Supplier:
SAP Business Network Account Creation and Registration

This job aid provides step-by-step guidance for suppliers to create an SAP Business Network account and complete the External Questionnaire registration form. Completion of registration establishes the supplier's SAP Business Network account and allows the requesting hospital to do business with the supplier.

Completion of the registration form is required before a supplier can maintain their own profile (e.g., name, address, and bank information) directly in Ariba Supplier Lifecycle Performance (SLP). The supplier has 30 days to complete the questionnaire before it expires; they will receive multiple reminder emails from the system.

Note: Registration does not enable a supplier to transact with customers through the SAP Business Network.

This job aid lists the following steps:

- Supplier sets up an account on the SAP Business Network
- Trade/Non-Trade Supplier completes the External Questionnaire received in the registration email in Ariba Supplier Lifecycle Performance (SLP)

Transaction Names	Fiori Apps / Transaction Codes / Interface
Create SAP Business Network Account	SAP Business Network, SAP Ariba Supplier Lifecycle Performance (SLP)
Complete and Submit External Questionnaire	SAP Business Network, SAP Ariba Supplier Lifecycle Performance (SLP)

Disclaimer:

- The screenshots in this job aid represent what you will see when working in SAP SLP and the SAP Business Network. You may notice some variation between the screenshots in this document and the live system.

Create SAP Business Network Account

Once the hospital approves the new supplier request, the system sends an email notification to the requestor, as well as an email notification to the supplier to register on the SAP Business Network and complete the external questionnaire.

Step 1: In the invitation email, click the **Click Here** hyperlink to begin registration.

From: <s4system-prod+mohawkmedbuy.Doc5727262339@ansmtp.ariba.com>
Sent: June 18, 2026 1:41 PM
To:
Subject: Action Required: Register to become a supplier with Mohawk Medbuy Corporation Supplier Registration for

Mohawk Medbuy Corporation

Register as a supplier with Mohawk Medbuy Corporation

Hello,
as invited you to register to become a supplier with Mohawk Medbuy Corporation.

On behalf of the member hospitals listed below, MMC supports supplier onboarding and vendor information centrally through the SAP Business Network (Ariba Network).

Member Hospitals Supported by MMC:
- Lakeridge Health
- North York General Hospital
- Scarborough Health Network
- Sinai Health
- Sunnybrook Health Sciences Centre
- Toronto East Health Network / Michael Garron Hospital
- Women's College Hospital

Required Action

Please complete the online supplier registration as soon as possible after receiving this invitation. **Timely completion of this process is important and failure to complete registration may result in delays in purchase order processing and invoice payments**.

Getting Started

If your organization already uses the SAP Business Network, simply sign in with your existing username and password. If not, you can quickly create a free account and complete the supplier registration using the link in this invitation.

1 Click Here.

Once you're set up, you'll be able to keep your company information up to date (such as your name, address, and banking details) and easily receive orders and submit invoices to Mohawk Medbuy and its member hospitals.

You are receiving this email because your customer, Mohawk Medbuy Corporation, has identified you as the appropriate contact for this correspondence. If you are not the correct contact, please contact Mohawk Medbuy Corporation.

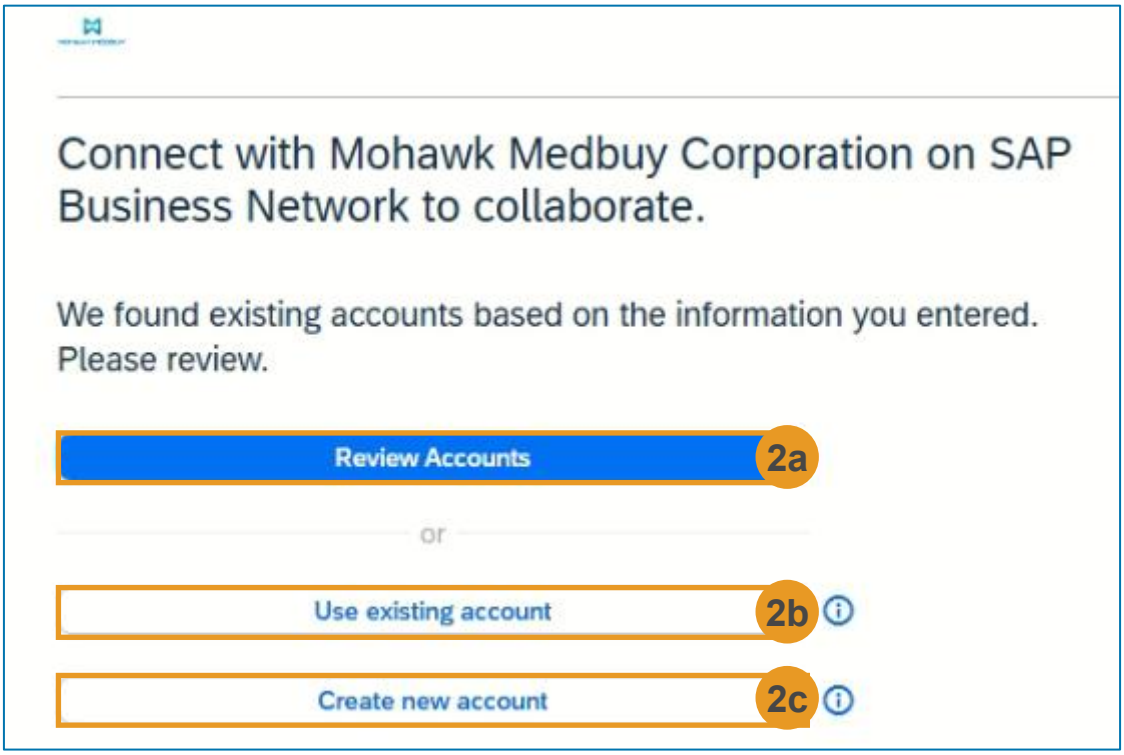
Create SAP Business Network Account

Step 2: An SAP Business Network page displays with the following options:

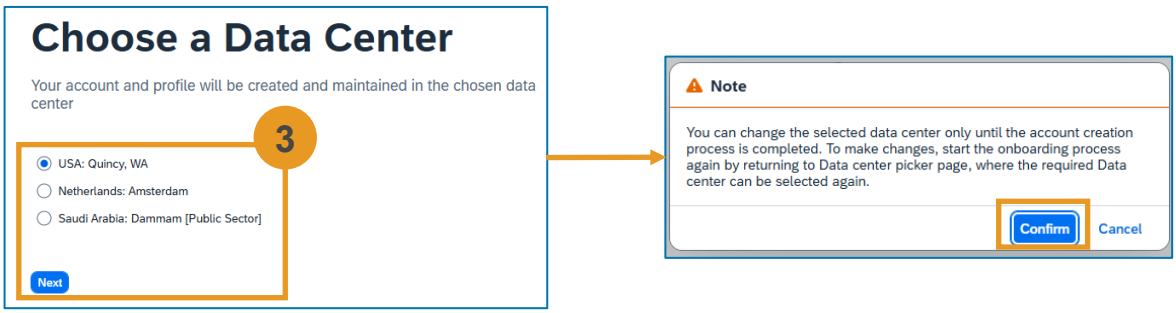
a. **Review Accounts:** If a Supplier is unsure whether they have an existing account, click Review Accounts to check. Reset username and/or password if needed.

b. **Use existing account:** If the Supplier has an existing SAP Business Network account, they may use that account to register with MMC. Click **Use existing account**, log into the **SAP Business Network,** and go to **Step 15**.

c. **Create new account:** If the Supplier does not have an existing SAP Business Network account, click **Create new account**.

