



* Indicates **required** field

* **1.** Please confirm the items below:

Name of J&J Company:
Business Sponsor Name:
Contact Name:
Phone:
Address:

Below are the Category(ies) of Services your Company will be providing to J&J:

Logistics Intermediaries:
Sales Intermediaries:
Tender Intermediaries:
Lobbyists:
Other Intermediary Services:

Below is the form of compensation(s) for services your Company will be providing to J&J:

* **2.** Does any of the information above in 1.0 need to be updated?

No
Yes

* **3.** Does your country listed below need to be updated?

No
Yes

* **4.** Does your Company have a website?

No
Yes

If Yes, go to **4.1**, if No, go to **5**.

4.1. Please enter the website address:

* **5.** Total number of employees?

1 to 5
6 to 25
More than 25

* **6.** Length of time in business?

Less than 6 months
6 months to 2 years
2 years to 5 years
More than 5 years

* 7. Length of time providing services to J&J?

- Less than 6 months
- 6 months to 2 years
- 2 years to 5 years
- More than 5 years
- No applicable: new J&J TPI

*Note: If your Company has not yet provided services to a J&J company, please select "Not applicable: new J&J TPI"

* 8. What is your Company's form of business organization?

- Proprietorship/Single Owner
- Partnership
- Privately owned corporation or company
- Public corporation or company
- Other: (please describe)

* 9. Are any of the owners of your Company government officials?

- No
- Yes

* 10. Is your Company controlled or owned in whole or in part by a government entity?

- No
- Yes

* 11. Is your Company owned by another entity?

- No
- Yes

If Yes, go to 11.1, if No, go to 12.

11.1. Please provide the legal entity name and address of your parent company:

- * Name
- * Address
- * City
- * State/Province
- * Zip/Postal Code
- * Country

* 11.2. Is your parent company publicly traded in the United States?

- No
- Yes

* 12. Does your Company have subsidiaries, affiliates and/or entities in which your Company has a controlling ownership interest?

- No
- Yes

If Yes, go to 12.1. If no, go to 13.

12.1. Please list the legal name, address and type of relationship for each subsidiary, affiliate and/or other entities in which you have a controlling interest

- * Name

- * Address
- * City
- * State/Province
- * Zip/Postal Code
- * Country
- * Relationship

13. Please list the names of all key personnel, owners and/or principals/partners, and Board of Directors in your Company.

- * First Name
- * Last Name
- * Role
- * Title

*Note: Key Personnel are personnel employed by or otherwise affiliated with the TPI who perform the work required or influence or make important decisions in the context of the TPI's relationship with the J&J company. Such work or decisions may include, but are not limited to:

- Scope of services
- Completion of Due Diligence Survey
- Hands-on performance of services
- Management and oversight of services, including staffing decisions
- Relevant financial arrangements

* **14.** Are any of your Company's key personnel currently a government official?

No
Yes

If Yes, go to **14.1**, if No, go to **15**.

14.1. Please list the legal names of key personnel who are government official:

- * First Name
- * Last Name
- * Government Official Role

* **15.** Bank information: Please list the name and address of the bank that maintains your Company's primary business account.

- * Bank Name
- * Address
- * City
- * State/Province/District
- * Zip/Postal Code
- * Please enter the country where the bank is located

* **16.** Size of Business: Please select the alternative that best reflects your Company's approximate annual revenues in most recent fiscal year.

- 0 to 1 million USD
- 1 to 10 million USD
- More than 10 million USD

* **17.** Business with J&J Company: Please select the alternative that best reflects the approximate percentage of your total revenue from the J&J Company in most recent fiscal year.

Less than 1%
1% to 25%
25% to 50%
More than 50%
Not applicable: New J&J TPI

*Note: If your Company has not provided services to a J&J company in the most recent fiscal year, please select "Not applicable: New J&J TPI"

*** 18. Does your Company have a commercial registration/inscription certificate or number?**

No (please explain)
Yes

If Yes, go to **18.1**; if No, go to **19**.

