Offline Translated Version of the Supplier External Form

	-	plier Name NS Number
		mary Supplier Contact who will act as a Supplier's Coupa Administrator
		First Name
		Last Name
		Email address
		Work Phone
		Mobile Phone
		Fax
	(CS	s individual will be able to add additional contacts for the supplier into the Coupa Supplier Portal P) to complete banking and tax details, as well as delegate risk questionnaires to the proper ividuals within their company
4.0	Con	npany Legal Address
		Region Country/Region
		State Region
		State ISO Code
		Address Name
		Street Address
		Street Address 2
		Street Address 3
		Street Address 4
		City
		Postal Code
		Location Code

5.0 Personally Identifiable Information acknowledgement and Consent [CHINA based-suppliers only]

Personally Identifiable Information acknowledgement and Consent – choose YES if you are a China based supplier. If No, skip to next step. If Yes, an additional consent is required.

Personally Identifiable Information (PII) acknowledgement and Consent

* Are you a China based supplier?	
Yes	
○ No	
* By marking this box, I affirm that I have the authority to and do he	ereby make
the following representation:	,
My company has obtained prior consent from all employees and/or agents of my whose personal data will be provided to Kimberly-Clark Corporation or its affiliat Clark) (including through a cross-border transfer of personal data) via the "Conse Processing of Personal Information of Partners." The personal data to be transfer	tes (Kimberly- ent Form for

whose personal data will be provided to Kimberly-Clark Corporation or its affiliates (Kimberly-Clark) (including through a cross-border transfer of personal data) via the "Consent Form for Processing of Personal Information of Partners." The personal data to be transferred is only that which is necessary to provide Kimberly-Clark with the goods and/or services to be procured. My company agrees that Kimberly-Clark may process the personal data in accordance with the "Consent Form for Processing of Personal Information of Partners" and for general procurement purposes between our companies, and that a separate, signed consent form will be provided to Kimberly-Clark for each person whose personal data is to be transferred. If additional consent forms are necessary to ensure compliance with law as to the transfer of personal data, such completed forms will be provided to Kimberly-Clark by my company prior to the transfer of such additional personal data.

The Consent Form for Processing of Personal Information of Partners will also be a required documentation provided. That form can be found here China Consent form for Processing of Personal Information of Partners

6.0 Banned Country Validation

6.1 In accordance with Kimberly-Clark policy, please verify that you have identified all manufacturing locations, including suppliers of this supplier, that will supply Kimberly-Clark are not located in any of the below banned sourcing countries: Afghanistan, Burundi, Central African Republic, Chad, Congo, Dem. Rep., Congo, Rep., Cuba, Equatorial Guinea, Eritrea, Guinea-Bissau, Iran, Iraq, Korea Dem. Rep., Libya, Pakistan, Somalia, South Sudan, Sudan, Syrian Arab Republic, Tajikistan, Turkmenistan, Venezuela RB, Western Sahara, Yemen Rep., Zimbabwe

6.2 By checking this box, I acknowledge that the requested supplier DOES NOT operate or manufacture in any of the above countries or regions

7.0 Do you have a Tax or VAT number? If YES

7.1 Please see the instructions below before you enter your tax information below: - Please add no more than 5 tax registration numbers below. - If you use VAT tax, please copy your primary VAT tax number to the VAT TAX NUMBER field below.

7.2 Tax Registration

Country

VATID

Local

7.3 VAT Tax Number

** If your VAT tax value is listed above as a "tax registration", please copy + paste it into this field **

8.0 Current Remit To/Banking Details

If you already have a Remit To/Banking Detail on file and changes are needed, please inactivate the current record and add a new Remit To/Banking Detail record below. If you do not have a Remit To/Banking Detail on file, please enter one below

Active

Remit To Contact Email

Bank Country/Region

Bank Name

Bank Control Key (Account Type)

PLEASE ENTER YOUR TWO (2) DIGIT BANK CONTROL KEY. If you do not have or do not know your Bank Control Key, leave this field blank.

Bank Account Holder Name

Please select type of account you are adding

Bank Account Number

Bank Routing Number

Wire Account Number

Bank Wire Routing Number

IBAN Number

If applicable

SWIFT Code (BIC)

If applicable

- 8.1 Do you need to add a Remit To/Bank Details?
- 8.2 New Remit To/Banking Details

Active

Remit To Contact Email

Bank Country/Region

Bank Name

Bank Control Key (Account Type)

PLEASE ENTER YOUR TWO (2) DIGIT BANK CONTROL KEY. If you do not have or do not know your Bank Control Key, leave this field blank

Bank Account Holder Name

Is your new bank account located within an APAC country

APAC: All Asia Pacific countries, including Australia and New Zealand

Please select type of account you are adding

Standard Back Account Details or Wire Bank Account Details

Bank or Wire Account Number

Bank or Wire Routing Number

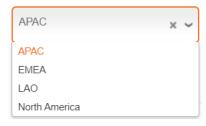
IBAN Number

If applicable

SWIFT Code (BIC)

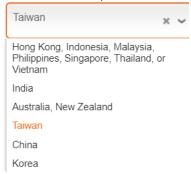
If applicable

9.0Select Region associated with Supplier Remit To/Banking Details



10.0 Documentation

10.1 If APAC selected above, then Please Select the Country your bank account is in. Note: In APAC, Documentation requirements determined by Country and Vendor Type.



Please view your Vendor Type above and in the attachment fields below, please attach bank forms and any additional documentation as necessary per chart below.

In the attachment fields below, please attach bank forms and any additional documentation as necessary per below tables

Note: PLEASE USE SHORT FILE NAMES THAT ARE UNDER 100 CHARACTERS IN LENGTH. ENSURE EACH FILE ATTACHED IS LESS THAN 20 MB BEFORE SUBMITTING.