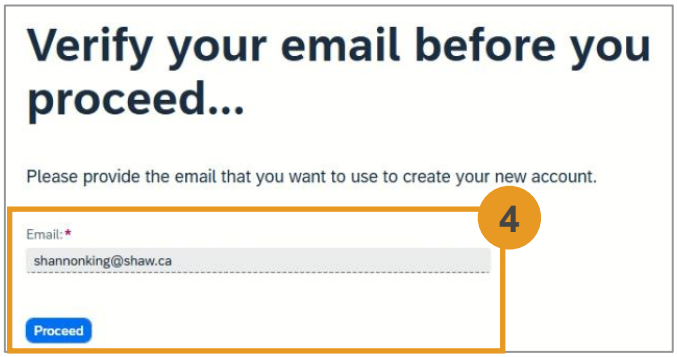


Step 3: Choose a **Data Center** location and click **Next**. Click **Confirm** to bypass the **Note**.

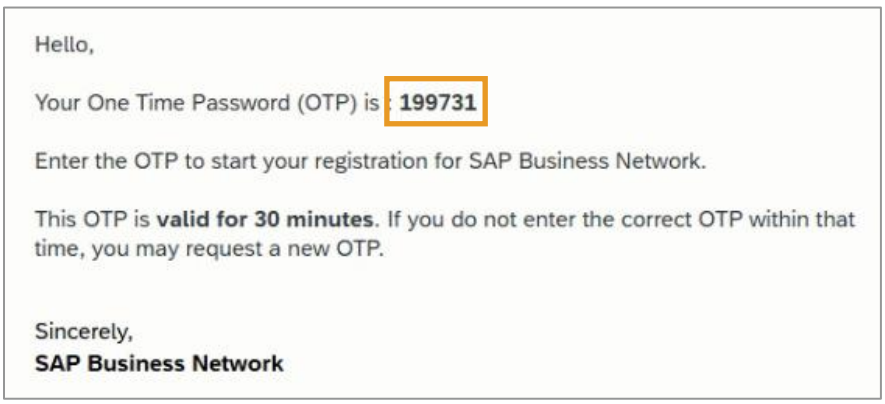


Create SAP Business Network Account

Step 4: Verify your email and click **Proceed**.



Step 5: The system sends a one-time passcode to your email. Enter the passcode and click **Continue**.



The system sends an email to the Supplier contact to confirm their email.

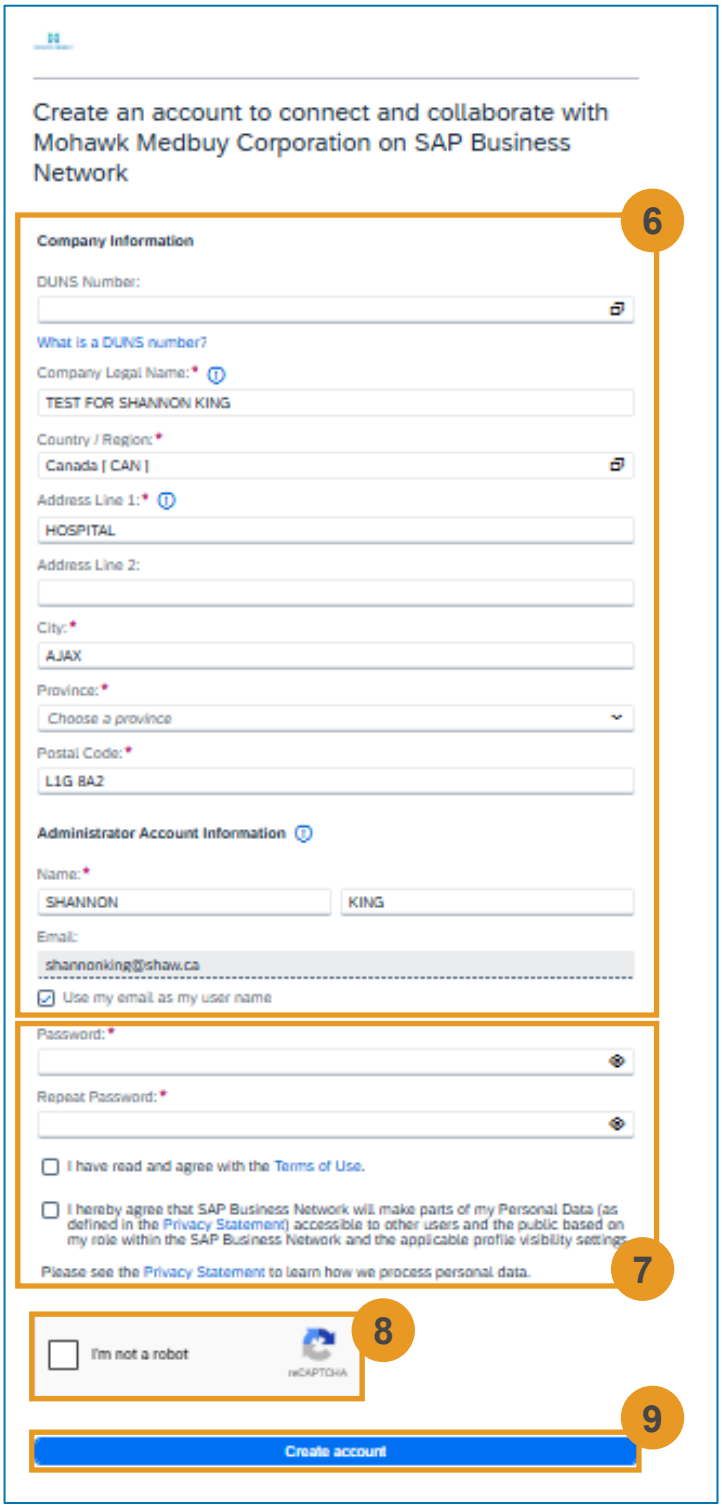
Create SAP Business Network Account

Step 6: Enter your **Company Information**. Some details are auto-populated from the Supplier Request Form that was initiated by MMC or the hospital. Supplier can update these details and add additional details, as required. Any field with an asterisk (*) is mandatory.

Step 7: Enter a **Password** and **Repeat Password.** Select the checkboxes corresponding to the terms and conditions to proceed.

