

New TMS Onboarding Questionnaire

Please complete the following questionnaire and email to LGTMS@AAFES.COM.

Vendor Code:

Vendor Name:

Shipping Address:

City:

State:

Postal Code:

Operating Hours:

DUNS Number:

Shipment Coordinator:

Name:

Phone Number:

Email:

Are you currently using the Exchange TMS through partners.aafes.com?

Will your company be using EDI to release orders and receive shipment instructions?

When will your company be ready to start EDI testing?

EDI point of contact information:

Name:

Phone Number:

Email: