – 37 for any additional attachments

Note: Each registration will have to have a tax form as well as a certificate uploaded for each Business Classification that was selected in the Industry Information tab.

File	Attachment Type
Form W-9.pdf	Signed Tax Forms
Business Classification Certificate.pdf	Business Clasification Certificates

39. Once all documentation has been provided, click the Submit Registration button.



40. The system will provide a confirmation message that the registration has been successfully submitted. Takeda will now review the registration and a confirmation message will be sent out once the record has been fully set up. At that point purchase orders and payments can be received

The supplier registration was successfully submitted and is now being reviewed by Takeda. You will receive a confirmation e-mail once this process has been completed.

41. If not all mandatory fields are completed the system will provide an error message and the registration will not be submitted. Clicking on the error highlights the section with the missing data





4.0 REQUEST FOR ADDITIONAL INFORMATION

If information is missing from the registration Takeda will send the registration back to the supplier with comments indicating what additions/changes are required. The e-mail will also provide a link and invitation key for the supplier to log back into the registration to resubmit it.

5.0 SUPPORT

Questions regarding the registration or technical issues should be directed to financialsystems@tpna.com.