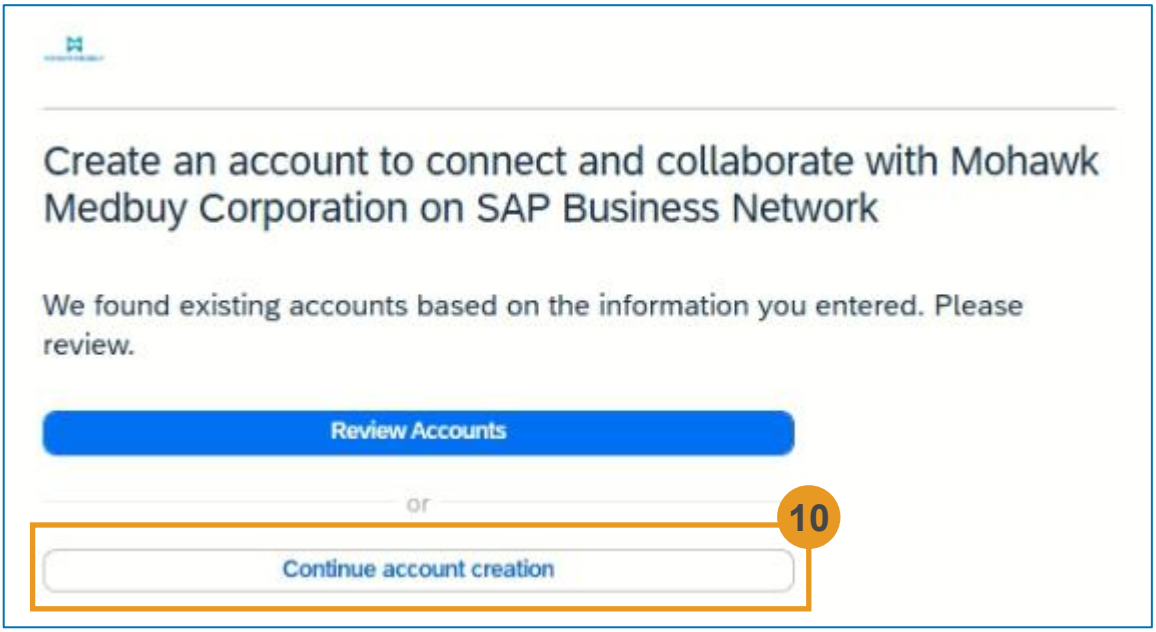
Step 8: Complete the **Captcha** verification.

Step 9: Click **Create account** to create a new SAP Business Network account.

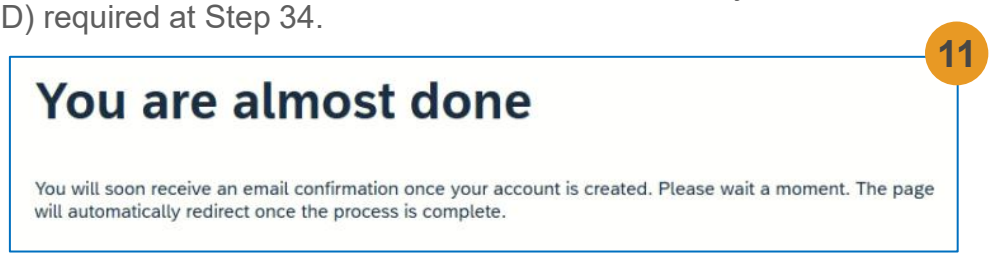


Create SAP Business Network Account

Step 10: You may be prompted to review existing accounts that are similar to the information you entered. Select to review or click **Continue account creation**.



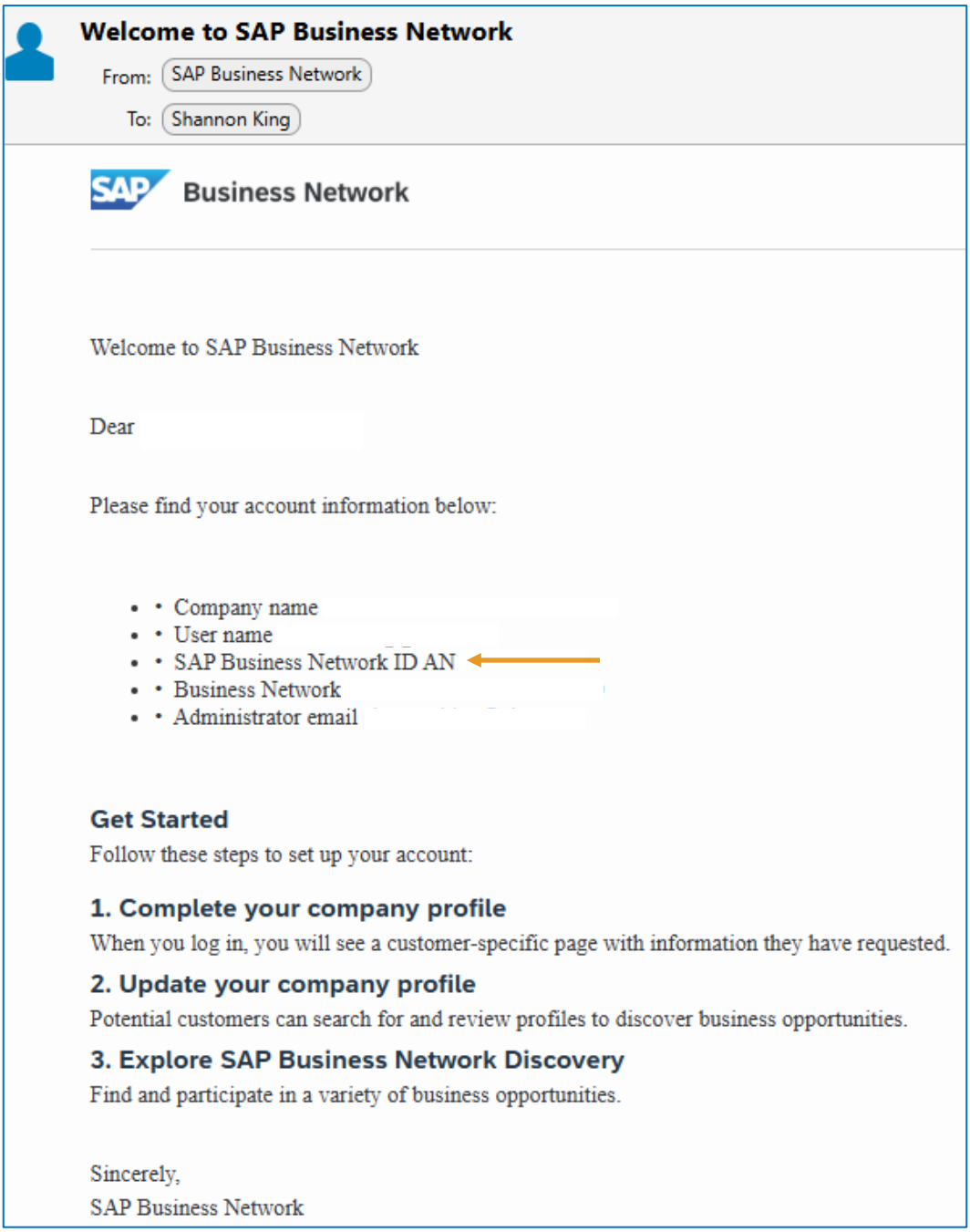
Step 11: A message displays indicating you will soon receive an email confirmation once your account is created. Refer to the confirmation email for your SAP Business Network ID (ANID) required at Step 34.



Step 12: You are prompted to update your company profile. Click **Update**.

Create SAP Business Network Account

Note: Refer to the **Welcome to SAP Business Network** email for your **SAP Business Network ID (ANID)** required at Step 34.



Welcome to SAP Business Network

From: SAP Business Network

To: Shannon King

SAP Business Network

Welcome to SAP Business Network

Dear

Please find your account information below:

- Company name
- User name
- SAP Business Network ID AN
- Business Network
- Administrator email

Get Started

Follow these steps to set up your account:

1. Complete your company profile

When you log in, you will see a customer-specific page with information they have requested.

2. Update your company profile

Potential customers can search for and review profiles to discover business opportunities.

