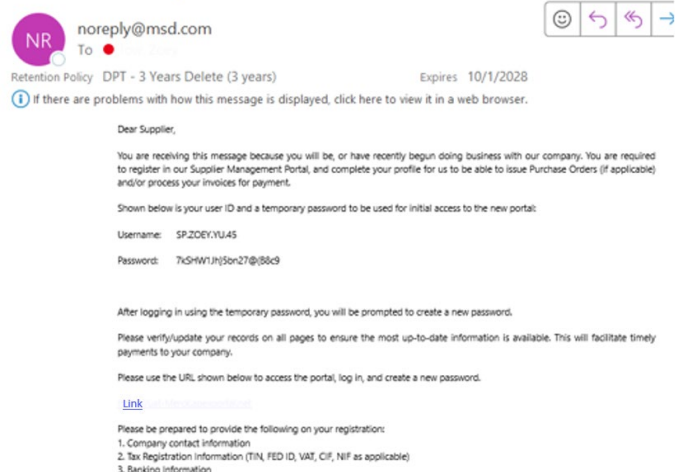


在Apex Portal中创建新的供应商账户

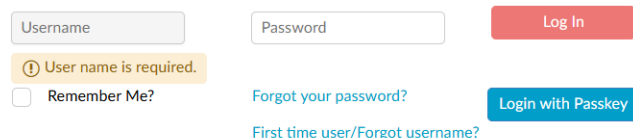
若要与我方公司交易，您需要在供应商门户网站上完成注册流程。您可按照以下步骤创建供应商账户：

MSD - Onboarding of the Vendor

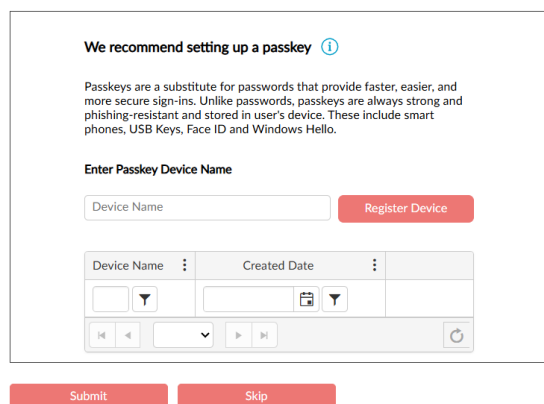


请访问您从 noreply@msd.com 收到的邀请链接，该邮件标题为“MSD - Onboarding of the Vendor”。

邮件中会提供用于登录的用户名和临时密码。首次登录后，您需要更新密码。



使用提供的用户名和临时密码登录。



可选：
建议您设置通行密钥，以便快速、安全地登录。您也可以暂时跳过此步骤。

Login Authentication Code

 noreply@msd.com
To: 
Retention Policy: DPT - 3 Years Delete (3 years) Expires: 9/8/2028 2:01 PM

Dear User,

We observed a log on from a new device or browser. If this was not you, please change your password account.

For your security you can authorize the device with the below six-digit Authentication Code for login to the Management Portal.

Authentication Code: 563798

You may get this email again if you sign in from a new device or browser, clear your cookies, or you use a different browser.

If you have any questions, please contact the Help Desk at noreply@msd.com or by phone at 1-800-451-7273.

System Administrator

您将收到一封来自 noreply@msd.com 的登录验证码邮件。

Step: 1

Please enter authentication code received in your email

Step: 2

Please configure the Security Questions

You can change the question from the dropdown

What was your childhood nickname?
What school did you attend for sixth grade?
What is your pet's name?
In what city or town was your first job?
What was the color of your first car?

请在步骤1中输入 6位数验证码，并确保正确回答所有防御问题（步骤2）。然后，点击“提交”。

Change Password



- For account security, the administrator has requested you to update your password before continuing.

Strong Password requirements

Must be between 11 and 20 character(s) long with 'no spaces'
Must contain at least 1 numeric character(s)
Must contain at least 1 upper case character(s)
Must contain at least 1 lower case character(s)
Must not be the same as the 'Username'
Must contain at least 1 of the following special character(s) (no other special characters are allowed):
- + { } * , : [] \ | @ #

Current Password: New Password: Re-enter Password:

Change Password

Cancel

请在当前密码字段中填入提供的临时密码。然后，按照强密码要求设置新密码。

至此，您的账户已创建成功。系统会将您直接转至供应商门户主页，您必须在该页面填写与贵公司业务相关的数据，例如用于付款的银行账户信息、地址和联系信息。



Home Supplier Help

Complete
Incomplete

- Supplier Agreement
- Registration Checklist
- Business Information
- Business Address
- Country Specific Tax Information
- Withholding Tax
- Account Information
- Business Size and Diversity
- Document Upload
- Review and Submit

Supplier Agreement

Digital Certificate Agreement

Before proceeding, please review the customer supplier agreement stated below. You must agree site.

Please review Our Company's code of conduct and confirm acknowledgement below:

[US & Canada](#)[Other Countries](#)

Please review Our Company's Privacy Statement and confirm acknowledgement below:

[Privacy Statement](#)[Supplier Performance Expectations](#)

Thank you. For any questions, please contact helpdesk at suppliers.msd.com

- ☐ I have read and agree to the terms and conditions outlined in the customer agreement.