18.1. Please select your Company's registration type:

Electronic Copy
Paper Copy

*** 19. List all the countries where your Company conducts business:**

*** 20. Identify the country(ies) where your Company will work specifically for the J&J Company:**

*** 21. Provide description of your Company's experience and qualifications in the field of the required services.**

*** 22. Does your Company have supporting documents attesting to its experience and qualifications?**

No
Yes

*** 23. Will your Company request that payment for its services be made to another party?**

No
Yes

If Yes, go to **23.1**, if No, go to **24**.

23.1. Please provide an explanation regarding payment to another designated party.

*** 24. J&J requires payments to be made exclusively in the country(ies) where your Company is established or doing work for the J&J Company. Will your Company request any deviation from this requirement?**

No
Yes

If Yes, go to **24.1**, if No, go to **25**.

24.1. Please provide an explanation regarding payments outside the country(ies) where it is established or doing work for the J&J Company.

*** 25. Do you agree that you cannot and will not be paid in cash or gifts for the activities/services rendered on behalf of J&J?**

No

Yes

If Yes, go to **26**, if No, go to **25.1**.

25.1. Please provide explanation regarding request to be paid in cash or gifts.

* **26.** Do you agree that you cannot request or receive payment nor any other form of compensation not related to the services to be provided?

No
Yes

If Yes, go to **27**, if No, go to **26.1**.

26.1. Please explain request for payment not related to services provided.

* **27.** Does your Company have a written code of conduct/code of ethics?

No (please explain)
Yes

* **28.** Does your Company have a formal ethics and compliance program in place?

No
Yes

If Yes, go to **28.1**, if No, go to **29**.

28.1. Does your Company have a compliance officer?

No
Yes

If Yes, go to **28.2**, if No, go to **29**.

28.2. Please provide your Company's compliance officer's name.

* First Name
* Middle Name
* Last Name
* Years in Role

* **29.** Does your Company have an internal audit function or internal controls system?

No
Yes

* **30.** Does your Company have an employee anti-corruption policy?

No
Yes

If Yes, go to **30.1**, if No, go to **31**.

30.1. Does your Company's anti-corruption policy address anti-kickback, bribery, corruption with government officials, suppliers, vendors, or contractors?

No
Yes

* **31.** Does your Company agree to comply with the following J&J anti-corruption policy in a prospective relationship with the J&J company:

- A requirement to comply with applicable anti-corruption laws

No (please explain)

Yes

- The right of the J&J Company to terminate the relationship for any anti-corruption violations.

No (please explain)

Yes

- The right of the J&J Company to audit your relevant books and records related to the services provided by J&J.

No (please explain)

Yes

- The obligation for a designated person to receive anti-corruption training from J&J and to train your employees providing services under the relationship.

No (please explain)

Yes

- The requirement to provide an annual certification with respect to these principles.

No (please explain)

Yes

* **32.** Your interactions or business transactions on behalf of J&J include:

- Outside of the United States (OUS) Health Care Professionals (HCPs) working in public/government hospitals
- Outside of the United States (OUS) Government Officials (GOs), departments, and/or agencies
- Outside of the United States (OUS) Health Care Professionals (HCPs) working in private practice with no government connections

If response is A or B, go to **32.1**, if response is C, go to **33**.

32.1 Do any of the Government Officials referred to in your answer have authority to make or influence decisions or recommendations regarding (check all applicable):

Pricing of J&J products

Formulary status of J&J products

Reimbursement of J&J products

Purchase of J&J product for companies, institutions, organizations, etc.

Approval of registrations, permits or authorizations related to J&J business interests

Any other registrations, permits or authorizations related to J&J business interests

None of the above

* **33.** Will your Company make payments to GOs or HCPs on behalf or for the benefit of a J&J Company (e.g., for services rendered, for travel expense reimbursement, etc.) as part of reasonably anticipated or required contractual services with the J&J Company?