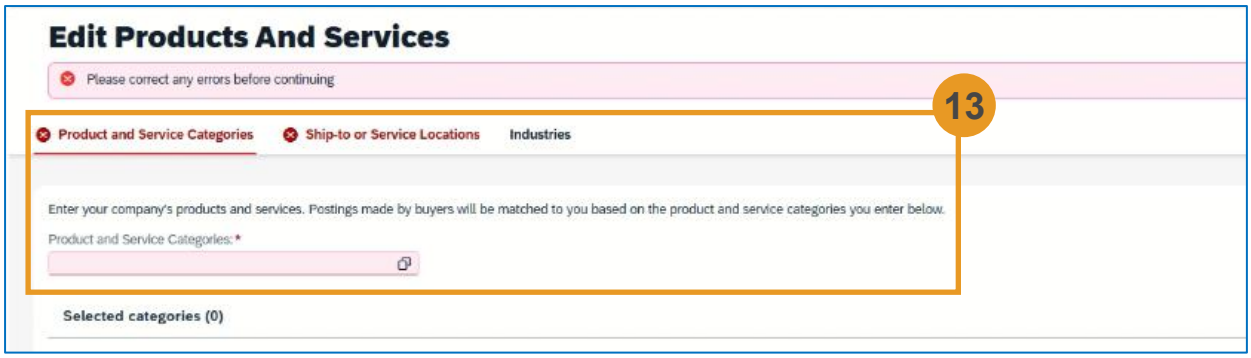
3. Explore SAP Business Network Discovery

Find and participate in a variety of business opportunities.

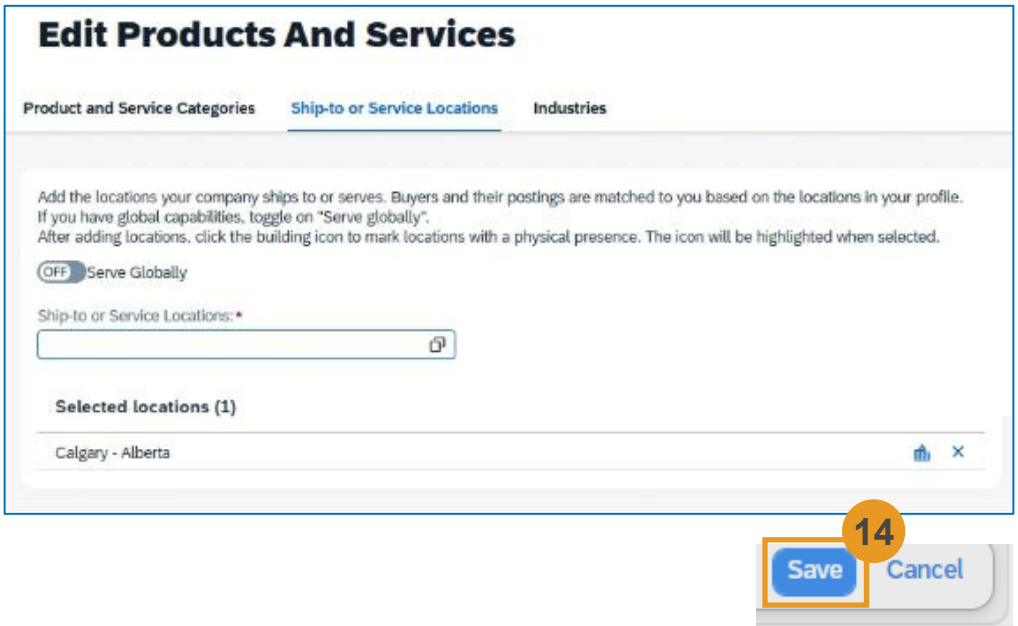
Sincerely,
SAP Business Network

Create SAP Business Network Account

Step 13: The **Edit Products and Services** screen displays. Enter your company's products and services (minimum one) by typing in key words and **clicking** to **select** from the options. Alternatively, you can **drill down** on categories. Selected categories do not need to be exact and do not impact how suppliers transact with customers. Enter **a Ship-to or Service Location** as well.



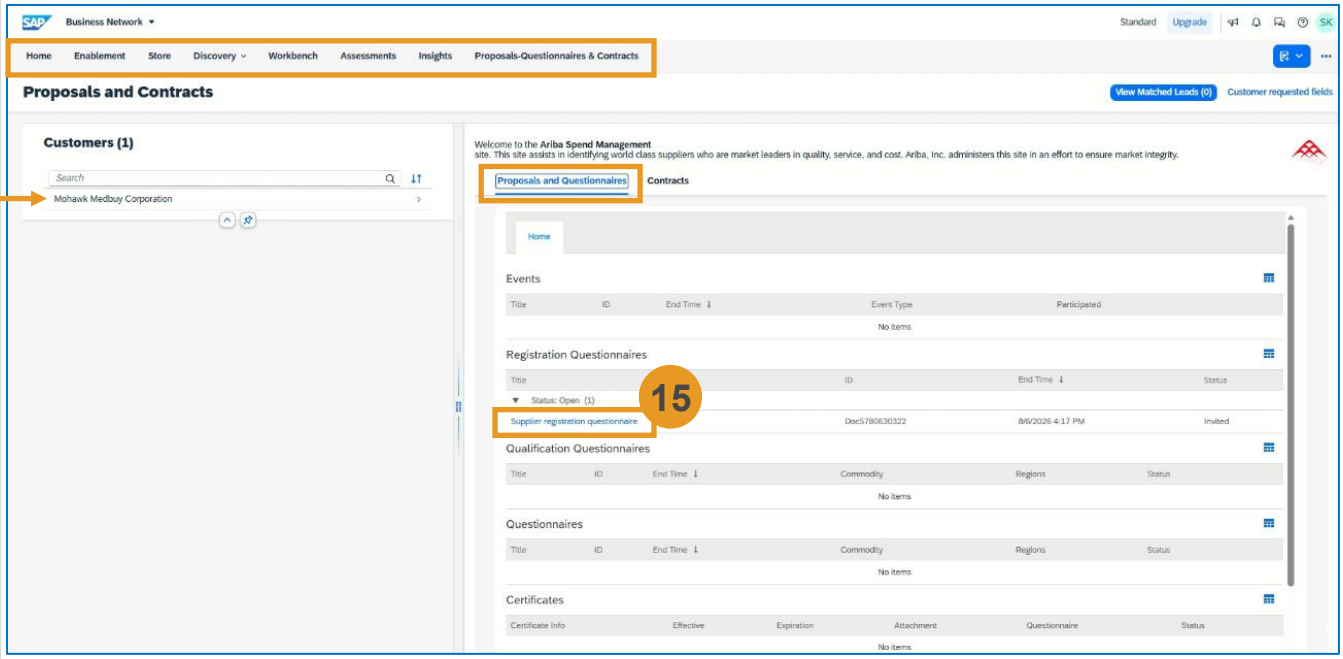
Step 14: Once you have selected a least one Product and Service Category and Ship-to or Service Locations, click **Save**.



