



EDI Profile

Please complete and return to: **Barry Pang**
EDI Analyst
ABC Group
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80QPP-F-037
Rev. 4
DATE: 14APR2020
Approved: M.J.J.Quail

DATE		Supplier	
Plant Location			
DUNS #			

1. Who is your primary EDI Contact?

Name					
Title					
Address					
City		Prov./State:		Zip/PC	
Phone #		Cell #		Fax #	
Email address:					

2. Who is the customer service representative for our company?

Name:					
Phone #		Cell #		Fax #	
Email address:					

3. What is the name of your VAN (Value Added Network)? Our VAN is COVISINT.

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4. What is the name of your EDI software provider and software version?

Name:	
Version:	

5. What is your qualifier and ID number?

ISA		GS ID# (if different than ISA)	
Qualifier		ID#	

We will be communicating in ANSI X-12, Version 4010

- Sending - 830 Planning Schedules
- Receiving - 856 ASNs Advanced Shipping Notification
- Sending & Receiving - 997 Functional Acknowledgments

Form completed by (if different than primary EDI contact)

Name		Title	
Phone #		Email	

ABC Group's ISA/GS is **ZZ:ABCGROUP**. The user facility will be identified in the body of the 830 as the N1-MI & ST segments.