



# NEW ITEM PRESENTATION FORM

## CONSUMER - SELLER OFFERS (NEW & EXISTING VENDORS)

## Safeway's Use Only

Vendor Name	Vendor # Whse #
Mail Order To	Cat Mgr #      Buyer # Review Day
Vendor Contact	Broker Contact
Vendor Contact Phone Number	Broker Contact Phone Number

1. Are in-store or instant coupons available for product(s) presented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Initial Distribution Instructions	Vol Qty				
2. Are mail-in consumer rebates available for the product(s) presented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
3. Are trial size or cents-off/bonus pack deals available for the product(s) presented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
4. Are slotting allowances available for the product(s) presented? \$ _____ /item	<input type="checkbox"/> Yes	<input type="checkbox"/> No			A	B	C	D
5. Are there additional ad/mdsg allowances available for the product(s) presented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
6. Are extended terms offered for the product(s) presented? _____ % Net _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
7. Are premiums available for the product(s) presented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
8. Is media support planned for the product(s) presented? (X) Appropriate Box(es) <input type="checkbox"/> Print <input type="checkbox"/> Radio <input type="checkbox"/> Television	<input type="checkbox"/> Yes	<input type="checkbox"/> No						

**CHECK APPROPRIATE BOXES WHERE APPLICABLE:**

<input type="checkbox"/> Pack Change	<input type="checkbox"/> Bonus Pack	<input type="checkbox"/> New Item	<input type="checkbox"/> One Time Buy
<input type="checkbox"/> UPC Number Change	<input type="checkbox"/> Cents Off	<input type="checkbox"/> Expense Item	
<input type="checkbox"/> Vendor Change	Taxable Rate If Expense Item _____ %		

\* If allowances are offered, please attach the Notice of Promotional Allowance form.

**BUYING DECISION**    **ACCEPTED**     **REJECTED**

L N S	Consumer Units Per Whse Case	Number of Inner Packs	Units per Inner Pack	Vendor Conversion Factor	Pkg Net Weight or Size	Brand Name & Description of Product <i>31 characters maximum</i>	Vendor Product Code	Vendor List Cost Per Cs/Lb	Vendor Case Weight	Vendor Case Cube	Controlled Substance Yes/No	Pallet Pattern		Safeway Handling Code	FREIGHT	
												Tier	Hgt		Charge CWT/CS	Allow CWT/CS
1																
2																
3																
4																

### Universal Product Code (UPC) Information (Fill In Appropriate Numbers)

### Safeway's Use Only

### Vendor Policy And Terms Of Sale

L N	Num System	UPC Mfg #	UPC Case #	UPC Multi Pack #	UPC Consumer #	Zero Suppress	Whse Item Code	Corporate Item Code	Common Cost Code	Base Retail	OQ Pack Size	SSV1
1												
2												
3												
4												

A Spoiled/damaged merchandise (X) one or more  
 Product Recovery Center     Bill Back     Credit Memo     Product Exchange

B Dated merchandise     Yes     No    If yes, number of days \_\_\_\_\_  
 Is numeric expiration date on case?     Yes     No

C As a manufacturer, do you have a CCG and POI on file with Safeway?  
 Yes     No    \* If no, please see comment on other side.

D Does your product have a written warranty?     Yes     No  
 If yes, please attach a copy.

E Sale Guarantee: Do you agree to repurchase at our net cost including transportation and handling expenses, all unsold merchandise?     Yes     No  
 If yes, please attach copy of guarantee.

F As a condition of sale, the vendor guarantees that this product meets all packaging, labeling classification requirements of the U.S. Dept of Transportation hazardous materials regulations.

G Please include a copy of the trade allowance offer.

H Is this new item offer made to all customers on an equal and proportionate basis?  
 Yes     No    If no, please provide buyer with a written explanation.

I Have sufficient samples been provided the Category Manager for scan verification?     Yes

J Have two live samples or package flat (perishables) been sent to the National Product Library?  
 Yes     No    \*\* If no, see other side for address.

### Safeway's Use Only      Category Manager/Buyer Comments

1) SMIC - Grp						2) SMIC - Grp						Unit Pricing Information Table #    Measure    # Days	Shelf Life # Days
Cat	Class	SClass	SSClass	Sensitivity		Cat	Class	SClass	SSClass	Sensitivity			

Signature of Authorized Company Representative: \_\_\_\_\_      Date: \_\_\_\_\_

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