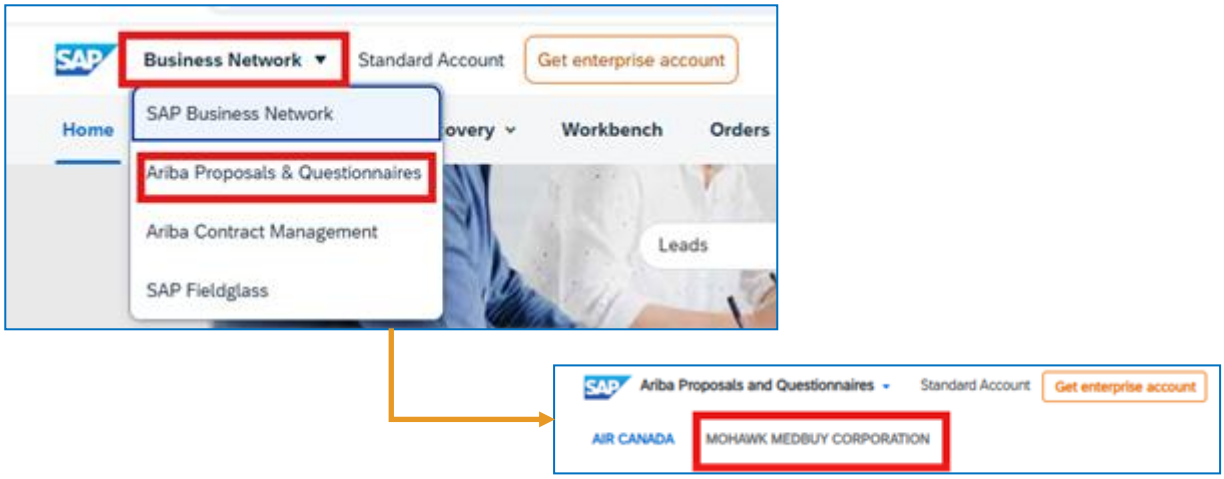
Complete Supplier External Questionnaire

Step 15: The **SAP Business Network** portal displays on the **Proposals and Questionnaires** tab. Click the **Supplier registration questionnaire** link.

Note: Use the tabs at the top of the screen to navigate between the different areas.



If you are an existing vendor, after logging into the **SAP Business Network**, you may need to navigate to the **MMC Registration Questionnaire** by clicking the **Business Network** drop-down menu and selecting **Ariba Proposals & Questionnaires**. Click the **Mohawk Medbuy Corporation** tab.

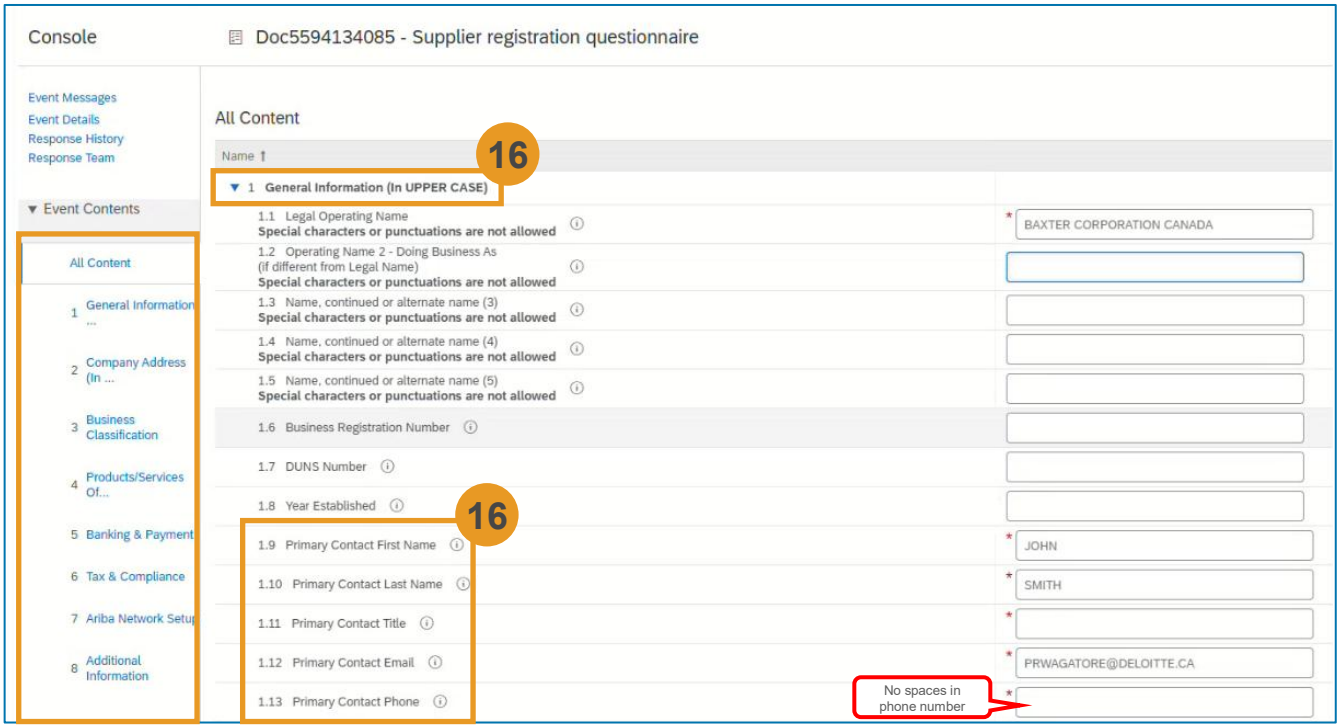


Complete Supplier External Questionnaire

In the **Supplier registration questionnaire**, navigate through all the sections to populate all the mandatory fields marked with a red asterisk (*). Mouse over the info icon besides the fields ⓘ to reveal more instructions.

Step 16: Under **General Information**, validate/enter the Supplier legal name and contact name, title, email, and phone number (no spaces).

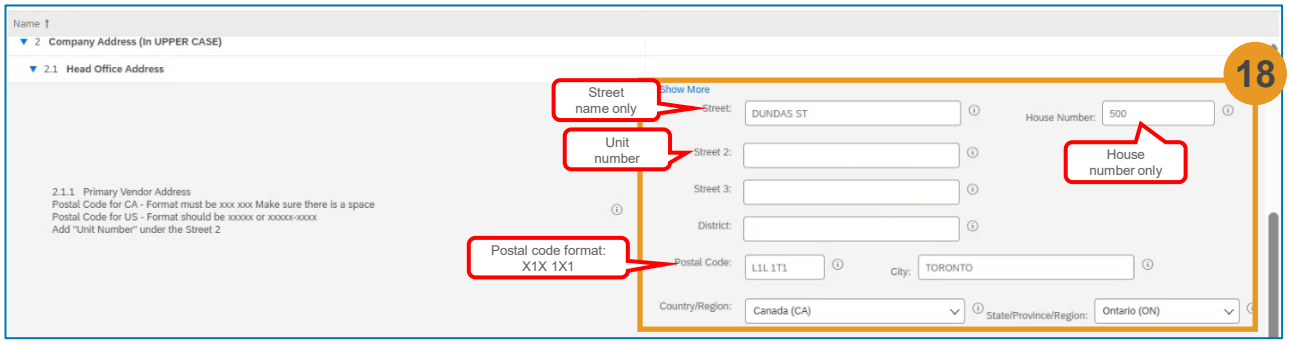
IMPORTANT: Leave 1.6 Business Registration Number field blank.



Step 17: **Email address for EFT payment** is how the supplier is notified when an EFT payment is made.

Complete Supplier External Questionnaire

Step 18: Under **Company Address**, the Supplier validates the information (defaulted from the Supplier Request form; must be in ALL CAPS).