Next >>

Save Draft

您需要查看并确认我方的行为准则。点击“协议”复选框。

点击“下一步”继续。

在注册前，请根据注册核对清单提供所需信息。

示例：银行证明和税务证明（如适用）。

点击“下一步”继续。

Registration Checklist

Please be prepared to provide the following before you proceed with registration:

- 1. Company contact information
- 2. Tax Registration Information (TIN, FED ID, VAT, CIF, NIF as applicable)
- 3. Banking Information
- 4. Business classification
- 5. Government and diversity certifications

Thank you. For any questions, please contact helpdesk at suppliers.msd.com

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Business Information

Supplier Category:

PO (Payment will be made with a Purchase order -PO)

If Supplier is both PO & NPO then select only PO

Division:

HH-Human Health

Supplier Country:

United States

Supplier Name:

NEW TEST PROFILE

Company Name DBA:

ServiceNow Ref#:

Transaction Method


Bank Transfer / Electronic Fund Transfer (EFT)

Remittance Email ID:

EMAIL@EXAMPLE.COM

Contact Information

Please click "Edit" to update the primary contact information.

	First Name	Last Name	Contact Type	Email
	FIRST NAME	LAST NAME	Primary	EMAIL@EXAMPLE.COM

Contact Information

Contact Type:

Primary

First Name:

FIRST NAME

Last Name:

LAST NAME

Contacts Email Id:

EMAIL@EXAMPLE.COM

Confirm Email Id:

EMAIL@EXAMPLE.COM

Preferred Language:

English

	Type	CountryCode	Number	Extension	Delete
<div>Edit</div>	Primary	United States	(310)-523-6489		<div>×</div>

Phone Type:

Primary

Phone Country Code:

United States

Contact Phone Number:

(310)-523-6489

Extension:

Update

Discard

点击“编辑”按钮输入您的联系电话，然后点击“更新”按钮。

点击“下一步”继续。

Business Address

点击“编辑”按钮以输入您的公司地址。

In order to add Physical Address, please click the Edit button associated with the Physical address.

	Address Type	Street	City
<div>Edit</div>	Physical Address		

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填写所有必填字段，然后点击“确定”。如果您已有 Ariba Network 账户并希望用其向我方开具发票，请在此处输入该账户信息。

点击“下一步”继续。

Country Specific Tax Information

- Tax Reporting Country:
- Business Entity Type:

Add New Tax Information

	Country	Tax Type	Tax Id Number	Validation
	India	TAX REGISTRATION NUMBER		

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为您的公司税务信息选择适当的答案，然后点击“编辑”按钮输入税号。

Tax Information

- Country:
- Tax Type:
- Tax Id:
- Address:

OkDiscard

输入您的公司税号，然后点击“确定”。

点击“下一步”继续。

Withholding Tax

Please note if you supply internationally, withholding tax may apply. For withholding tax exemptions, ensure that you attach all necessary tax forms (Tax Residence Certificate and if necessary other local forms that may be required) & mention the withholding tax percentage if applicable.

If one of the following scenarios apply to you, download our Withholding Tax Questionnaire from [Supplier Data Management](#) complete the document and attach it in the 'Document Upload' step:

1. You are based outside of United States of America and providing services to Merck US entity
2. You are based outside of Canada and providing services to Merck Canada entity
3. You are based outside of Poland and providing services to MSD Poland entity
4. You are doing business with Merck Puerto Rico

Withholding Tax Details:

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仅当您的供应是国际性时，此项才适用。

注意：如果在此框中填写了详细信息，则需要附上预扣税证明。

Account Information

Banking Information

Please use the 'Add New Record' button to add bank accounts. At least one bank account is required.

Add Bank Account

Bank Name	Country	Currency Type
No records to display.		

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点击“添加银行账户”按钮，输入您的银行信息

点击“下一步”继续

Banking Information

• Address:

All items checked

• Bank Country:

India

• Payment Currency:

Indian Rupee

• IFSC:

ICIC0001618

• Bank Swift Code:

ICICINBBXXX

• Account Number:

• Account Holder:

ABCO

Bank Name:

ICICI BANK LIMITED

Bank Street Name:

ICICI BANK LTD., N. S. ROAD, MOHANSAI, POST RAIGUNJ - 733

Bank City:

UTTAR DINAJPUR

Bank County/District:

Bank State/Region:

Select a value...

Bank Postal Code:

Account Type:

Checking

Ok

Discard

Document Upload

W-9 and 147c must be in either PDF, PNG, JPEG, JPG File Types. All others can be either PDF, PNG, JPEG, JPG, DOC, DOCX.

Add New Record

	Document Name	File Type	Expiration Date	Uploaded Date	Linked To	Electronic Signature
<div>Upload</div>		Banking Proof				

1

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Review and Submit

Please hit the **SUBMIT** button to finalize your information for approval.

Additionally, by submitting this registration, you certify all information provided is true and accurate. Knowingly providing false information may result in disqualifying you or your company from doing business with MSD and its affiliates.

Thank you. For any questions, please contact helpdesk at suppliers.msd.com

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Submit

请填写所有 **必填字段**。请务必填写 **正确的银行代码**，以确保自动填充的银行信息准确无误。

如有需要，您也可以手动修改地址。

注：支票账户是指活期账户。

点击“**确定**”和“**下一步**”继续

请上传所有 **必需文件**（系统已根据您提供的信息自动生成），然后点击“**下一步**”。

正规的银行文件示例：

- 银行信纸抬头/证明
- 作废支票
- 银行指示/银行对账单的截图

银行证明文件必须与字段中输入的所有银行数据一致。附件必须以只读格式上传。

注：此文件须由您的银行出具，而非贵公司。

完成时，点击“**提交**”。

注：在审核过程中，我们的支持团队可能会联系您，以确认提交的详细信息

如果您提交的内容被拒绝或因需要补充信息而被退回，请参阅我们的《[更正已发回重填的调查问卷](#)》指南。