Country	Requirement
North America	W-9/W-8 Tax Forms (no older than 3 years); Bank account confirmation letter (with company name, address matching the tax form, bank account, and bank routing information) or a voided check.

East Africa	Vendor Application Form (fulfilled, signed, PDF form); VAT
	Certificate, Bank Account Confirmation (official bank letter,
	stamped, no older than 3 months); Company's Letterhead
	signed and stamped by Vendor; Tax Clearance Certificate
West Africa	Vendor Application Form (fulfilled, signed, PDF form); VAT
	Certificate, Bank Account Confirmation (official bank letter,
	stamped, no older than 3 months); Company's Letterhead
	signed and stamped by Vendor; Tax Clearance Certificate

Europe	Bank account confirmation letter (not older than 3 months with account number and IBAN, signed and stamped by bank); VAT registration certificate; Letterhead
GCC	VAT Certificate; Bank account confirmation (official bank letter, stamped, no older than 3 months); Commercial Registration Certificate; GCC Vendor Form on headed paper with company logo, signed and stamped
Exempt Vendors	Vendor Information Request Sheet on letterhead, sign and stamp and resend in PDF format; Vat registration certificate; Bank letter from bank confirming bank account details (bank key, bank account number, IBAN, BIC/SWIFT code, no older then 3 months, signed and stamped by the bank)

Country	Vendor Type	Requirement
HONK KONG, INDONESIA, MALAYSIA, PHILIPPINES, SINGAPORE, THAILAND, VIETNAM	All Vendors	Business Certificate Bank Certificate/Bank Book/Bank statement Tax Certificate/SST Cert
INDIA	All Vendors	 PAN Cert GST Cert Cancelled cheque/Bank statement issue by bank MSMED Certificate - (if applicable) Certificate of Incorporation (if applicable) Withholding tax related forms (Form TRC, Form 10F, No PE Certificate - as applicable)
AUSTRALIA, NEW ZEALAND	All Vendors	Business Certificate Bank Certificate/Bank Book/Bank statement Tax Certificate/SST Cert
TAIWAN	Individual Vendors	Bank Book / Bank Certificate Person Identification Card
	All other Vendors	Business Certificate Bank Certificate/Bank Book/Bank statement Tax Certificate/SST Cert
CHINA	Local Vendors, Carrier Vendors, Foreign Vendors	 Business Certificate with company stamp (营业执照) Bank Certificate /Bank Book/Bank statement with company stamp (银行开户证明,基本存款展会或 最近一期银行对账单)
		 Consent Form for Processing of Personal Information of Partners 合作伙伴个人信息处理告知同意书 <u>China</u> <u>Consent form for Processing of Personal Information</u> of Partners

		 Email address verify confirmation - Optional (邮箱授权函 (若供应商邮箱未带有公司名称后缀,或注册于QQ/163.com)
KOREA	Local Vendors, Carrier Vendors	Business License (사업자등록증 (사본) 또는 사업자등록증명 Bank Cert/Bank Book/Bank Statement which is issued by Bank (은행에서 발생된 통장사본/ 은행정보확인서) Seal Certificate (within 3 months) (3개월이내 발행된인감증명서)
	Foreign Vendors, Individual Vendors	Bank Cert/Bank Book/Bank Statement which is issued by Bank (은행에서 발생된 통장사본/ 은행정보 확인서)
	Permitted Payee	 Business License (사업자등록증 (사본) 또는 사업자등록증명) Tax Invoice "For Advertising Company/Media Company, third party need to be clearly stated" (세금계산서 - 위수탁 거래업체는 수탁업체 표시된 세금계산서 필요함) Payment Agreement contract – "Not applicable for advertising company/Media company" (대납 약정서 - 위수탁 거래업체 해당되지 않음)

10.2 Attachments

Attachments

11.0 Additional Supplier Contacts

If you are a supplier of any type of material goods, please provide the contact details for Product Safety and Manufacturing Quality at the site that will be responsible to provide these goods.

11.1 Product Safety Contact - First and Last Name

Please enter one contact name only e.x. John Smith

11.2 Product Safety Contact Email

Please enter one contact email only.

11.3 Mfg. Quality Contact - First and Last Name

Please enter one contact name only ex. John Smith

11.4 Mfg. Quality Contact Email

Please enter one contact email only.

11.5 Shipping Information Contact Email

All suppliers that require Kimberly-Clark (K-C) to collect their shipments, please provide one email address only. This will be K-C's contact to request shipping information.

11.6 PO Email

Please provide the email that the K-C Supplier Portal will use to notify you of a PO.

12.0 Certificates for Supplier Onboarding

Please complete the below information and attach any certificate(s) required by local authorities or Kimberly-Clark for suppliers. (e,g., CIN, GST, MENA, MSMED, SEAL, etc..)

12.1 Certificate Details

Type

Effective Date

Expiration Date

Attachments

Description

13.0 Are you a diverse supplier?

13.1 Supplier Diversity

Country

Diversity Category

Subcategory

Diversity Certificate

Agency

Effective Date

Expiration Date

Attachments

Description

13.2 Diversity Certificate Number

14.0 Additional Comments/Information

14.1 Additional Comments

15.0 Internal K-C Use Only

The below fields are for use by K-C members only.

15.1 PO Method

To be reviewed by K-C Supplier Onboarding Team.

15.2 PO Change Method

To be reviewed by K-C Supplier Onboarding Team.

15.3 SAP Region

The form is now complete. Please submit your answers back to Kimberly-Clark.