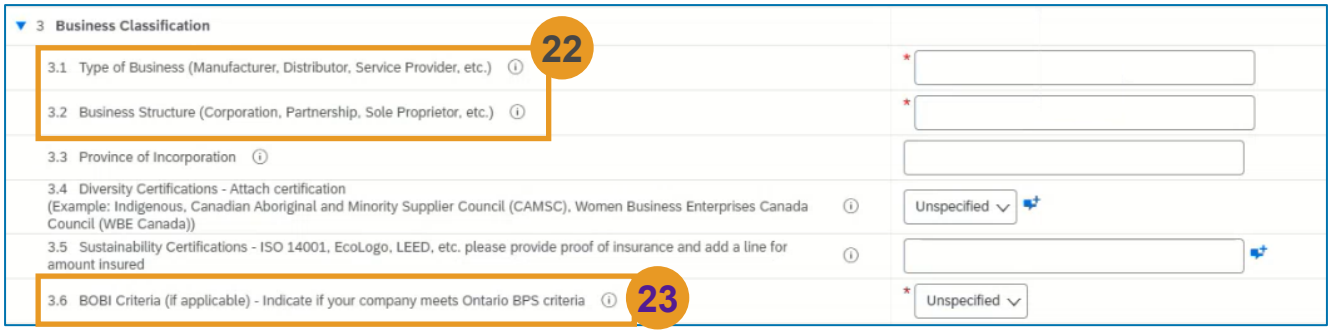
Step 19: **General Email Address** can be the same as the contact email.

Step 20: **Are POs issued to the Head Office address?** If POs are issued (i.e., goods and services delivered) to a different address than the Head Office, select No, then populate the Shipping Address section (2.2).

Step 21: **Are Invoices paid to the Head Office address?** If invoices are initiated from and paid to a different location than the Head Office, select No and populate the Payment Remittance Address details (2.3), including the Email address for EFT payment.

Step 22: Under **Business Classification**, enter the **Type of Business** (e.g., Manufacturer, Distributor, Service Provider) and **Business Structure** (e.g., Corporation, Partnership, Sole Proprietor).

Step 23: Select **Yes** if your company meets **Ontario BPS (Broader Public Sector)** criteria (i.e., headquarters or main office in Ontario and/or at least 250 full-time employees in Ontario at the time of the applicable procurement process). Select **No** if you answered no to both questions.

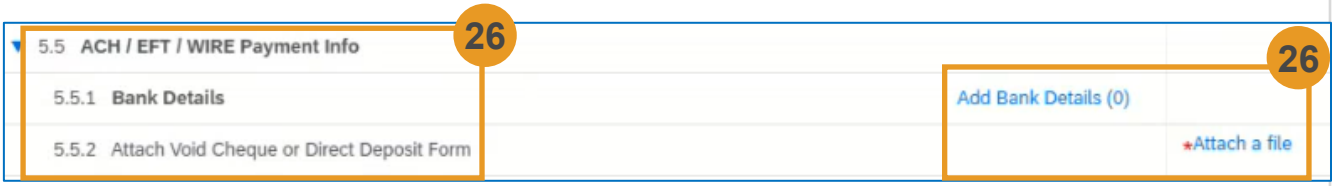


Complete Supplier External Questionnaire

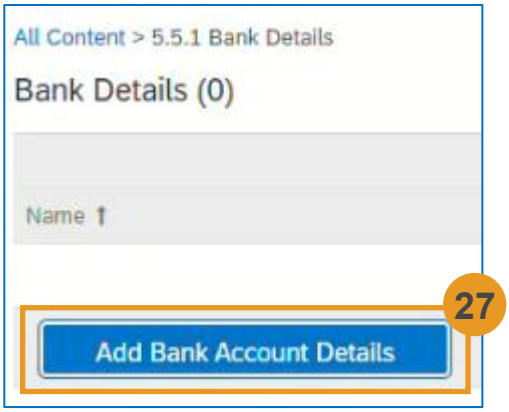
Step 24: Under **Products/Services Offered**, all fields are optional.

Step 25: Under **Banking & Payment**, select the **Payment Currency** and **Accepted Payment Methods for the Hospitals to pay the vendor**. **Early Payment Discounts** is optional.

Step 26: If **ACH**, **EFT,** or **WIRE** is selected as the payment method, banking details and a void cheque or direct deposit form are required. Click **Add Bank Details**.

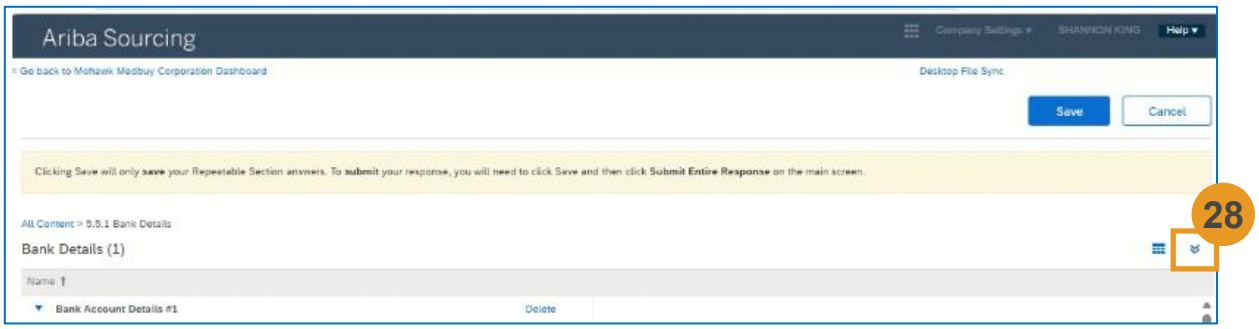


Step 27: Click the **Add Bank Account Details** button.



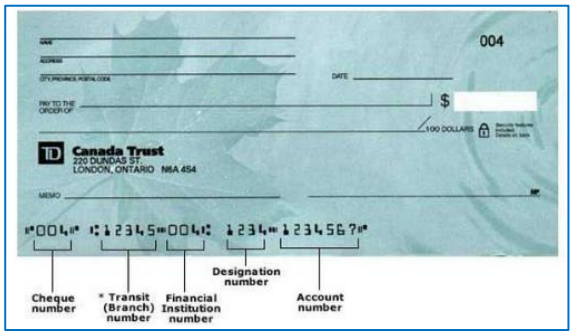
Complete Supplier External Questionnaire

Step 28: Click to **expand** the **Bank Details** screen and **review all the instructions.**



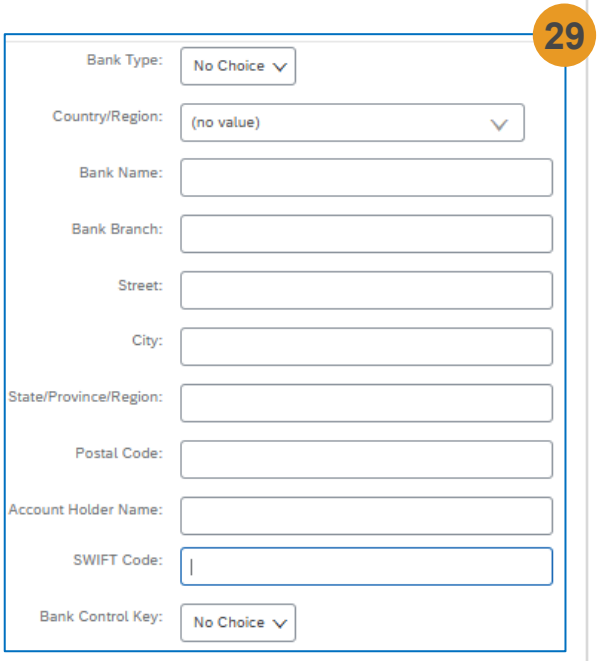
Step 29: Populate the **banking details**. If any details are not entered in the required format, it causes a system error and may require rework. The hospital Data Steward will contact the supplier directly to update.

