



New Portal Questionnaire

Basic Information Your Name: Company Name:	
Does your organization	currently use an online portal to order materials?
Yes	
No	
Don't Know / Not Sure	
User & Location Ir	formation
How many users would	I have access?
1-5	
6-15	
16-50	
50+	
Don't Know / Not Sure	
Yes No Don't Know / Not Sure	or more "authorized" users approve the orders of other users? □ □ □
	cations does your organization have?
1-5	
6-15	
16-50	
50+	
Don't Know / Not Sure	
Item Information	
How many items (appr	oximately) would be available?
1-10	
11-50	
50+	
Don't Know / Not Sure	
Are items organized by	category and/or unique item #?
Yes	
No	
Don't Know / Not Sure	





Would items be common to all stores, variable, or both?				
Please select all that apply.				
Common to all				
Variable / Unique to each location or user				
What type of portal are you interested in?				
Please select all that apply.				
Print On-Demand: Items to be produced upon of	order placement			
Warehouse / Ship On-Demand: Items to be pro	duced, stored and fulfilled			
Don't Know / Not Sure				

Special Requirements / Additional Notes