Publix Item Data Form Instructions for Vendors

Purpose

The *Publix Item Data Form* is required when any new item is presented or when any item attributes are changed on an existing item. This form must be accompanied by a current *Publix Cost/Promotion Form*.

Vendor procedures

Follow the steps below to complete the **non-shaded areas** of the *Publix Item Data Form*. The information must be typed. When making changes on an existing item, fill out the data form completely and highlight all of the fields that are changing.

Field Description	Action
Accompanying Form #	Enter the *Publix Cost/Promotion Form* number that coincides with this *Publix Item Data Form*.
Date Effective	Enter the date this is effective.
☐ New Item ☐ Item Maintenance	Check the appropriate box. Check Item Maintenance box only when changes are made to an item that exists in Publix's system.
Buyer Name/#	Enter the name and number of the buyer to whom the *Publix Item Data Form* is presented.
Publix Item Code	Enter the Publix item code. Provide only when performing maintenance to current items, not when adding new items. **List additional item codes on the back of this form if there is more than one item in a shipper or if you are providing maintenance information on a group of like items.**
Vendor #	Enter the number assigned by Publix for a supplier. **List additional vendor numbers and names on the back of this form.**
Description	Enter the description of the item, including the brand name if it appears on the product label.
Vendor Name	Enter the manufacturer's name.
Vendor Item Code	Enter the vendor's item code for any item that will not have a GTIN or a product look up number.
Master Case GTIN	Enter the unique GTIN assigned to the master case in the format xxx-xxxxx-xxxxx.
Master Case Check Digit	Enter the unique Check Digit assigned to the master case GTIN.
Master Case Pack	Enter the number of selling units in one master case.

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Publix Item Data Form Instructions for Vendors, Continued

Vendor procedures,
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Field Description	Action
Master Case Code Type	Check the appropriate box to indicate what type of number will be included in the GTIN field of the EDI transmission. Items that have a UCC Standard GTIN will check "RG - Regular."
Inner Case GTIN	Enter the unique GTIN assigned to the inner pack case in the format xxx-xxxxx-xxxxx.
Inner Case Check Digit	Enter the unique Check Digit assigned to the inner case GTIN.
Inner Case Pack	Enter the number of selling units in one inner pack case.
Shipper Y/N	Check the appropriate box.
Item GTIN	Enter the scannable code that identifies the item. Be sure to include all digits (except the check digit), using the format xxx-xxxxx-xxxxx..
Item GTIN Check Digit	Enter the unique Check Digit assigned to the item GTIN.
Compressed UPC	Enter the scannable code that identifies the item. Be sure to include all digits.
Ret Pkg Type	Check the retail package type that identifies whether the item is regular, prepriced, off label, or bonus.
Label Amount	Enter the label amount. If the item is prepriced or has an off label amount, enter the amount that is on the label. Example: 10¢ off or $1.89 pre-priced
Size	Enter the actual number of ounces or square feet, etc. of the product.
Size Unit of Measure	Enter the type of measurement used to describe the item size (i.e. units of measure). Example: oz., lb., rl., ea., etc.
Retail Pack	Enter the number of units in the retail package that will be scanned as one consumer purchase. For most items the number of units is one. A 6-pack of cola is an example of one consumer purchase entered as a retail pack of six units.
Repack	Enter the number of Publix shipping cases within a master case.
M/C Weight	Enter the actual weight of the master case in pounds.
M/C Net Weight	Enter the actual weight of the product without the container. Example: Canned dog food - 12 pack of 20 oz cans = 15 lbs.

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Publix Item Data Form Instructions for Vendors, Continued

Vendor procedures,
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Field Description	Action
M/C Hi	Enter the number of tiers of product shipped on a pallet.
M/C Ti	Enter the number of cases in one tier.
M/C Length	Enter the length of the master case in inches. (No fractions, use decimals)
M/C Width	Enter the width of the master case in inches. (No fractions, use decimals)
M/C Height	Enter the height of the master case in inches. (No fractions, use decimals)
I/C Weight	Enter the actual weight of the inner case in pounds.
I/C Net Weight	Enter the actual weight of the product without the container. Example: Canned dog food - 12 pack of 20 oz cans = 15 lbs.
I/C Length	Enter the length of the inner case in inches. (No fractions, use decimals)
I/C Width	Enter the width of the inner case in inches. (No fractions, use decimals)
I/C Height	Enter the height of the inner case in inches. (No fractions, use decimals)
Born on Days	Enter the maximum number of days allowed since manufacture date (born on date) in order for a perishable item to be accepted into inventory. Example: A perishable item with a born on days of 10 will not be received more than 10 days after the manufacture date.
Product Date	Indicate whether the date on the product case is the manufactured date or the expiry date.
Seasonal Begin Date	Enter the date the season begins if the item is a seasonal item.
Seasonal End Date	Enter the date the season ends if the item is a seasonal item.
Brand	Enter the brand name under which the product is sold. Example: Purina, Tide, Huggies, Sprite, Whiskas
Size	Enter the actual number of ounces or square feet, etc. of the product.
Minority Manufacturer	Check the proper minority group if this item is manufactured by a firm owned or controlled by a minority or a minority group. Check "No" if not. *(Used for reporting purposes only.)*

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Publix Item Data Form Instructions for Vendors, Continued

Vendor procedures,
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Field Description	Action
Manufacturer	Enter the name of the company that manufactures the item. Example: Kimberly-Clark, Kraft, Procter & Gamble
Pkg Description	Check the type of container in which the product is packaged. Example: Box, Can, Bag, Bottle, Jar, or Package
Country of Origin	Enter the country in which the product is manufactured.
Container Type	Enter the type of material out of which the container is made. Example: Glass, Cardboard, Plastic, etc.
Hazardous Material Y/N	Enter Yes or No to indicate whether or not the product contains materials that the government classifies as hazardous.
Drug Schedule Code	Enter the DEA drug schedule classification for this item.
Narcotic Y/N	Enter Yes or No to indicate whether or not the item is a narcotic.
Organic Y/N	Enter Yes or No to indicate whether or not the item is organic.
Vendor Comments	Enter additional comments.
Vendor is held accountable for Item scanability.	Make sure the bar code (UPC) is legible and can be read by the scanners. Must scan at least 97% of the time.
Typed Name	Type the name of the person signing the *Publix Item Data Form*.
Sales Rep. Signature	Sign the *Publix Item Data Form*. *Publix Item Data Forms* must be signed or they will not be accepted by Publix. This must be the signature of the person presenting the *Publix Item Data Form*.
Local Chains Presently Stocking	*(on the back)* Enter the retailer name and the current retail of the item presently stocked by other retailers in the area.