TIP: Refer to your bank's Direct Deposit Form instructions to ensure you have the correct details (e.g., TD Canada Trust). Code layout on cheques may vary by bank.



Banking Details:

- **Bank Type**: Select from drop-down
- **Country/Region**: Select from drop-down
- **Bank Name**: Enter name
- **Bank Branch (Transit):** Refer to your bank website or cheque; must be 5 digits
- **Street**: Enter street number and name
- **City**: Enter name
- **State/Province/Region**: Abbreviated form (e.g., ON)
- **Postal Code**: Format **M2M 2M2**
- **Account Holder Name:** Enter name
- **Bank Key (ABA Routing Number) 9-digits**: 0 + Financial Institution Number (e.g., 004) + Branch number (e.g., 12345) = e.g.,000412345
- **Account Number**: Refer to cheque (e.g., 1234567). For banks with a Canadian address, the account number should not exceed 12 digits, for U.S.,17 digits.

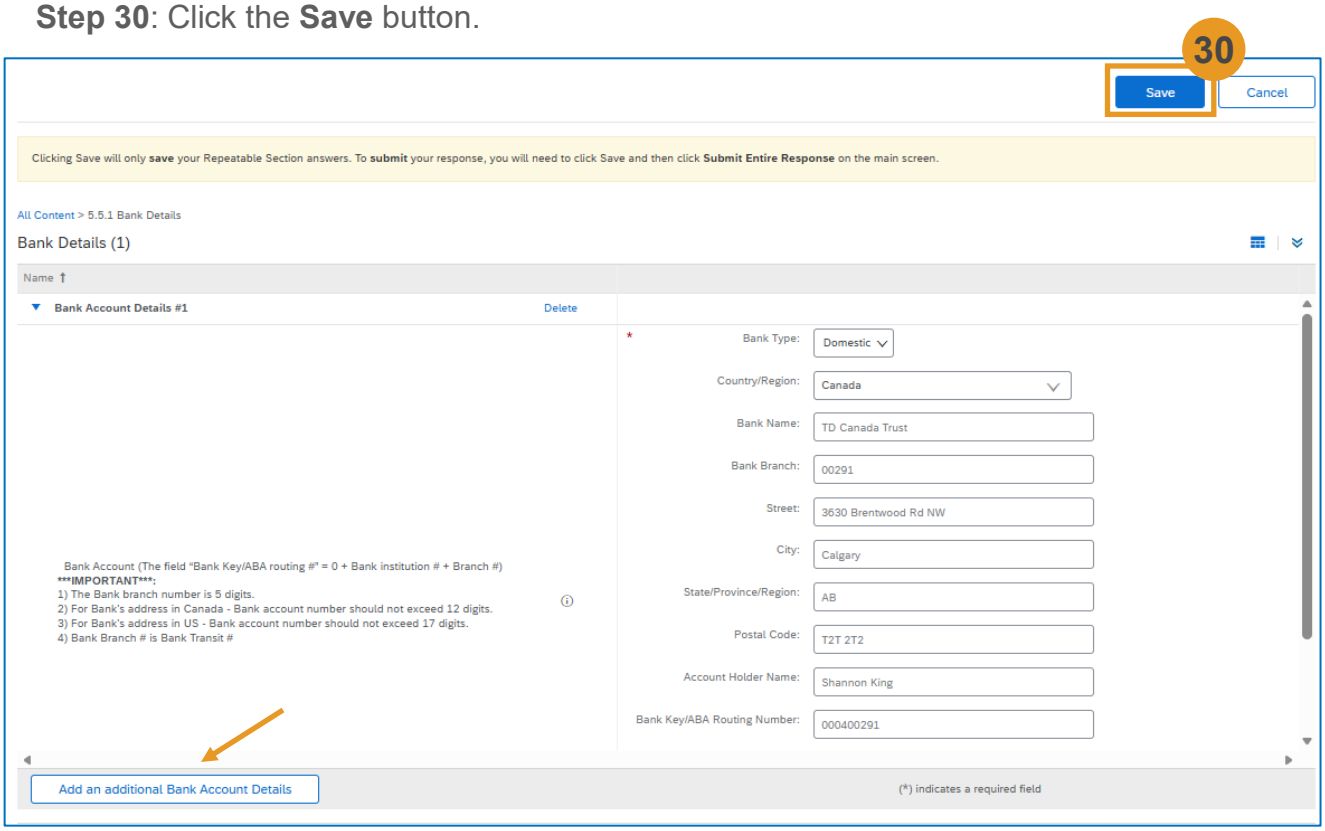


- **Optional: SWIFT Code (Bank Identifier Code):** Refer to your bank website (e.g., TD Canada Trust SWIFT Code is TDOMCATTTOR)
- **Bank Control Key**: No selection required

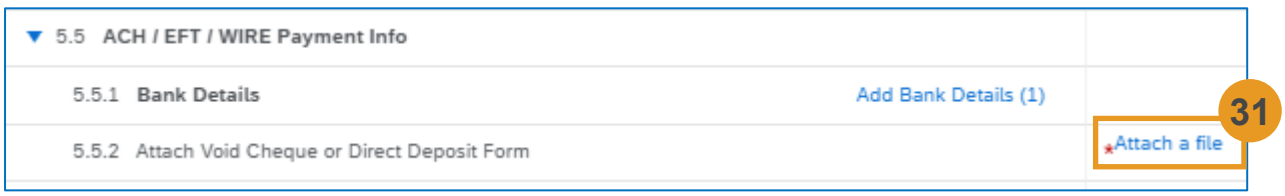
Complete Supplier External Questionnaire

Note: There is an option to add additional Bank Accounts if needed.

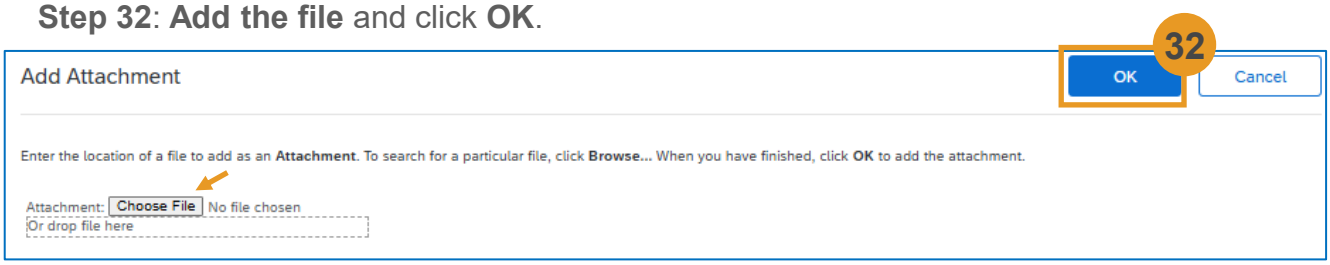
Step 30: Click the **Save** button.



Step 31: Once the Bank Details are added, click to attach a **Void Cheque** or **Direct Deposit Form** (available on your bank website).