No (unknown)

Yes

If Yes, go to **33.1**, if No or unknown, go to **34**.

33.1. Please provide additional details regarding the payments to GOs or HCPs on behalf of or for the benefit of the J&J Company.

* **34.** Do any key personnel currently hold, or have previously held, any of the following positions (check all applicable)?

Elected or appointed official, employee, agent or representative of any government agency or institution or government-owned or government controlled company

Political party official

Candidate for political office

Officer, agent, or employee of a publicly funded or public international organization (i.e., UN, IMF, WHO, etc.)

None of the above

If selection is anything but “none of the above” go to **35**, if “none of the above” go to **36**.

*Note: Key Personnel include the individuals in your organization who will oversee your services for J&J.

* **35.** Can any of the Key Personnel make or influence decisions or recommendations regarding (check all applicable)?

Pricing of J&J products

Formulary status of J&J products

Reimbursement of J&J products

Purchase of J&J product for companies, institutions, organizations, etc.

Approval of registrations, permits or other authorizations related to J&J products

Any other registrations, permits or authorizations related to J&J business interests

None of the above

35.1. Please provide the name and job title for each key personnel who currently holds (or formerly held) a government position.

* First Name

* Last Name

* Job Title

* **36.** Do any family members of key personnel currently hold, or have formerly held, any of the following positions (check all applicable)?

Elected or appointed official, employee, agent or representative of any government agency or institution or government-owned or government controlled company

Political party official

Candidate for political office

Officer, agent, or employee of a publicly funded or public international organization (i.e., UN, IMF, WHO, etc.)

None of the above

If selection is anything but “none of the above”, go to **37**; if “none of the above” go to **38**.

* **37.** Can any family members of the key personnel make or influence decisions or recommendations regarding (check all applicable)?

- Pricing of J&J products
- Formulary status of J&J products
- Reimbursement of J&J products
- Purchase of J&J product for companies, institutions, organizations, etc.
- Approval of registrations, permits or other authorizations related to J&J products
- Any other registrations, permits or authorizations related to J&J business interests
- None of the above

37.1. Please provide the name, job title, and description of the relationship for the family member for each key personnel.

- * First Name
- * Last Name
- * Job Title
- * Description of the relationship and government agency

* **38.** Has a government body and/or government official asked you or your Company to make any non-contractual payments and/or provide items of value with respect to the J&J relationship?

- No (Not applicable: New J&J TPI)
- Yes

Yes or No, go to **39**; New J&J TPI go to **41**;

*Note: When considering your answer, please disregard payments related to taxes, titles, and custom fees.

* **39.** Has a government body and/or government official asked you or your Company to involve a specific supplier with respect to any J&J contracts?

- No
- Yes

If 38 and/or 39 = Yes, go to **40**; if 38 and 39 = No, go to **41**.

* **40.** Do any of the Government Officials referred to in your response have authority to make or influence decisions or recommendations regarding (check all applicable):

- Pricing of J&J products
- Formulary status of J&J products
- Reimbursement of J&J products
- Purchase of J&J product for companies, institutions, organizations, etc.
- Approval of registrations, permits or other authorizations related to J&J products
- Any other registrations, permits or authorizations related to J&J business interests
- None of the above

If selection is anything but "none of the above", go to **40.1**.

If "none of the above" go to **41**.

40.1. Please provide the name and job title of each government official who has authority to make or influence decisions or recommendations.

- * First Name
- * Last Name

* Job Title

* **41.** Do you expect to use any sub-intermediaries to perform the required work on behalf of the J&J Company?

No
Yes

If Yes, go to **41.1**, if No, go to **42**.

41.1. What type of services will sub-intermediaries provide?

Sales Intermediaries (SIs):

SI: Assists in soliciting business for the sale of J&J Company's products or services

SI: Takes title to inventory

SI: Sales Intermediary and J&J jointly own inventory

SI: Handles customer invoicing

SI: Handles warehousing

SI: Handles delivery

SI: Handles debt collection

SI: Manages customer relationship

SI: Manages marketing and sales activity with J&J providing marketing support

SI: Manages marketing and sales activity without J&J providing marketing support

SI: Sales Intermediary and J&J share sales activities and customer relationship, with J&J providing marketing support.

