EDI Profile Information and Trading Partner Setup Form (for Illinois deregulation transactions only)

Contact Information

	Ameren Illinois	Supplier Name:
Primary Business Representative:	Sharmiko Weston	
Telephone:	618-530-8928	
After Hours Support:		
Fax:		
E-mail:	SWeston@ameren.com	
Secondary Business Representative:	Ryan McKinney	
Telephone:	618-806-2212	
After Hours Support:		
Fax:		
E-mail:	RMckinney@ameren.com	
Primary Technical Representative:	Ecom Group Communications and Translation	
Telephone:	314-992-6199	
After Hours Support:	314-992-6199	
Fax:		
E-mail:	ecomadministration2@ameren.com	
Secondary Technical Representative:		
Telephone:		
After Hours Support:		
Fax:		
E-mail:		
EDI Vendor (if applicable):		
Contact Name:		
Telephone:		
After Hours Support:		
Fax:		
E-mail:		

Communication Specifications

	Ameren Illinois	Supplier Name:
Versions		
NAESB standard:	Most recent version of NAESB	
Misc Header		
HTTP to/from tag (DUNS Number – Entity		
Common Code):		
Test:	966851875	
Production:	966851875	
Using MA data element 'refnum'/'refnum- orig' in Request? (Y/N):	Yes	
Using MA data element 'time-c-qualifier' in	Yes	
Receipt? (Y/N):		
Using MA data element 'transaction-set' in	Yes	
Request? (Y/N):		
Test URL		
Receipt Computer URL (host name or IP	https://xpcqa.ameren.com:2443/ipnet	
address, directory and program name,	/naesb	
port):		
IP Address:	trywzpa.x.incapdns.net	
	45.223.18.219	
ID:	Gisb	
Password:	Provided via email	
Production URL		
Receipt Computer URL (host name or IP	https://xpcprod2.ameren.com:2443/ip	
address, directory and program name, port)	<u>net/naesb</u>	
IP Address:	htbnfrp.x.incapdns.net	
	45.223.18.219	
ID:	Provided via email	
Password:	Provided via email	
Test and Production - Outbound URL		
Ameren will be sending from		
IP Address:	199.38.133.55	
IP Address:	192.189.96.55	

Public Encryption Key Exchange Procedures

	Ameren Illinois	Supplier Name:
PGP Public Key:	Provided via email	
Finger Print:		
User ID (Alpha, spaces, numbers	Ameren Services Test and Ameren	
only; no special characters):	Services Prod	
Chosen electronic method of key	Email confirmation	
exchange:		

Verification procedures to confirm	Email confirmation	
appropriate exchange of public		
encryption keys:		

Transaction Information

	Ameren Corporation	Supplier Name:
Sub-element Delimiters/Data	Sub: ~	Sub:
Element Delimiters/Segment	Data: *	Data:
Terminators:	Segment:	Segment:
Functional Acknowledgments (997) required?:	Yes	
ISA Qualifier / ISA ID ISA(05)/ISA(06):		
Test:	01 / 966851875	/
Production:	01 / 966851875	/
Interchange Control Version Number ID ISA(12):	00401	
Usage Indicator ISA(15):	"P" for both test and production	"P" for both test and production
Application Sender Code GS(02):	966851875ABC	
Version/Release/Industry Identifier Code GS(08):	004010	

Trading Partner Status

New (Check here if the supplier is not currently utilizing EDI with Ameren or is introducing an additional DUNS number)

_____ Change (Check here if this is a request for a change to the supplier's EDI status with Ameren)

_____ Deactivate (Check here if the supplier no longer would like to utilize EDI with Ameren)

Billing Option(s) that the Supplier will be Utilizing

____ Dual Billing (Only Option for Gas)

_____ Supplier Consolidated Billing (a.k.a. SBO)

Bill Ready Utility Consolidated Billing

X12 Transaction	Description	Version
810 Out	Customer billing or Ameren distribution charges for customers to RES/ARES (Single Bill Option) or RES/ARES energy charges for customers (Rate Ready Billing)	4010
810 In	RES/ARES supplier Invoices (Bill Ready)	
814 In	DASR Requests/Response from RES	4010
814 Out	DASR Notifications/Responses to RES	4010
820 Out	Payment and remittance advice for supplier invoices	4010
824 In	Application Advice	4010
824 Out	Application Advice	4010
831 Out	Control tables for outbound 820s (vendor invoices)	4010
867 Out	Customer meter usage data	4010
997 In and Out	Functional Acknowledgements	3030 & 4010

Rate Ready Utility Consolidated Billing

Effective Date:			
Company Name:	Ameren Illinois	Supplier Name:	
Designated Representative:		Designated Representative:	
By:		By:	
Printed Name:		Printed Name:	
Title:		Title:	