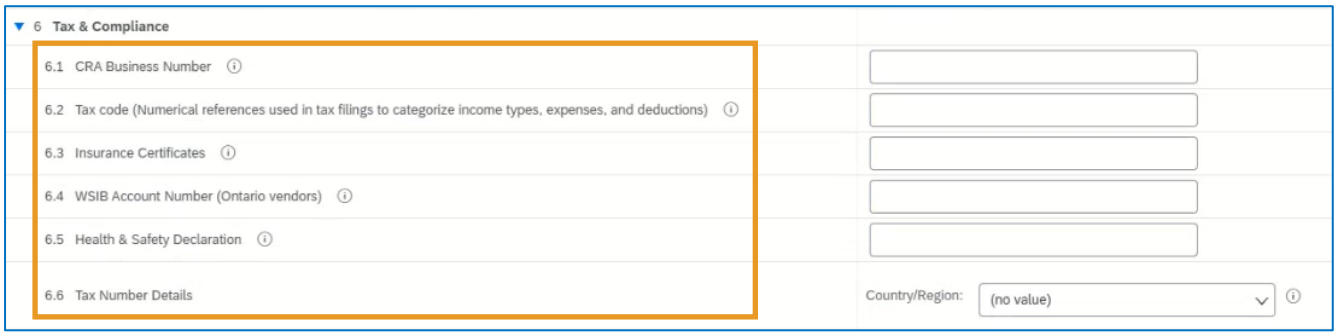


Step 32: **Add the file** and click **OK**.



Complete Supplier External Questionnaire

Step 33: Under **Tax & Compliance,** all fields are optional – **leave blank**.



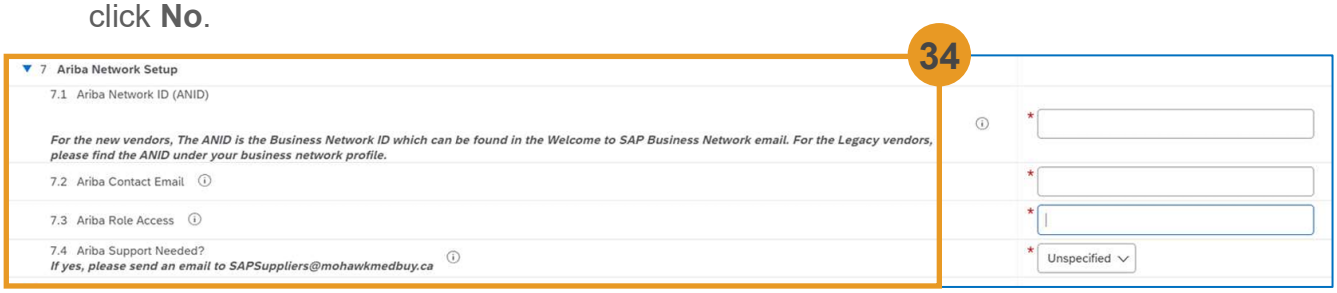
Step 34: Under **Ariba Network Setup**, enter the following information:

a. **Ariba Network ID (ANID)** (i.e., Business Network ID): Can be found on the **Welcome to SAP Business Network** email from **Ariba Commerce Cloud** when the account was **set up (e.g.** Business Network ID: **AN11301558888-T** **from page 7) or in the** SAP Business Network under your **business network profile**.

b. **Ariba Contact Email**: Consider using a shared mailbox for continuity and visibility. This is where all system notifications, alerts, and communications from the **SAP Business Network** will be sent.

c. **Ariba Role Access:** Admin (person who will manage this account)

d. **Ariba Support Needed?:** Select **Yes** to have the **hospital Data Steward** who reviews the External Questionnaire contact the **Supplier** upon receipt. Otherwise click **No**.

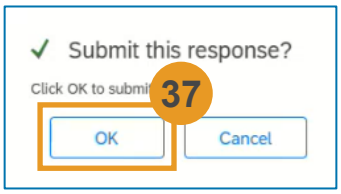


Step 35: Under **Additional Information**, all fields are optional.

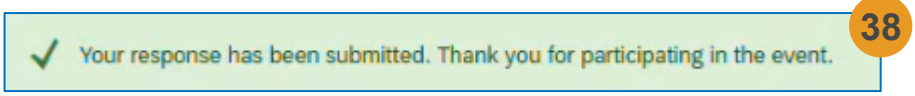
Complete Supplier External Questionnaire

Step 36: Click to **Submit Entire Response**. There are also options to Save draft, Compose Message, or Excel Import.

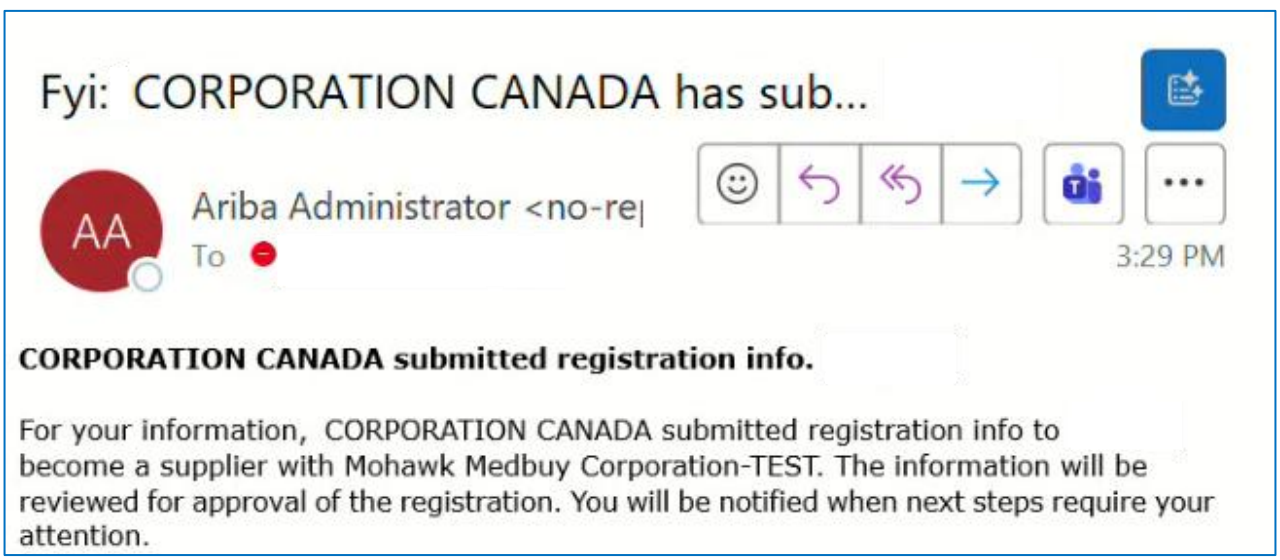
Step 37: Click OK.



Step 38: A message displays indicating the response has been submitted.



On successful submission of the questionnaire, the hospital contact receives an email notification.



Complete Supplier External Questionnaire

The supplier receives an email notification when their external questionnaire has been approved.

Notes:

- The Supplier has 30 days to complete the questionnaire. They will receive multiple reminder emails. If not completed within this period, the request expires, and the Requisitioner will need to reinvite the Supplier to restart the process
- If the Supplier needs to be re-invited, the Supplier should reach out to their hospital contact who can ask the Data Steward to re-invite the Supplier.
- On the External Form, there is a question asking the Supplier if they require support. If the Supplier indicates that they do, the Data Steward is notified and will contact the Supplier directly using the contact information provided in the Supplier Request form