SI: Other activities or services: (please describe)

Logistics Intermediaries (LIs):

LI: Responsible for warehousing

LI: Responsible for delivery

LI: Responsible for debt collection

LI: Acts on behalf of J&J by clearing of goods in the sales chain through Customs and other government agencies (Customs Brokers)

LI: Acts on behalf of J&J by arranging shipment of goods in the sales chain (freight forwarders - by land, sea or air)

LI: Interacts directly with HCPs/GOs to arrange delivery and/or collection from customer sites (e.g., hospitals)

LI: Other activities or services: (please describe)

Tender Intermediaries (TIs):

TI: Interacts on behalf of J&J in a public procurement process (tenders)

TI: Other activities or services: (please describe)

Lobbyists:

Lobbyists: Interacts with GOs on behalf of J&J with respect to government actions or plans that may impact the interests of J&J Companies

Lobbyists: Other activities or services: (please describe)

Other Intermediary Services:

Other: Contract/Clinical Research Organizations ("CRO")

Other: Regulatory consultants

Other: Travel agents (non-AMEX)

Other: Meeting planner

Other: Media agency

Other: Intermediary arranges site visits for HCPs/GOs (including regulatory agency inspections)

Other: Other activities or services: (please describe)

41.2. How many sub-intermediaries do you expect to use?

1 to 5

More than 5

41.3. Will any sub-intermediary interact with HCPs or government officials on behalf of the J&J Company?

No

Yes

If Yes, go to **41.4**, if No, go to **41.5**.

41.4. Please explain the sub-intermediary's interaction with HCPs or government officials.

41.5. Will the J&J Company have a direct role in the selection, approval, management or supervision of any sub-intermediary that you will use?

No

Yes

If Yes, go to **41.6**, if No, go to **41.7**.

41.6. Please provide the name and contact information of the sub-intermediary:

* Sub-intermediary Name

* Contact First Name

* Contact Last Name

* Contact Email

41.7. Will any such sub-intermediary perform approximately half or more of the contractual obligations under the prospective agreement?

No

Yes

If Yes, go to **41.8**, if No, go to **41.9**.

41.8. Please provide the name and contact information of the sub-intermediary:

* Sub-intermediary Name

* Contact first name

* Contact last name

* Contact e-mail

41.9. Will any such sub-intermediary generate approximately half or more of your Company's annual revenue?

No

Yes

If Yes, go to **41.10**, if No, go to **41.11**.

41.10. Please provide the name and contact information of the sub-intermediary:

- * Sub-intermediary Name
- * Contact First Name
- * Contact Last Name
- * Contact Email

41.11. Are or were any of your sub-intermediaries recommended to you by a government official, governmental body or political organization?

No
Yes

If Yes, go to **41.12**, if No, go to **42**.

41.12. Please provide the name and contact information of the sub-intermediary

- * Sub-intermediary Name
- * Contact First Name
- * Contact Last Name
- * Contact Email

* **42.** Does your Company have the required licenses to perform the services requested by the J&J Company?

No/Not applicable (please explain)
Yes

* **43.** Have any of your Company's employees who will provide services to the J&J Company been subject to regulatory sanctions, penalties, debarments and/or professional suspensions related to bribery, money laundering, fraud, or other relevant offenses?

No
Yes

If Yes, go to **43.1**; If No, go to **44**.

43.1. Please provide description of circumstances and remedial actions that have been taken.

* **44.** Have you, your management or your agents been involved in any investigation related to bribery, money-laundering, fraud or other serious offenses within the past 5 years?

No
Yes

If Yes, go to **44.1**; If No, please go to Training.

44.1. Please provide general description of circumstances.